



Wise Traditions

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IN FOOD, FARMING AND THE HEALING ARTS

A PUBLICATION OF THE WESTON A. PRICE FOUNDATION®

*Education ♦ Research ♦ Activism*
westonaprice.org

Volume 24 Number 4

Winter 2023

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THE WESTON A. PRICE FOUNDATION®


Education ♦ Research ♦ Activism

The Weston A. Price Foundation is a nonprofit, tax-exempt charity founded in 1999 to disseminate the research of nutrition pioneer Weston A. Price, DDS, whose studies of isolated nonindustrialized peoples established the parameters of human health and determined the optimum characteristics of human diets. Dr. Price's research demonstrated that men and women achieve perfect physical form and perfect health, generation after generation, only when they consume nutrient-dense whole foods and the vital fat-soluble activators found exclusively in animal fats.

The Foundation is dedicated to restoring nutrient-dense foods to the American diet through education, research and activism and supports a number of movements that contribute to this objective, including accurate nutrition instruction, organic and biodynamic farming, pasture-feeding of livestock, community-supported farms, honest and informative labeling, prepared parenting and nurturing therapies. Specific goals include establishment of universal access to clean, certified raw milk and a ban on the use of soy-based infant formula.

The Foundation seeks to establish a laboratory to test nutrient content of foods, particularly butter produced under various conditions; to conduct research into the "X" Factor, discovered by Dr. Price; and to determine the effects of traditional preparation methods on nutrient content and availability in whole foods.

The board and membership of the Weston A. Price Foundation stand united in the belief that modern technology should be harnessed as a servant to the wise and nurturing traditions of our ancestors rather than used as a force destructive to the environment and human health; and that science and knowledge can validate those traditions.

The Weston A. Price Foundation is supported by membership dues and private donations and receives no funding from the meat or dairy industries. 



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President's Message

The grocery store in our little town of Charlotte Hall, Maryland has aisles of processed food and extra big carts to hold jumbo bags of potato chips and cases of soft drinks. “Healthy” spreads are available in sixty-four-ounce tubs.


Nevertheless, I've seen some encouraging changes in recent years. The store now carries pastured beef and organic chicken, pastured eggs and pastured butter. There is a small section for organic produce and a selection of kombucha. This is real progress—something I would not have predicted to occur in our semi-rural area.

Sometimes the problems with our food supply can seem so overwhelming—more and more processed food loaded with toxic ingredients, ultraprocessed dairy products and grains drenched in Roundup—that we lose sight of the progress we have made. Foods of better quality are sneaking into the grocery stores, even in unsophisticated parts of the country like southern Maryland.

We have made incredible progress with raw milk. Consumption is growing by leaps and bounds. We now have over three thousand sources listed at realmilk.com—with sixty-three in Maryland alone! We sell out of the raw milk we produce on our farm every day and other producers report the same. Raw milk farmers are increasing the size of their herds—one raw milk farm in California is milking twelve hundred cows—while more and more conventional farms are going out of business.

Pundits are predicting a brave new future of lab-grown meat, edible insects, fake milk, ersatz eggs and an overall plant-based diet, along with “massive changes in food production and agriculture.” But I've got news for them. The big shift they are predicting is going in the opposite direction. My prediction: twenty years from now the reigning model will be the farm store selling raw whole milk, pastured meats and eggs, and organic produce—and the single mom living in an apartment in Brooklyn will be able to purchase these real foods in the local grocery store.

As we approach 2024, it's a good time to renew or start your pledge to our 50 Percent Campaign—spend at least 50 percent of your food budget with direct purchases from local farmers and artisans—with the other 50 percent you can celebrate how small the world has become and enjoy pineapple and rice.

The board of directors and the staff at the Weston A. Price Foundation join me in wishing you a blessed and healthy holiday, and vibrant health in the year to come. 



Letters



FANTASTIC WEEKEND

As I was driving home from the Wise Traditions conference, enjoying beautiful autumn foliage views drenched in sunshine across the Midwest plains, I was moved to tears with great optimism reflecting on the wonderful people I had just met. I realized I have optimism for our country for the first time in a long time, thanks to gathering with and meeting fellow members who are top notch. I'm so grateful to be part of the WAPF family these past three months. Thank you for a fantastic weekend and the knowledge that will stay with me for a lifetime. You have blessed my family.

Emily Coello
Wichita, Kansas

CHANGED MY LIFE

The Weston A. Price Foundation has changed my life and the lives of my family members. When I was twenty-one years old and a married mom of two small children, I got sick. I got really sick. I was also depressed and had lost the joy of living. To say my future seemed hopeless and bleak is an understatement. I went to traditional doctors and received no help. The most one doctor did was take a look into my ears and tell me that it appeared that I was having an allergic reaction and to take some Benadryl to see whether I felt any better.

On a whim I decided to try a weird "witch doctor" to see whether I could get any guidance. I walked into her office and was immediately surprised at her warmth and joy. She informed me that my body was in a whirlwind and the first thing I could do was get rid of

inflammatory foods such as gluten and eat steak and eggs fried in butter instead while we waited on the results of my blood lab work. I was aghast! Steak and eggs fried in butter?! Give up healthy (improperly prepared) grains? She also gave me the *Nourishing Traditions* cookbook to take home and study. This was the beginning of a total transformation in my mind, body and spirit.

I am forever grateful and happy to say that myself and my family are enjoying the fullness of life. The many resources that the Weston A. Price Foundation provides are invaluable and life-changing! Thank you sooooo much!

Kristill Williams
Pensacola, Florida

TRADITIONAL AND PROCESSED OILS

Toward the end of the article "The Omega-6 Apocalypse" (Summer 2023), the author, Dr. Chris Knobbe, mentions that he doesn't consume olive oil, and that he also does not recommend palm oil, because it contains about 10 percent linoleic acid and is subjected to heat extraction, though he finds palm kernel oil, extracted through cold pressing and with around 2 percent linoleic, to be acceptable.

I found this article to be well researched and presented good resources, but as olive oil (in limited amounts) and palm oil are generally suggested as "good oils" by the WAPF, the following points and references may be of additional interest to some.

In agreement with Dr. Knobbe's sentiments about palm oil is this observation noted in an article on red palm oil (RPO) in *Informed Magazine*

(February, 2017), that RPO [generally unrefined] contains beneficial components not present in RBD [refined, bleached, deodorized] palm oil, and does not contain two detrimental ones: 3-monochloropropane-1,2-diol (3-MCPD) esters and glycidyl esters. These contaminants are formed during the high-temperature deodorization of palm oil. According to the article, "The hot topic in palm oil refining today is the MCPD and glycidyl esters issue. Red palm oil is, almost by definition, low in glycidyl esters and may also contain less 3-MCPD esters because it is more mildly refined. So maybe that could cause a renewed interest in red palm oil."

However, also from this article is this statement: ". . . without any processing, crude palm oil (CPO, completely unrefined) has limited utility in the kitchen. . . Red palm oil in its crude form is very strong tasting. It's very pungent and has a smell like over-ripe mushrooms. It's not very palatable . . . Companies have tried to introduce crude palm oil into the market, but it has not done well because it doesn't taste good, and it's hard to use in the kitchen." In addition, CPO contains free fatty acids (FFA), moisture, trace metals and other impurities that limit its shelf life.

In contrast to Dr. Knobbe's concerns about heat-processed palm oils are the following citations from other sources. From *Palm Oil Miracle*, by Dr. Bruce Fife (viewable online at archive.org): "The oils that are most vulnerable to the damage caused by heating are the ones that contain the highest amount of polyunsaturated fatty acids. Monosatu-



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rated fatty acids are chemically more stable and can withstand higher temperatures, yet they too can be oxidized and form toxic byproducts if heated to high temperatures. Saturated fatty acids [however] are very heat stable and can withstand relatively high temperatures without oxidation” (pages 38-39).

“Increasing consumption of polyunsaturated vegetable oil has increased the amount of linoleic acid in the diet, which is converted into prostaglandins that increase allergic sensitization. In contrast, saturated fats do not promote inflammation or allergic sensitization” (page 129).

“When red palm oil is refined and transformed into white palm oil, some of its nutrients are removed. With a relatively high saturated fat content and fewer nutrients, some may question whether white palm oil is still good to eat. The answer is ‘yes.’ Although red palm oil is nutritionally superior, white palm oil is still a healthy choice” (page 71).

“Carotenes give virgin [RPO] its distinctive red color. When palm oil is refined, almost all of the carotenes are removed. Thus the oil becomes a light yellow when liquid or white when solid. Not all of the nutrients are lost, however. While some tocopherols and tocotrienols are removed, surprisingly most of them remain. Refined palm oil retains 67 percent of tocopherols, 73 percent of the tocotrienols. So white palm oil is still a good source of vitamin E. White palm oil is chemically stable, resistant to oxidation, and contains the antioxidant power of tocopherols and tocotrienols” (page 71).

Additionally, certain manufacturers mention that they minimally process

RPO. For instance, one popular brand mentions on their website that their organic red palm oil is not raw, and that to extract the oil, fresh-harvested organic palm fruit bunches are steamed at around 200°F to release the oil from the fruit, then cold expeller-pressed to further separate the oil (nutiva.com/products/organic-red-palm-oil).

Concerning olive oil, aside from its generally limited suggested use by the WAPF (such as typically only as a salad oil or for light cooking or stir-frying, mostly because it is a monounsaturated oil and doesn’t react well to high heat), due to commercial labelling regulations it has also become difficult to find high-quality sources for it, as has been widely reported. Perhaps both of these reasons contribute to Dr. Knobbe’s rationale for avoiding it, but it is still also traditionally considered a good oil in moderation with reliable sources.

I found this otherwise to be a well-researched and informative article by Dr. Knobbe and am looking forward to referring others to it as well. Thank you for bringing this to print as the problems with industrial seed oils and the fraudulent science behind their promotion and sad use in the contemporary food supply need to be widely exposed.

Glenn Serkis
WAPF Chapter Leader
Rockland County, New York

While not ideal, refined palm oil is the oil of choice in processed and fried foods in Europe—and certainly healthier than the polyunsaturated oils used in the U.S. As for olive oil, many types of olives are high in omega-6. If the olive oil does not become semi-solid

after several days in the fridge—indicating a high level of monounsaturated and low amount of omega-6—it should be avoided. WAPF will be exploring the subject of olive oil in a future issue of Wise Traditions.

NICOTINE REMEDY

I have always had a very strong sense of smell, but it’s been gone since the morning after I was in a stuffy room with an elderly couple who had just had J&J shots (unbeknownst to me at the time). So, I am very excited to find a possible cure for the symptoms I have had from being shed on in April 2021!

Early in 2023, a friend did muscle testing and found, oddly, that I needed a homeopathic remedy involving poisonous insects to regain my sense of smell. We weren’t able to pinpoint what exactly this remedy was. I keep bees, and a while after the muscle testing, two bees, on separate days, stung me between the eyes. Both days, I noticed that my sense of smell came back a noticeable amount! The first day after I was stung (my birthday!), I could smell my favorite flower, the peony. Wow! I thought this was definitely a God thing.

Recently, I heard about nicotine being a solution, and today a friend sent me this amazing interview! “The Antidote: The Explosive Truth, Origin, and Antidote for C19” with Dr. Bryan Ardis and Jason Shurka (thedrardisshow.com/the-antidote). I will begin micro-dosing Rugby nicotine patches. The dose is 1/6 of a 14 mg patch every day.

Ruth Amanda
Floyd, Virginia



Letters



FLU VACCINE DANGERS

Thank you for your action alert on SB 7 in Texas, which would prohibit an employer from taking adverse action against employees, contractors or applicants for refusal to vaccinate against Covid-19.

I am wondering whether talking points against the flu shot could be added as well. As an RN, I have had to be very careful about my place of employment as most medical facilities require their nurses to be vaccinated against the flu every year. I refuse. I do not think that the alternative of wearing a mask is a fair choice either.

I have worked as a public health nurse in school districts for nine years. I have witnessed coworkers and students become injured by the flu vaccine. One employee developed Guillain-Barré syndrome. She has complete paralysis in her arms and it is progressing to her organs and legs, even with infusions and physical therapy. She is no longer able to work and she is not even fifty years old yet.

Just last week I had a student who received a flu shot and in less than forty-eight hours he was having repetitive grand mal seizures. He is now on anti-seizure medication.

We the people should not be forced to inject or consume anything against our wishes.

Anonymous
Seguin, Texas

MASK DANGERS

Thank you for being one of the few publications willing to address the psychological and physical harm caused by the use of face masks. I am a licensed

health educator in Vermont, and after a decade teaching in my local school district, I resigned in the fall of 2020 because I could not make my students wear masks. Intuitively, I knew that hiding our faces and restricting our breathing were sure to be damaging to everyone's health.

In July of 2020 I began The Vermont Mask Survey to collect evidence that people in our state were experiencing all of the known harms listed by the World Health Organization's Interim Report on the use of face masks: "Mask use in the context of COVID-19," which was published in June 2020. The WHO's report encouraged decision-makers who consider the use of face masks in community settings to "evaluate the impact (positive, neutral or negative) of using masks in the general population (including behavioral and social sciences) through good quality research."

The report continues: "At the present time, the widespread use of masks by healthy people in the community setting is not yet supported by high-quality or direct scientific evidence and there are potential benefits and harms to consider."

Over the past three years I've brought the results of The Vermont Mask Survey to decision-makers at every level in Vermont. Last January the Vermont Agency of Education admitted that they have no evidence that masks are safe for children, yet Vermont schools are still willing and able to impose mask requirements based on advice given by the U.S. Department of Education, encouraging schools to use special education laws to impose

"protection measures" such as masks as part of IEP and 504 accommodation plans.

All of our attempts to bring experts and scientific evidence to our local decision-makers had failed, and so last spring we held The Vermont Emergency Forum to Assess the Respiratory Hazards of Masks to bring the information to the people. The purpose of the forum was to provide people with the confidence and courage to protect themselves and their loved ones from continuing mask requirements in various community settings.

National experts who spoke at the event included Megan Mansell, a former education administrator who specializes in medical PPE and special education accommodations, and Tammy Clark and Kristen Meghan Kelly, OSHA-trained experts who have been calling out the inappropriate use of masks since 2020. Local presenters at the forum included young students, business owners, medical and legal professionals, and media who have stood up to mask mandates.

One of the local presenters at the forum was Betsy Thomason, who is known as "The Revolutionary Respiratory Therapist." Betsy is the director of the Outbreath Institute, and author of *Just Breathe Out*. She was one of two presenters who offered "Breath Breaks" during the forum, to remind participants of the importance of caring for our respiratory system.

I want to thank Betsy for sponsoring my membership to the Weston A. Price Foundation. I'd also like to thank Betsy, and the other brave members of your organization, who have been

Letters

standing with me in this effort these past three years. Very few people in Vermont have had the courage to speak the truth about masks, let alone do so with a focus on high-quality scientific evidence and compassion for everyone involved. Among the groups who have, a large portion are members of your organization.

Clearly, the practices encouraged by the Weston A. Price Foundation are giving people the nourishment they need—physically and spiritually—to walk their talk, to have the courage and confidence to stand up, with love and compassion. They are role models for us all.

I am grateful to my neighbors for their support, and for inviting me to join your community. The *Wise Traditions* publication provides a wealth of high-quality, timely information that is helping us all see clearly, with science and compassion, despite the abuse tactics we face.

All of my work on the science of masking and continuing mask policies, including videos of presentations given at the Mask Forum, and episodes of the radio shows I produce at local community stations (The 5H Show for adults and Amy's Kids Show for youth) can be found on my website: vtmasksurvey.com.

Amy Hornblas, Health Educator
Marshfield, Vermont

A JOURNEY TO NEPAL

For three weeks in October, I had the privilege to join the Inner Ocean Empowerment Project on their Sacred Service Journey to Nepal. Inner Ocean brings acupuncturists, body workers, sound healers, herbal medicine providers and anyone else who has a desire to be of service to treat people in rural



Visitors to Nepal (from left to right): Jen Wells; Cheryl Harris, Denver chapter co-leader; Justin Folkestad, Denver chapter member; Melissa Mae Catanzarite, medical doctor from Tasmania; and Mindi K. Counts, acupuncturist, and founder and executive director of Inner Ocean Empowerment Project.

Nepal. They also train mothers from the community in Wilderness First Aid and provide them with supplies to keep up year-round support. (See inneroceanempowermentproject.org.)

There are many organizations that provide health care in developing locations; what sets Inner Ocean apart is the dedication to the same communities year after year. The year 2023 marked the tenth year providing service to the people of the Bagmati region. In the aftermath of the 2015 earthquake, Inner

Ocean primarily treated acute injuries. Over time, the work has shifted to treating chronic conditions, healing trauma and health education.

Prior to the trip I had no expectations. I knew from past experiences that being of service and helping others, as well as going to places with deep natural beauty, can fundamentally change

a person. I truly had no idea what would transpire.

I know my fellow WAPFers will ask, “How was the food in Nepal? What did you eat?” In rural communities, food is not a focus. The staple food, *dal bhat* (white rice, lentils of any kind, seasonal vegetable and achar [pickles] with a spicy chutney sauce) is eaten twice a

day every day. With China's takeover of Tibet, the Chinese influence has begun to creep into rural Nepali diets. The Tibetan border has snack shacks filled with junk food like cereals, chips, sodas, crackers, biscuits and cookies. It was heartbreaking to see the Himalayan trails littered with candy bar wrappers. With this have come a host of dental issues not seen in previous generations.

For the Nepali people, nourishment goes far deeper than what is on the plate; the Nepali people get their true

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nourishment from community. There is a strong, core attachment to one's self, one's foundation, one's community, one's ancestry and the earth. Their spirit is their strength. They hold elders in very high regard and care and respect them for the blessing that they are. They are truly a beautiful people.

As we embraced the “Nepali way,” I think most of us volunteers realized how relaxed we had become. We took each day as it came—hands on with our patients, away from texts, emails and the other distractions of modern life. After long days treating forty or more patients an hour, we would return to camp tired but still abuzz with energy from the day. We spent evenings reflecting around the campfire, often feeling that we had received more than we had given. We felt truly nourished.

Cheryl Harris, MS, LAc
Co-Leader WAPF Denver Chapter
with Mindi Counts, LAc
and Justin Folkestad

Insect parts and insect feces in nonfumigated stored grains provide much needed B_{12} and fat-soluble activators in diets that otherwise contain few animal products. (This note is not part of the push to consume insects.)

NO LONGER BRAINWASHED

I am a young wife and mother of one baby boy (almost ten months old). Only recently have I come across Dr. Price's book and the Weston A. Price Foundation. We have been implementing the Wise Traditions diet for a little over one month.

The irony of my journey is that I studied nutrition for my bachelor's degree! We were completely brainwashed about everything—especially against the principles that the Foundation teaches. I even consumed a vegan diet for a year or two until my body could not handle it anymore. I stopped menstruating, my hair was falling out and my immunity was horrible. After that, I changed to an ovo-vegetarian diet for

about three years and remained so until my husband and I conceived.

Then something incredible happened. My body's cravings were so strong, I finally listened to them. After years of ignoring them and literally starving myself, I finally tuned into what my body was asking for. Without even realizing, I began adding butter to my oatmeal, salting foods more often, purchasing cheese and making whole milk yogurt. Little by little I started incorporating ground beef and whole chicken into our meals. Very rarely (due to expense) we would include salmon and high-quality cheeses. The amount of dairy I consumed was unthinkable for my previous self.

Since I am of Asian descent, I have always had a lactose intolerance problem. This completely shifted when I began my pregnancy journey. A dietician once told me that a pregnant and nursing mother's calcium absorption will double in comparison to non-pregnant and nursing persons. Additionally, the

WISE TRADITIONS 2023 AWARDS BANQUET



LEFT: Anthony Jay receives the Mary G. Enig Integrity in Science award.

RIGHT: President Sally Fallon Morell confers the annual President's Award on Pete Kennedy for his faithful work to bring raw milk to millions.





Letters



disappearance of my lactose intolerance is quite common. The body truly prioritizes the necessities.

I am grateful to my husband for teaching me many “wise traditions” from his upbringing in Bolivia. His mother is of Indian descent and his grandparents shared a great relationship with mother Earth and all her creatures. He had a very traditional diet where all food is respected. My fancy nutrition degree made me doubtful about the majority of his personal food choices, but I have repented and asked pardon. Reading Dr. Price’s book and all your materials has humbled me. The arrogance of the American Academy of Dieticians is outrageous.

My husband’s teeth are beautiful. He had no orthodontics either. My story regarding teeth is a rather sad one. In brief, I was adopted from China at thirteen months old. My only food up to that time was “congee,” a rice porridge, which was fed to all the babies in my orphanage because of no funding and lack of staff. (There were four women, caring for sixty babies. Can you imagine?)

To make matters worse, my childhood was filled with Standard American Diet foods. Of course, it was better than congee, but only slightly. I was diagnosed with the worst orthodontic case in my town and was the youngest client (ten years old) according to my orthodontic dentist, Dr. Petry. My adult teeth were coming through but had not naturally pushed out my baby teeth. I also had an underbite so bad that Dr. Petry said it needed to be addressed promptly (before puberty) due to its severity. If not, I would have problems

eating throughout my entire adult life. I even overheard him say that if the rubber bands did not help my case, it would be necessary to have surgery to break my jaw and realign it. All glory to God that this was not the case and Dr. Petry truly spared me much pain.

I write all of this to tell you how right Dr. Price and you are. When I ponder the horrors of my childhood nutrition, I begin to wonder about the nutrition of my biological parents. That is why I took immediate action after finding WAPF. Thankfully, my pregnancy and postpartum were filled with bone broths and made-from-scratch meals. Since I discovered WAPF, I have connected with a source of raw milk, pastured eggs, chicken, beef, pork, etc. I cook with lard and butter and save my meat drippings for a gravy or sautéing veggies. I give my baby one egg yolk a day, cultured buttermilk, homemade yogurt (full fat), butter and various vegetables and fruits. But I mostly emphasize the fats. He absolutely loves yogurt and all things dairy. Cod-liver oil is a breeze because I hide it in his milk, egg yolk and fruit smoothie blend.

My previous and ex-pediatrician once “ordered” me to begin supplementing my baby with formula because he was not gaining sufficient weight. While his weight gain was not ideal, it was only one to two pounds out of range and she was attempting to scare me into her wishes. My convictions said otherwise. I did not give my baby formula. Instead, I reconsidered about giving him solids.

It turns out that the “baby-led weaning” fad I started my baby on is nothing short of just that—a fad! It is

terrible. Of course, my baby was not getting adequate calories—he could not chew the food we were giving him; he had only two teeth. This was my revelation: how could we expect babies, who have no teeth, to chew and eat foods that we adults consume with a full set of teeth? Again, I repented and vowed to do better—purées to the rescue!

Then by divine intervention, I found the Foundation and all of your wonderful resources. By God’s grace, my baby has gained a tremendous amount of weight and surpassed his development and size since being on this diet. Occasionally, I feed him a dollop of room temperature, grass-fed butter when he is playing; just because!

My husband is also enjoying this change because this style of cooking reminds him of home. I am absolutely determined to give my baby and future children the best possible nutrition. I would never wish my experience on anyone. Even before learning about Dr. Price’s work, I worried about the state of my future children’s teeth. But with this knowledge, I pray they will have strong teeth and bone structure, just like their father. Thank you!

EHM

St. Louis, Missouri 

Gifts and bequests to the
Weston A. Price Foundation
will help ensure
the gift of good health
to future generations.

Caustic Commentary

Sally Fallon Morell takes on the Diet Dictocrats

COVID JABS

The bad news about Covid shots just keeps accumulating. In the UK, the Office for National Statistics published an update on deaths by vaccination status in England, which revealed that the vaccinated population accounted for 95 percent of the Covid-19 deaths during the twelve months from June 2022 through May 2023. Ninety-four percent of those deaths were among either the triple or quadruple vaccinated population, while the unvaccinated accounted for the lowest number of Covid deaths in every single month (expose-news.com, November 19, 2023). And it's not just Covid that is carrying off the vaccinated.

Physicians are describing a surge in aggressive, rapid-onset cancers following the rollout of the shots in December 2020, especially lymphoma, even in young people (*Epoch Times*, August 15, 2023). Cardiovascular deaths in the U.S. and UK are up also (vigilantfox.substack, August 31, 2023) and disability rates in the UK have almost doubled. Most alarming of all is the damage inflicted on military members forced to take the Covid jab. Data obtained from the Defense Medical Epidemiology Database (DMED) indicate that some 43 percent of service members developed nervous system diseases (such as epilepsy) between August 2021 and January 2022. DMED also records huge increases in cancer (especially testicular, breast, stomach and thyroid), MS, thyroid dysfunction and various forms of heart disease. The babies of almost nineteen thousand vaccinated pregnant servicewomen were born with congenital malformations and more than twenty thousand men and women became permanently sterile (americanlibertyreportnews.com, March 20, 2022). Who needs battles and weapons to destroy the armed forces of a country when you can incapacitate them with a simple shot in the arm?

LOW UPTAKE

Why are so few people getting the latest Covid shot? whines Dylan Scott, healthcare reporter for vox.com (November

17, 2023) when the Covid-19 injections were hailed as a miracle that “proved exceptionally effective at preventing hospitalizations and deaths.” More than 90 percent of adults in America received at least one dose, claims Scott, but only 14 percent of adults have received the latest booster. Maybe it's because “the novelty is gone,” says Scott. “People aren't scared of this virus anymore,” says vaccine developer Paul Offit, who calls the Covid shot “the most amazing medical and scientific accomplishment” of his lifetime. Scott notes a “worrying trend” in the decline in vaccination rates among children, with 3 percent of U.S. schoolchildren reporting a

vaccine exemption for the coming school year, the highest on record according to the CDC, and ten states reporting an exemption rate above 5 percent. Maybe all this “hesitancy” has to do with the inconvenient fact that the Covid shot has caused widespread death and disability and offers no protection at all (see above). Or maybe because Pfizer's new booster was tested only on mice—ten to be exact—which reveals nothing about their safety or effectiveness in humans, while Moderna's version

was tested on a mere fifty adults, with one experiencing a “medically attended adverse event,” the details of which the company refuses to disclose (media.mercola.com, September 26, 2023).

CUTTING MEAT CONSUMPTION

Health officials want us to cut meat consumption, but the public isn't buying it. Total meat consumption is projected to increase more than 60 percent between 2010 and 2050. When people enter the middle class, they want more steak and bacon! How to get the public to eat a more plant-based diet? Researchers writing for the recently launched *CABI One Health* journal, which will explore “the interconnections between humans, animals, plants, ecosystems and their shared environment,” claim there is “robust evidence that a reduction of animal product consumption is . . . needed in regions where these consumptions levels are currently high.”



Caustic Commentary

They call for phasing out support for industrial meat production—something we can all agree with—but with a goal of reducing animal protein consumption overall rather than shifting production to pasture-based farms. Meanwhile, in the UK, environmental activists are taking the government to court over its “failure” to adopt measures to reduce meat and dairy production and consumption. The plaintiff, a group called Feedback, says the government has a duty to introduce the measures in order to meet climate targets. According to Feedback, reductions in meat and dairy consumption are essential for meeting the net zero target to combat climate change. Carina Millstone, executive director of Feedback, says the government must adopt measures to slash meat and dairy consumption to “avoid climate and environmental breakdown. We are confident our judicial review will establish that the government has a legal responsibility to put in place policies to reduce emissions in the food and farming sector” (farminguk.com, November 7, 2023). What to do if the public just won’t stop eating meat in spite of government persuasions? The lawsuit doesn’t address this difficult question.

SHOULD WE BAN CANTALOUPE?

An outbreak of salmonella linked to cantaloupe and pre-cut fruit products has sickened ninety-nine people in thirty-two states. Two people have died. According to the Centers for Disease Control and Prevention (CDC), these numbers are much lower than the actual numbers because many people aren’t treated or tested for salmonella. The outbreak is spread across several brands (news.yahoo.com, November 24, 2023). Clearly the solution is to treat cantaloupe like raw milk and ban it from interstate commerce! Sorry for the sarcasm but imagine the uproar if ninety-nine people got sick and two died from raw milk!

THE SATURATED FAT DEBATE

Lots more people are using butter these days, and some even have the audacity to cook in lard and tallow! “Don’t listen to the dissonance. Saturated fat actually (still) is bad for you,” an article appearing in the *Washington Post* (June 14, 2023), aims to halt this trend. The author, journalist Tamar Haspel, a big fan of USDA’s disastrous dietary guidelines, notes that Americans started eating more butter when the *New York Times* published an article by Mark Bittman titled “Butter is

Back.” Bittman reviewed a meta-analysis published in *PLoS One* (2016 Jun 29;11(6):e0158118) which found “relatively small or neutral overall associations of butter with mortality, CVD, and diabetes.” Said the authors, “These findings do not support a need for major emphasis in dietary guidelines on either increasing or decreasing butter consumption, in comparison to other better established dietary priorities.” But Haspel “believes” we should limit saturated fat intake because she “believes” two things: that saturated fat raises LDL-cholesterol and cholesterol increases heart disease risk. Instead of reviewing the science (which does not show that butter eaters have more heart attacks), she interviews the “experts.” While the “experts” point out that coconut oil and “some dairy” are not harmful, “everyone I spoke with agrees” that raising LDL raises heart disease risk. As Ronald Krauss, one of Haspel’s experts, puts it, “There’s no reason we need [saturated fat] in our diet.” This kind of statement takes one’s breath away. Don’t these “experts” realize that our cells, our mitochondria, our lungs, our kidneys, our brains, our immune system, our hormone production—all require saturated fats to function? Aren’t they aware of the indisputable fact that as butter consumption has plummeted over the last hundred years (replaced by industrial seed oils), rates of heart disease (and cancer and diabetes) have soared? Aren’t they aware of the important nutrients carried in the one fat that nourishes growing mammals? For another reason to embrace saturated fat, read on.

LICKING THE SUGAR HABIT

Research is finally beginning to confirm what many of us already know: sugar is indeed an addictive substance, which temporarily raises dopamine levels and activates feel-good endocannabinoids. Indeed, the effects of sugar addiction, withdrawal and relapse can be compared to those of other addictive drugs. A 2020 study published in the journal *Appetite*, describes an easy solution to the problem of sugar addiction, although one wouldn’t glean that from the title: “Chronic high-fat diet affects food-motivated behavior and hedonic systems in the nucleus accumbens of male rats.” The gist of the study is that rats fed sugary foods—described as “caloric-dense palatable foods”—didn’t want them when fed a “chronic high-fat diet” containing almost 40 percent of calories as lard. Eating lard caused a “significant motivational impairment for sweet palatable foods. . . [and]. . .

Caustic Commentary

modulation of hedonic feeding behavior and related neurochemical systems.” It seems that saturated animal fats like lard also raise our dopamine and endocannabinoid levels, but in a good way that avoids the sugar crash and actually feeds the brain. Of course, researchers could not just come out and say that eating lots of animal fats like lard can cure sugar addiction; instead, they hide their findings behind contrived language that almost makes it sound like a bad thing!

CHOLESTEROL AND LONGEVITY


Our article “Dangers of Statin Drugs” comes up first when you Google “statin dangers” and is the most popular post on our website. Nevertheless, doctors are pushing these poisonous cholesterol-lowering pills with enduring vigor to just about everyone, from young women to elderly men. It turns out that if you want to live a long life, taking statins is exactly the wrong thing to do. AMORIS, a Swedish study, looked at biomarker profiles of more than eight hundred thousand individuals measured during 1985-1996 and followed for up to thirty-five years. About twelve hundred participants lived to their one hundredth birthday. Two key factors were associated with reaching this age: higher levels of iron (read, higher consumption of red meat) and higher levels of total cholesterol. That’s right, those with higher levels of cholesterol were much more likely to reach their hundredth birthday. Longevity was also associated with lower levels of glucose, creatinine, uric acid, aspartate aminotransferase, gamma-glutamyl transferase, alkaline phosphatase, lactate dehydrogenase and total iron-binding capacity (GeroScience, September 2023).

NATIVE FOODS ON THE MENU

Reindeer pot pie, herring roe, salmon belly, moose meatloaf and seal soup—these are some of the items that hospital patients enjoy at the Alaska Native Medical Center (ANMC) in Anchorage, Alaska. They can also get Eskimo ice cream (made with animal fat, fish oil and berries), smoked hooligan (a fish rich in nutrient-dense fat) and birch sourdough biscuits. These ingredients are donated by a statewide network of hunters and gatherers dedicated to the concept of nourishment through traditional foods. Up until 2014, the ANMC food staff relied on Western processed foods because federal law prohibited foraged food on hospital menus due to concerns over safety. Then former Alaska Senator Mark Begich and retired Alaska Native physician Dr. Ted Mala

lobbied for the inclusion of a specific measure on traditional foods in the 2014 Farm Bill. In the five years since the program’s inception, the hospital has received more than twenty thousand pounds of donations—Alaska state law prohibits the commercialization of any basic food source, so most fish and game is donated or bartered. Selling foraged plant vegetables and berries is not illegal but considered taboo; custom dictates giving extra to family members or village elders. When a patient learned that seal was the food most requested but least available, he began donating the extra seal meat he captured during his hunting forays. Head chef Amy Foote credits the success of the program to the tradition of caring for elders in Alaska Native culture, as well as their belief that traditional foods have healing properties. The native foods are also available in the hospital cafeteria, so we hope some members will visit and report back on this wonderful program (altasobscura.com, December 30, 2020).

THE MOZART EFFECT

Be careful what you eat and also what you listen to! Researchers have found that music by Mozart can have an anti-epileptic effect on the brain and may be a possible treatment to prevent epileptic seizures. Specifically, listening to Mozart’s Sonata for Two Pianos K448 led to a 32 percent reduction in epileptiform discharges (EDs). These are electrical brain waves associated with epilepsy and seizures. Not all music has the same effect. Listening to Haydn’s Symphony No. 94 caused a 45 percent increase in EDs. Experts believe the study’s findings could pave the way for individualized music therapies to prevent and control epileptic seizures in the future (medicalexpress.com, June 19, 2021). 

FOR SCIENTISTS AND LAY READERS

Please note that the mission of the Weston A. Price Foundation is to provide important information about diet and health to both scientists and the lay public. For this reason, some of the articles in *Wise Traditions* are necessarily technical. It is very important for us to describe the science that supports the legitimacy of our dietary principles. In articles aimed at scientists and practitioners, we provide a summary of the main points and also put the most technical information in sidebars. These articles are balanced by others that provide practical advice to our lay readers.

An Update on GAPS

Following the GAPS Nutritional Protocol Is Not Easy, But for Many, It Is Easier to Follow It Than Not!

By Natasha Campbell-McBride, MD

Many people in the WAPF community are familiar with my GAPS concept, and many have implemented the GAPS diet. If you are new to the concept or want to look into it again, my two GAPS books are a good starting place. My first book, *Gut and Psychology Syndrome* (first published in 2004, with a second edition in 2010), focuses on the brain; the second book, *Gut and Physiology Syndrome* (2020), focuses on the rest of the body as well as describing the full spectrum of the GAPS diet in detail.

GAPS has become a global phenomenon. Over the last twenty years, people all over the world have used the powerful GAPS Nutritional Protocol to heal from all sorts of chronic diseases—physical and mental—including some conditions labeled as “genetic” or “incurable.” With today’s huge and growing list of chronic maladies and diagnoses, no doctor in the world can be expected to have experience working with all of them. Yet whatever the diagnosis, I suggest people try the GAPS Nutritional Protocol. They may be pleasantly surprised—the human body is immensely resilient and, given the right help, can perform miracles!

THE MICROBIAL COMMUNITY

The GAPS concept is based on the fact that the human body is a microbial community.¹ There are microbes in our blood, heart, lungs, joints, muscles, brain, mucous membranes and everywhere else. The biggest community of microbes lives in the digestive system.² Why? Because if you ask any microbiologist what is the most powerful influence on a microbial community in Nature, the answer will be food. Change a microbial community's food supply and the whole community will change rapidly; some species of microbes will disappear and others will proliferate. Where do humans put our food? Into the digestive system, of course. That is why our gut flora (gut microbiome) is the central point, the big "ministry" and "government" of our body's entire microbial community.

What happens in the gut determines what happens everywhere else in the body. Many people have heard the statement credited to Hippocrates: "All diseases begin in the gut." Modern research into the human microbiome has provided the scientific proof that Hippocrates was right, and clinical experience using the GAPS Nutritional Protocol, accumulated by GAPS teams all over the world, shows us that indeed, all chronic diseases have their roots in the digestive system.

Let me repeat: The human body is a microbial community, and food is the most powerful influence on any microbial community in Nature. This means that *food* is the most powerful influence on human health—there is nothing more powerful! Thus, every healing protocol has to start with the person changing what is eaten for breakfast, lunch and dinner and in between. The GAPS diet is designed to heal the digestive system and normalize its microbial community, which in turn will normalize the microbial community everywhere else in the body. As a result, everything in the body changes and moves toward balance, harmony and good health.

Nature functions in harmony. Nature is highly organized and finely tuned; every little thing is in its right place and balanced carefully with the rest. That is why Nature is so beautiful! It is like a professional orchestra where every instrument plays its part perfectly and at the

right moment, creating magnificent music. The human body is part of Nature, and a healthy human—harmonious in body, mind, spirit and soul—is full of balance and beauty at any age. Human beauty is good health shining through a person's eyes, skin, thoughts, words and actions.

Disease, on the other hand, is about chaos—the absence of balance, harmony or fine tuning. Using a musical metaphor, disease is cacophony. The technocratic world we live in is becoming increasingly chaotic, and we can feel it; it has a great ability to destroy harmony and replace it with chaos. This chaos is reflected in the state of human health today. Look around you. How many truly healthy people do you see? Even if some people appear to look okay, once you start talking to them you discover that they are suffering from chronic diseases. Allergies, autoimmunity, mental problems, hormonal abnormalities, neurological illnesses, diabetes, heart disease, obesity, skin problems, cancer—the list is endless. The statistics of chronic illnesses today are unprecedented and rapidly getting worse. Many diseases are also starting earlier; children get ill at younger and younger ages, and many are even born unhealthy.

A CASE STUDY: LEARNING TO LOVE

One example of a disease that is gaining epidemic proportions among children in the Western world is anorexia nervosa.^{3,4} I would like to share a clinical case study of a ten-year-old girl named Jane. Jane was a reasonably healthy child and was involved in sports. Jane's parents encouraged her to take her training seriously. Despite her young age, Jane had begun competing with some success in sports on a semi-professional level.

In the competitive atmosphere of Jane's sports club, which encouraged girls to be slim and light, Jane developed anxiety around food and began refusing to eat any "fattening" animal foods. Believing mainstream dogma about the "benefits of vegetarianism," her family cooperated with her requests. Jane limited her diet to breakfast cereals with orange juice, pasta, porridge, bread, sugar "for energy" and some fruit and vegetables. Fairly soon, she started losing weight to the point of emaciation and was diagnosed with anorexia nervosa. Her

The technocratic world we live in has a great ability to destroy harmony and replace it with chaos. This chaos is reflected in the state of health of many people today.

growth stopped, and Jane became quite small for her age.

After watching two other girls at the same sports club be hospitalized with anorexia and seeing Jane's school friend put on psychotropic medication after a diagnosis of an eating disorder, Jane's parents refused medication for Jane and accepted only psychotherapy and some supplements. They then spoke with me and implemented the full GAPS diet, working hard to get Jane to eat full-fat animal foods. They terminated her athletic training, and Jane left the club. It was six months before Jane started to eat properly; initially, she tried to hide her food and only pretended to eat, and she would exercise when her parents were not watching. It took about a year for her to reach her normal weight and start growing again.

Jane was lucky that her parents found the right information at the right time and were prepared to follow it. Unfortunately, many children are not so lucky; they fall into the mainstream anorexia paradigm with psychotropic drugs, an inappropriate diet and high rates of suicide. More importantly, this was and still is a deeply transformational experience for Jane's parents, changing their perspective on family and life as a whole. The experience pulled them out of the

mainstream and made them look at the world differently.

Previously, Jane's parents had been very conventional people. They believed mainstream advice about the merits of a high-carbohydrate diet and lots of exercise; they also believed in the mainstream idea of vegetarianism, and it took them a while to understand all the common mistakes of this belief. They were proud of their daughter's athletic achievements and had ambitions for her to become a professional athlete. Both parents had tried unsuccessfully to become professional athletes themselves when they were young, and they hoped to live their dream through their child. It was a discovery for them to learn that anorexia is a physical disease and not "all in the mind" as the mainstream professionals were telling them. It was also quite a transformation for them to cook meals from scratch for their child every day. Nobody in the family had really cooked before or paid much attention to what the family was eating. In other words, this was a typical modern Western family.

Before Jane got ill, her parents believed that they loved their daughter, and would have been offended if anybody had suggested otherwise. Looking back now, though, they realize that their child's anorexia nervosa taught them how to love their child truly. Her illness was a gift that taught them profound lessons and changed them forever.

Ultimately, we come into this world to learn how to love! Love is a universal energy that creates perfection and harmony. Nature can be seen as the energy of love in solidified or materialized form; that is why it is so beautiful, complex, harmonious and infinitely functional. When humans use this energy, they create beautiful and fully functional things, too.

Unfortunately, many people use other energies on a daily basis instead of the energy of love. Did Jane's parents use the energy of love when they ate and gave their child processed convenience "foods"? Did they use

GAPS BOOKS

The GAPS Nutritional Protocol, a global phenomenon, is designed to heal the digestive system and restore the healthy microbiome to the human body. The most important part is the GAPS diet, which is based on traditional diets from all over the world and includes nourishing and healing foods cooked at home from fresh ingredients. Meat stock, soups, meats and organ meats, eggs, animal fats, seafood and fermented foods are the staples in this diet. The GAPS diet is suitable for all ages and has twenty years of success helping people to heal from all kinds of chronic diseases all over the world.

I described the GAPS diet in two books: *Gut and Psychology Syndrome*, which focuses on the brain (autism, ADHD, schizophrenia, dyslexia, depression and other neuropsychological or psychiatric problems) and *Gut and Physiology Syndrome*, which covers all autoimmune conditions, arthritis, allergies, asthma, eczema, chronic fatigue, fibromyalgia, chronic infections and digestive, hormonal, neurological and other chronic diseases.¹² To support the GAPS concept, I have written three other books:

- *Put Your Heart in Your Mouth. What Really Causes Heart Disease and What We Can Do to Prevent and Even Reverse It:* This book explains that animal fats and cholesterol do not cause heart disease or any other illness. I describe the real causes of heart disease in detail and give an appropriate diet for preventing heart disease.
- *Vegetarianism Explained:* Reading this book is a must for those considering a plant-based diet. I explain all the dangers of this choice and how animal and plant foods really work in the human body. Misguided vegetarianism has become a major cause of physical and mental illness, particularly among young people. Getting full information about all the consequences of vegetarianism is essential before making such a life-changing decision.
- *GAPS Stories:* This book compiles testimonies of recovery from a long list of physical and mental illnesses in people who followed the GAPS Nutritional Protocol. This book gives hope to people with chronic illnesses, many of which may have been pronounced "incurable."

The books have been translated into many languages.¹³

the energy of love when they allowed Jane to follow mainstream pro-vegan dogma, without putting any effort into finding out whether this dogma was true or false or what effect it would have on their child's health? Did they use the energy of love by driving their small child to become a professional athlete because that was their own failed dream from their youth? Ambition, pride, laziness and a wish for things to be convenient and easy are more likely to have been their motivations at that time.

HEALING BRINGS SPIRITUAL TRANSFORMATION

My own professional experience and the experience of many Certified GAPS Practitioners and Certified GAPS Coaches show that people who achieve healing through the GAPS Nutritional Protocol also go through a spiritual transformation. They become different human beings—more loving, more evolved, more enlightened and more caring. When you develop a serious illness, the last thing you may be thinking is that this illness may have some benevolent purpose. How can pain, discomfort, inflammation and limitation of function be benevolent, when the illness has stopped you in your tracks and forced you to change your life completely? However, when the initial dismay is over, and you start making efforts to heal, other thoughts and realizations come to you.

After watching thousands of people heal, I have no doubt that chronic disease comes to

us when we need to learn something important on a spiritual level—when we need to evolve spiritually. Disease is a spiritual lesson; denying and avoiding this lesson not only prevents full healing of the body but also holds back the spiritual growth that this lesson brings. Although your spirit wants to grow, your ego and mind may have another agenda. Because the lesson offered by disease is painful and going through it fully is hard work, the ego and mind may offer an easier path: to go the mainstream route and take medications to suppress the symptoms. Although this may make you feel more comfortable physically, your body will continue to deteriorate.

Changing one's diet is not easy: you have to face your food addictions and go through die-off and detox reactions, not to mention all the shopping, cooking and cleaning involved. Going through this process requires the support and help of your family and friends, which may not be forthcoming. Recovery from a chronic disease may deprive you of extra attention and compassion that you receive from these people, which may be very important for the ego.

Life often presents us with hard choices. If you have a chronic disease, it is important for you to think carefully about what you want to do. Do you want to recover fully from your disease (with all the hard work involved), or do you want to live with the disease for the rest of your life? Do you want to take the spiritual lesson this disease brings, or are you not interested in that

Listening to
your body
and giving
it what it
needs is love.
Changing
your diet to
foods that are
home-cooked
and of the
best quality
is showing
yourself love.



ACTIVIST AWARD WINNERS: Elissa Hirsh, Bill Schindler, Christina Schindler, Susan Ilmberger, Saritah, Anette Ruiz Morales and Alberto Morales with Sally Fallon Morell.

On a basic biophysical level, food is information; it carries the energy of how it has been produced. Industrial agriculture carries the energy of greed, suffering and abuse.

opportunity? Nobody can make such a decision for you; this is your life and your choice.

If you choose full recovery from your disease, then you are taking the first step on an exciting journey and the adventure of a lifetime—a journey of spiritual growth through healing your body. It is a quest for something every human being craves: universal, unconditional love. Without love, there is no healing. Every person with a chronic disease has to do some soul-searching in order to understand what is preventing them from reaching the energy of love—love for self and love for every living thing. Listening to your body and giving it what it needs is love. Changing your diet to foods that are home-cooked and of the best quality is showing yourself love. Protecting yourself and others from man-made toxins is love. Being open and honest with yourself and others is love. Treating other people and our wonderful planet with love is also essential for healing.

PRODUCE YOUR OWN FOOD

Our planet Earth is alive, and humans have a deep connection to it. The Earth is our home and the source of everything we need to thrive; it is like a loving parent who gives and gives without asking for anything in return!

To recover from a chronic illness, it is essential to get back in touch with this source of

life, beauty and divinity. Gardening, planting, growing and looking after animals are wonderful, joyful activities because they get us back in touch with our planet's prevailing energy—the energy of love. They get us into the fresh air and sunshine, raise our spirit and heal us on every level: physical, mental and spiritual. Many of my former patients, after going through the GAPS Nutritional Protocol, have bought some land and created small holdings. City dwellers have become farmers, and they could not be happier! Some people keep chickens, some have milking goats, some even have a cow and many have created gardens and orchards.

Producing your own natural, chemical-free food is a joy and very satisfying. This is food that you can trust completely, because you grew it yourself. I am one of those farmers and practice regenerative agriculture. The aim of this kind of agriculture is not only to produce best-quality food but to regenerate our planet. For the last eight years, my family and I have been self-sufficient in food and have taught hundreds of volunteers how to do it for themselves. When we started, we had no knowledge of how to farm! The land, animals and birds have taught us so much and continue teaching us every day. I am now writing a book on how a complete novice from the city can become self-sufficient in food. It really is not “rocket science”; all of



The amazing culinary crew at the Kansas City Convention Center led by Stephen Kerr (third from right) and Chef Brian Schultz (second from left) with master WAPF food coordinator Yolanda Hawthorne (far right).



First course of poached salmon on a bed of winter greens, courtesy of Wild for Salmon.

us can learn how to produce high-quality food!

ABANDON SUPERMARKETS

Who fills the shelves in supermarkets? Industrial agriculture. When we follow the GAPS Nutritional Protocol and WAPF principles, we stop supporting industrial agriculture and we stop buying food in supermarkets.

On a basic biophysical level, food is information; it carries the energy of how it has been produced. Industrial agriculture carries the energy of greed, suffering and abuse. By eating industrially produced foods, you are consuming that energy and that information. Is that energy going to give you good health?

To feed our families health-giving food, we must abandon supermarkets. When we follow the GAPS diet, we do our best to buy food directly from natural organic farmers, who treat their land, soil and animals with love and care. We support proper animal husbandry, where animals live on natural pasture and have a healthy, happy life. We do our best to grow our own vegetables, fruits and herbs. And we do not

waste food because we connect to it on every level—from the soil to the table. By eating this way, we help to regenerate our planet, one meal at a time, while providing ourselves with the best food possible.

LEAVE THE MAINSTREAM

Healing from a chronic disease involves being cautious with mainstream science. The GAPS concept is not mainstream. I strongly recommend to my patients not to be too scientific. Clinical experience has taught me a hard lesson: if you want to lose your way, follow the science!

Let us not confuse technology with the natural sciences. Technology—which deals with non-living objects—has given us great tools. When it comes to living things, however, our science has no ability to perceive them or to interfere without doing damage. This is because science tries to treat life as non-living objects, employing the same methods used in the technology realm. Mainstream science is purely materialistic; it denies the spiritual aspect of life on Earth and has no ability to study it. As long as our science remains stubbornly materialistic, it will be unable to explain or understand the infinite complexity of life on Earth.

Thankfully, this materialist focus applies to mainstream science only. Outside mainstream science, research into the divine basis of life has been going on for decades and has produced interesting results.⁵⁻¹¹ Every truly great scientist in history, including Isaac Newton and Albert Einstein, has accepted and emphasized the spiritual aspect of life on Earth. Perhaps one day mainstream science will have no choice but to

GAPS TRAINING COURSES

GAPS Training provides a number of training courses for people who are interested in GAPS.¹⁴ These high-quality courses run online, and thousands of people from all over the world have enjoyed them over the years.

CERTIFIED GAPS PRACTITIONER (CGP) COURSE: This course is for established health practitioners who would like to get trained in how to implement the GAPS Nutritional Protocol with great effect. At present, the course is available in English and Turkish; the GAPS team is working on translating it into French, Italian, German and Spanish. Visit the list of qualified CGPs all over the world.¹⁵

CERTIFIED GAPS COACHES (CGC) COURSE: This course is for those who have personal experience with the GAPS diet. You do not otherwise need any prior training to join this course. CGCs are trained to provide hands-on help in implementing the GAPS diet correctly. Visit the list of qualified CGCs.¹⁶

GETTING STARTED ON GAPS: This course is for those who need help starting the protocol at home. This course is run by highly experienced GAPS practitioners who will take you through the whole GAPS Nutritional Protocol at your own pace, answering all your questions and giving help as needed.

BABY GAPS COURSE: This course is for those who are planning to have a baby or already have a child. It will allow you to avoid common mistakes and make sure that your baby grows healthy and robust.

GAPS FUSSY EATERS AND MEAL-TIME MANAGEMENT COURSE: Many children and adults are fussy with food, which is one of the symptoms of GAPS. This course is run by very experienced GAPS practitioners to help you to overcome this problem.

ENEMA MASTERCLASS COURSE: Cleansing enemas are used in the GAPS Nutritional Protocol and can be very helpful. This course will teach you everything you need to know about this ancient healing method, so you can use it with confidence and great effect.

ELECTRO-POLLUTION FIX COURSE: EMFs from modern electronic devices can have a profound effect on human health, particularly in sensitive people. This course will teach you how to protect yourself and your loved ones from this damage.

GAPS CERTIFIED COOKING EDUCATOR TRAINING and MEAT STOCK MASTERCLASS COURSE: These new training courses are under development. They will be available soon, and people are already signing up for them.

do the same. In the meantime, we cannot take any mainstream scientific paper at face value, let alone try to use it in clinical practice, no matter how clever it appears.

There is a place for all forms of healing in this world. When something goes wrong with their health, the majority of people first go to a mainstream doctor. Mainstream medicine is very well equipped to deal with emergencies and life-and-death situations. However, when it comes to chronic diseases, mainstream medicine is unable to deal with the root of the problem. It may be able to make you a bit more comfortable by suppressing pain, inflammation and other symptoms, but it has no idea how to work with your body to help it heal. The symptoms are the body's way of communicating that something is wrong and that you need to change your lifestyle, because it is that very lifestyle that is damaging the body and causing disease. Symptoms are the body's way of calling for help. Suppressing symptoms with mainstream medication, therefore, means telling the body to stop calling for help and suffer in silence, while you continue destroying it.

When someone develops a chronic disease, a mainstream doctor may be the last person to go to for help. The person needs a health practitioner who understands how to work with the body to assist it in healing itself. There are many alternative health professions that may be able to help.

LIFE IS BEAUTIFUL WHEN YOU ARE IN CHARGE

In the GAPS world, Certified GAPS Practitioners and Certified GAPS Coaches help people use the GAPS Nutritional Protocol effectively to heal. Strictly speaking, though, professional help is not required to follow the GAPS Nutritional Protocol. Many people around the world read the GAPS books and follow the GAPS diet at home, holding their health and the health of their loved ones in their own hands. The power of healing is programmed into you. Don't give this power away to anyone! In emergencies, we may have to trust others to help us repair our bodies but, after the basic repairs are done, the healing of your whole being is your work and only yours.

The GAPS Nutritional Protocol will help you lay a solid foundation for healing from any chronic disease, because it allows you to rebuild your body with quality materials, making it strong, robust and able to resist most damage. All chronic diseases respond to this protocol. Having been through the healing, many people come to the same conclusion: following the GAPS Nutritional Protocol is not easy, but it is easier to follow it than not to. It is easier to cook fresh, nourishing meals every day and stick to the GAPS diet than to live with mental illness, chronic fatigue, pain, inflammation, autoimmunity, allergies, emotional instability, hormonal problems, neurological diseases and the general chaos that poor health brings into one's life. It is much easier to keep your children on the GAPS diet and have harmony and joy in your family instead of chaos and suffering. GAPS was made out of the energy of love. It works! Life is much easier and happier when we use the energy of love on a daily basis instead of indulging in negative energies.

The GAPS Nutritional Protocol will take you on a journey of healing and learning, where you will meet many good people and make lifelong friends. It will transform you as a person and your life completely! Your priorities and choices will change. Some people around you may leave because their life path will become incompatible with yours, but other people will be drawn to you—people who are on a similar journey and


ADDITIONAL GAPS RESOURCES

GAPS SCIENCE FOUNDATION: To establish the GAPS Nutritional Protocol in the professional community, we started publishing scientific studies in peer-reviewed journals showing the effectiveness of this protocol. Three papers have been published so far, and our team of researchers is working hard on our next publication. The GAPS Science Foundation is a charity, and we invite you to support us (you will find a link for donations on the GAPS Science Foundation website).¹⁷

GAPS ONLINE CONFERENCES: Online conferences have proven to be very successful and easy for people to attend. We run them every year, providing new information and tools to assist people in using the GAPS Nutritional Protocol effectively. We had our third annual GAPS Online Conference, "GAPS in the Real World: Tips for a Transformational Life Experience," in February 2023. The recordings are still available. If you are interested in purchasing a GAPS Online Conference 2023 REPLAY ticket, e-mail the GAPS Team (info@gapsoncon.com). The 2024 online conference will focus on children—their health and physical, mental and spiritual development, and their place in our modern world.

GAPS YOUTH MOVEMENT: The GAPS Youth Movement (GYM) is a new project. The goal of this movement is to create a worldwide network of young people (ages ten to twenty-eight) who want to implement the GAPS lifestyle. Many young people today are struggling with health challenges, and this platform will help them make better food and lifestyle choices. To join, go to www.GAPS.me and scroll to the bottom of the page, where you will find a form to subscribe to the mailing list. You will receive updates about the GAPS Youth Movement as we develop and build this community.

who will bring you real companionship and joy. Before you know it, you will be helping others heal which will bring you joy. By helping others, you will make new discoveries, will help you on your own healing journey.

The GAPS Nutritional Protocol is transformative. It is a learning curve that will take you on a journey of discovering who you are and how the world works. For many people, it is the first step away from mainstream dogma and consumerism and onto a road of universal truth and the beautiful life of a real human being. Yes, there will be ups and downs; there will be tears, laughter, personal growth and growth of your spiritual essence. And of course, there will also be lots of delicious cooking, eating, sunbathing, gardening, swimming in lakes, rivers and the sea, walking barefoot and communing with Nature! 

Dr. Natasha Campbell-McBride is the creator of the GAPS concept and the GAPS diet. After graduating with honors as a medical doctor in 1984 in Russia, she earned postgraduate degrees in neurology and human nutrition. In addition to being the author of multiple books

about GAPS and related topics, and a popular keynote speaker at professional conferences worldwide, she is an organic regenerative farmer.

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THE WISE TRADITIONS CHILDREN'S PROGRAM



Children's program coordinator Laura Covell reads a story.



"What's in the box?" asks an attendee with a wide WAPF smile.

What Happened to Our Daughter: The Tragedy of THC-Induced Psychosis and Suicide

By Tara Couture

Suicide is multifactorial—a vile symphony of parts that come together in a mighty clash of a finale. I will share with you the story of our daughter, Mila, who, in a matter of less than six months, tried smoking marijuana for the first time, became addicted, developed marijuana-induced psychosis and, in May 2021, took her own life.

“Took her own life.” Really? In the anguished months since that time, that part still seems like a lie. Our grounded, happy, common-sense daughter did that? Mila? It’s a misalignment of facts, but not because I’m in denial—there is no denial in the world I live in. It’s a misalignment of facts because I wonder who was in control of the gears in her brain when she died. When someone ends the life of another, we have degrees for it. We use different words depending on whether they were in their right mind. If the murder was planned, we wonder for how long and how intricately. Or were they responsible for a murder but not in their right mind? Circumstances dictate whether we label it manslaughter or murder in the first or second or third degree. But when someone ends their own life, they did it and that’s that. Only with our daughter, it wasn’t her. It was a ravaged brain, hijacked by a product that masquerades as the innocuous pot some parents knew growing up.

ANYTHING BUT INNOCUOUS

Many parents, especially those who may have smoked a little marijuana in their youth, have a hard time believing that pot could be anything but a good time. That's certainly what the mammoth cannabis industry wants us all to believe as they expand into ever-growing markets. However, that innocent joint of several decades ago—ridiculously ridiculed, passed around at a Van Halen concert, a puff or two each—had somewhere between 2 and 4 percent THC (tetrahydrocannabinol). That is not what many kids are smoking today. They're smoking highly potent distillates and vaping pens and resins and waxes and "dabs" and things called "shatter."¹ They're smoking laboratory creations meant to drive addiction and set off dopamine avalanches in their still-developing brains.² Manufacturers want our kids coming back for more. However, these products—some in the 99-percent-THC content range³—are meant for obliteration, not a gentle groove to some mellow beats.

I didn't know any of this before. We have two older daughters who didn't have access to these highly concentrated products when they were teens. Pot wasn't legal then. They smoked pot a few times and could take it or leave it. I was never a fan but didn't think much else of it. I didn't even really care if they legalized it. I figured it was the same stuff I had smoked back in the day, only now it would be regulated and safe. That's not at all the story.

Calling these highly refined and concentrated resins and edibles "marijuana" is like calling opium "a poppy" or crack "a coca plant." It is nothing of the sort. In fact, there's no marijuana flower even in the final product of these pens and edibles and dabs and whatever else they sell. Instead, the genetically engineered plant has been highly processed, the THC extracted with solvents and chemically manipulated into a super concentrated offering meant for maximum effect. The marijuana industry is a mammoth behemoth, a multibillion-dollar industry.⁴ Notice how we're hearing of these products more and more? There has been a huge shift. Why? Who stands to profit in the normalization of lives lived in an altered reality?

Many of the teenagers in our rural area in Ontario, Canada purchase black-market, high-

THC vaping pens—their drug of choice—from the First Nations reservation, a place they call "the rez." There, pot shops openly run without governmental oversight. These stores look like Apple stores, glossy and white and legitimate. In a regulated cannabis store in Canada, there are limits on quantities that can be purchased and the amount of THC a product can contain; the labeling and testing of the product must fall within government parameters. In the "rez" pot shops, none of those regulatory requirements exist. The kids—and, in fact, many adults who frequent these stores—have no idea that the products on the shelves are not tested or regulated.

Many of the kids here have figured out which stores don't require an ID and will make "runs" to make bulk pot purchases. Kids without an ID can purchase as much as they want of whatever product they want. I asked the police how this could continue and was told, "politics." In the next breath, the same policeman told me that it is known in the policing community that these shops are connected to organized crime involving human trafficking, gun running and other unspeakable activities.

OUR "BALLERINA WARRIOR"

There are many adjectives I could use to describe our daughter Mila: illuminated, iridescent, mysterious, soft-hearted and funny are just a handful. Mila was a girl with a mind capable of feats beyond a mere mortal—a creature beyond this time. She was a champion of the underdog, a girl who never understood cruelty for gain. She played hockey and rugby, wrote stories and novels, and played the ukulele and jazzy saxophone. During her homeschooling years, we would wake up at six in the morning to notes from her telling us she was in the forest with her bow, looking for adventures. She was the milker of devoted cows and the shepherdess of barn cats, who would sit outside our door, waiting for her to leave the house so they could follow her wherever she went, moving in great calico tumbleweeds behind her. She loved board games (winning, mostly) and raw cream, and she loved her two sisters and her family.

Growing up on our Canadian farm, Mila lived a rather idyllic life. She raised goats and meat rabbits and helped in the garden. When she

Kids today are smoking laboratory creations meant to drive addiction and set off dopamine avalanches in their still-developing brains. Manufacturers want our kids coming back for more.

wanted cream for the bucket of blackberries she picked, she wandered into the field, got her favorite cow, Ursula, and milked her. “Spare a little cream, Ursula?” And of course, Ursula, who had seemingly great affection for Mila, just as every animal on our farm did, was happy to oblige.

We harvest our own animals. With livestock, as they say, comes dead stock. There were so many lessons Mila learned in her condensed years on the farm. When her beloved goat broke her back, she asked her papa to carry it onto her lap and there she sat, on the grass, under the sun, petting her goat and talking to her privately for over an hour. What she said, I do not know. I watched from the kitchen window. All I could see was a little girl, still round and soft in her nine years of age, weeping, and the calm goat, accepting her touch. When she was done, she called her dad over and said, “Okay, she can go. She knows I love her.”

Mila began playing on the boy’s hockey team when she was four years old. At first, she was the little tyke on the ice, turning to help her opponents up every time they fell. Later, she grew into the nickname “Bulldozer” as she took on every six-foot, two-inch powerhouse who dared to slam into her. She was a fan favorite in the stands, the parents yelling, “Yeah that’s right, make her mad! See what happens!” We called our ballerina the “Warrior on the Ice.”

Throughout high school, Mila maintained a 98 percent average and offered peer tutoring to those who struggled. In her twelfth-grade year, Mila was given an assignment to write her biography. “Who was she? Who did she want to be?” Her essay was unlike any that one would expect. Instead of writing about her accomplishments, of which there were many, she told the story of a little doe that she and her father came upon while driving back to our farm from the city late one evening. It’s not unusual to see dead deer here, but what made this creature different from most is that she was still alive, her back legs severed at the knee. She tried to get up, repeatedly, using her exposed bone where a delicate hoof should have been to propel her, but she just collapsed over and over.

Why would our daughter tell this story as her biography? Because, while other cars drove past, swerving around the suffering animal, she and my husband pulled over, brought the animal to the side of the road and soothed it before swiftly slitting its neck. “Swiftly”—that word is important. Her teacher, moved to tears by the story, suggested the word “gently” to smooth out the edges, but Mila wouldn’t have it. “Kindness isn’t always gentle,” she explained. “Swiftly and assuredly,” that was right. She wrote this story as her biography because, as she stated, “That is the person I want to be.” The person who did the hard thing because it was right. And that is the person she truly was. Morally driven. Deeply connected to the natural world. A young woman who had a profound sense of meeting what was hard and painful, over the ease offered up by our culture. She wanted to be a midwife, and she would have been a glorious one.

COVID IN CANADA: A PERFECT STORM

My inclination is to spend all of my time sharing stories of our beloved Mila. As much as I want to remain in those memories, I need to crawl out and do this part now—the part where I tell you the story of

Mila’s death and the events that precipitated it. The part where, in the rubble of my life, I muster what I can to share with you our pain in hopes that there is something here that might make a crumb of difference.

When Covid hit our part of the world, Ontario imposed some of the most draconian and aggressive measures of anywhere on Earth. A couple of weeks to flatten the curve, right? Initially, like almost everywhere and everyone, we obliged. Schools closed. It was near the end of Mila’s grade eleven year. There were no classes online at that time. A mad scramble ensued to get these kids some sort of education. Eventually, schools tentatively opened for some. We had the option of keeping Mila home or sending her in. She insisted on going.

For the next few months, and into the fall of Mila’s senior year, schools opened. Then schools closed. Then schools opened. Mila’s friend group shrunk considerably. According to the mandates in our province, she wasn’t supposed to be socializing at all, and most parents abided by the “no socializing” rule. There was really nowhere for the kids to go anyway. Theaters, live music, restaurants and even places like bowling alleys and the roller rink were closed. Sports were another victim of the mandates. Hockey, the sport Mila had played since she was four, ended, as did rugby. Instead, the friend group that Mila was a part of arranged random, clandestine meet-ups—in a friend’s frigid barn or someone’s basement.

The school board opted for “mono classes” to keep everyone safe. This meant that cohorts of kids went to school and entered one and only one classroom, with six-foot spacing between them and masks on all day long. They sat there until the end of the day. They ate their lunches there, too (masks off and on quickly, if you please). They were not allowed to use their lockers or gather for any sort of social interaction. Their book bags had to stay with them. When we learned that the school bus driver was mandated to keep all of the windows open on Mila’s hour-long bus drive into school every day, despite the temperatures hovering around minus twenty degrees Celsius, we handed Mila the keys to the old farm truck. She started driving herself.

Mila was a girl who was raised on the

land—a girl who knew and found her touchstone of truth in the authentic and the wild. And now our leaders, our authorities, were saying “No more. This is what you have now”—masks, isolation, distance, a war with our own bodies and ourselves. All of it was unrecognizable. Worried about the effects that the bizarre school environment would have on her psyche, we begged Mila to just do online courses, but she refused. She would take what she could get of seeing and being around other people. With the closure of hockey and rugby, school band, peer tutoring and entertainment venues, the few meager moments she had to see her friends—or their eyes, at least—were better than nothing.

It was at this time that Mila started coming home from her part-time job pumping gas at our little country, full-serve gas station (yes, they still exist!) and writing about the interactions she had with customers. She wrote stories about the Jehovah’s Witness that people were openly making fun of. She felt bad for him, so she asked him for one of his pamphlets. She liked how it seemed to make him happy. She wrote another story about complimenting a middle-aged woman on her beautiful hair. The woman broke down into tears and asked Mila if she was teasing her. “No!” Mila assured her, “Your hair is truly beautiful!” The woman replied, “I have cancer, this is a wig. I thought everyone could tell. Thank you, thank you for your kindness.”

In October 2020, Mila wrote in her diary about her frustration with Canada’s lockdowns and her dwindling friend group. Their get-togethers often involved smoking and consuming drugs. She wrote of her boyfriend and other friends always being high on vaping pens. She wrote, “Everyone is always crossed [high], and it’s pissing me off.” She was “pissed off” because their limited interactions were wasteful for her—other kids high and laughing while she sat there “bored.”

Just over a month later, in November 2020, Mila wrote in her diary of trying a vaping pen for the first time and “loving it.” After another month, she wrote that she couldn’t sleep anymore. Within two months, she was using the pens every day, and then often taking a “rip” throughout the night to fall back to sleep. Mila

wrote that she was in trouble. Her unique biochemistry, always exquisitely sensitive, had met its match—the great Russian roulette in life. All of her normal brainwave patterns and hormones were askew. The artificial surge in dopamine would crash her dopamine levels below baseline, and she would feel unbelievably despondent and need to raise those levels again. Soon enough, the deadly combination of her unique biochemistry and these diabolical lab concoctions melded into insomnia, irrational thinking and hallucinations. But her friends all seemed fine, so it couldn’t be the drugs, right?

THE “MODERATION” MODEL

Meanwhile, Mila’s school was dealing with an explosion of kids using the vaping pens at school. The principal, in desperation, ordered the doors be taken off the school washrooms. Our children were living like zoo humans in the synthetic construct of a life.

The school board contracts out to a private company that employs roving counselors who make their way through dozens of schools, sometimes appearing for a few hours every week or two at any given school. When the school drug counselor came around, Mila went to see him. The counselor, not knowing Mila and not talking to any of her teachers—teachers who would certainly have been shocked at the swiftness of her self-identified problem—did what he was trained to do for everyone walking in his door; he told Mila to “moderate” her usage, “maybe just smoking in the evenings or once her homework was done.” He added that it was “probably a good way to cope during Covid.” Mila told her friends that the counselor had given her permission to carry on.

At home, we could see that Mila was struggling. We talked to her, sat on her bed with her. We offered to arrange counseling if she would rather speak to someone else. We could see her sadness, her disconnection, a smile that faded too fast from her face. She assured us she was okay. “Just stressed about all this stuff, trying to figure out what to do” she would say, or that she was PMSing, or that she was just overwhelmed with school and Covid and not knowing what to do after graduation. When we tried to speak

The counselor did what he was trained to do for everyone walking in his door; he told Mila to “moderate” her usage, “maybe just smoking in the evenings or once her homework was done.”

to her about her weight loss and her moodiness, she insisted it was because of all of the above. It was an incredibly difficult time to be in her grade twelve year with so many unknowns.

We could understand her level of stress, and her explanations seemed reasonable. She had always been incredibly mature, honest, responsible and surefooted, so we had no reason to believe anything else was going on other than what we discussed. We did what we could to reach her. We played board games every night after our family dinners as we always had. We talked to her about options. We spoke as a family about how twisted the narrative is, but there was hope in it still. We had covert gatherings and interactions with family and friends. We tried to inject healthy socialization.

NOWHERE TO GO

Word came back from the universities: “You’ve been accepted, but you must be vaccinated.” She was worried, but she was also Mila—pragmatic and a gifted, critical thinker. “I’m not convinced, convince me” is how she rolled. She would wait for the convincing, but until then, she would not accept the vaccine. She spent weeks agonizing over ways to get around the mandates to be vaccinated to attend the university program she wanted. She wrote emails. She spoke to admissions. She brainstormed. When it became evident that it wasn’t going to happen, she considered using some of her savings to travel around the world for a year, volunteering on farms as her older sisters had done when they had graduated. No, it turned out, that was not going to happen either. Canadians were not allowed to leave their country unless they were vaccinated. “I’m in prison,” she said. As 2021 arrived, so, too, did the pressure to decide what to do next. She was itching to test her mettle, to head into the world and take on what it had to offer, but all roads pointed to . . . nowhere. The road had one big stop sign on it.

Mila’s use of the marijuana pens increased. In the new year, she was caught skipping school and had privileges taken away. It was the first time she had ever been in any real trouble. A week later, she told us she was moving out. We were flabbergasted. Her older sisters were flabbergasted. All of us spoke with her, trying to

figure out what was happening. She broke up with her long-term boyfriend and then was devastated that she had. We spent hours and hours trying to understand what was going on. We spoke. We listened. We struggled to find sense in a voice that didn’t even seem familiar. To all of us, she insisted that she wanted to spend the last few months of grade twelve closer to the city, living with a friend, so she could have a more robust social life. She had always loved living in the country, loved the animals and nature, but now it was “limiting.” She wanted out. It was so unusual and out of character for her. Of course, in hindsight, knowing that she was chronically using pens and edibles and that her brain was no longer clear and concise, it makes sense. But at the time, none of us understood what was happening. We had no idea that she was using those pens to escape or that she was in the throes of “marijuana-induced psychosis.” Mila moved into her friend’s house and the drug use increased exponentially.

Out of desperation, Mila had applied to a university that some of her friends would be attending that had a business and accounting program that didn’t require vaccination. She was unenthusiastic about her future but didn’t know what else to do. In February, word came that she was accepted, but the plan to stay in residency for the first year, as her friends were going to do, wasn’t going to happen. She needed to be vaccinated for that. While her friends began excitedly planning where they would live in the residence buildings, she looked at rental places where she could live off-campus. Who would she share an apartment with? She didn’t know anyone but would find someone. She started looking through advertisements and saw that the need for vaccines pervaded even there.

We encouraged her to take a year off, letting things settle down with Covid restrictions and saving up some cash. By March, though, the seams of her life were unraveling. She wrote:

“I just miss being able to see faces, to be able to stand next to someone and not have to worry about being yelled at or told off, or being able to just walk down the streets of downtown Kingston with my friends, and just see everyone doing normal things. I miss being able to just ‘go out’ and do whatever you want, without having to worry about restrictions or masks or gathering sizes or anything like that. Everyone is saying how we’ll never have the ‘old normal’ again—that we’ll have a ‘new normal.’ But to be frank, I don’t want any part of what is going on in our world to be normal, because this isn’t normal. Humans are social animals and we need that social aspect in our lives to be happy. I hope that our world will be back to the ‘old normal’ as soon as possible, because no matter how long things are like this, whether it be two years or eight, I will never view this as normal. I’m also very upset that this had to happen in my senior year. All of my friends and everyone I know will soon be moving away, and I didn’t even get to have that last year with them, or a prom or a graduation. It’s really disappointing and I’m very upset at how distant everyone is with each other now.”

Mila told her friends about terrifying hallucinations she started to have. After her death, her friends told us that she called them, terrified

and shut in a closet, because she believed there were people outside of it trying to hurt her. They also told me that our house was haunted and shared stories of what she told them. When I asked them why they didn't say anything or recognize that she needed help, they said, "We thought she could see ghosts." They had never heard that around 30 percent of marijuana users develop a "marijuana use disorder"⁵ or that at least 15 percent of adolescents using marijuana—especially the high-THC marijuana found in the pens—experience some sort of psychosis or serious mental health issue. These are only estimations garnered from poorly kept records. Experts believe the numbers are likely much higher.

In April, now floundering, Mila started making bizarre decisions that were completely foreign to her make-up. She would not go to university at all. She would go work. No, she would go out west and plant trees. No, she would go out east and work and kayak the Atlantic. We were dazed and confused. What was happening? We sat with her for hours and tried to untangle her thinking. We all cried together. We offered help. We offered everything we could think of. She was desperate, and we could see it, but there

was no reaching her reason. In retrospect, we know that she could not reach her reason either. She was trapped in a hijacked mind.

In the last few weeks of Mila's life, she couldn't sleep for more than a few minutes at a time. She went to see the drug counselor again. She told him that sirens and ambulances were following her everywhere she went. She told him that there were voices, "like background voices, in a train station." Again, he could offer no help other than to recommend moderation. When we met with him and his supervisor, weeks after Mila's death, my husband, an emergency room physician, asked what type of medical intake they do with these kids to identify medical emergencies. "None," they said, telling us that they use "the first four or five visits to build up a relationship." "You have to understand," they told us, "Mila was an anomaly. We don't see honor-roll kids come to us on their own. We see troubled kids being dragged in by teachers and parents. We don't have ties to the school nurse, and we are not here to identify medical needs. Our framework is one of relationship-building and usage mitigation." However, Mila did not need a "friend" to tell her to "mitigate." She needed immediate medical attention. She was

Around 30 percent of marijuana users develop a "marijuana use disorder" [and] at least 15 percent of adolescents using marijuana experience some sort of psychosis or serious mental health issue.

SATURATED WITH TOXINS

After Mila's death, we compiled hundreds of pages of studies, documents and evidence and submitted it to our provincial coroner with an official request for a coroner's inquest. Included in this package were the results of the chemical analysis we had done by a federally regulated laboratory on the vaping pen products that were in Mila's possession. The vaping pens were saturated with illegal, banned chemicals and dangerous levels of heavy metals. The expert who reviews such documents recommended that the coroner proceed with the inquest based on a multitude of "deficiencies" in the system.

Below is a list of the seventeen pesticides and seven heavy metals that exceeded the safety limits in the vaping pens we had tested. These are just the ones that exceeded official thresholds—there were many more pesticides and heavy metals present that fell under the "acceptable" level. Of course, this was one sample from one store, so the results cannot be interpreted as what's in all vaping pens—it is likely that there are a lot more chemicals and metals in some, and maybe less in others.

PESTICIDES EXCEEDING SAFETY VALUES:

Azoxystrobin (systemic broad-spectrum fungicide)
Bifenazate (miticide/insecticide)
Boscalid (broad-spectrum fungicide)
Cyprodinil (systemic broad-spectrum fungicide)
Dichlorvis (organophosphate insecticide)
Fludioxonil (contact fungicide)
Fluopyram (broad-spectrum fungicide, nematocide)
Imidacloprid (systemic neonicotinoid insecticide)
Malathion (organophosphate insecticide)

Metalaxyl (systemic fungicide)
Myclobutanil (fungicide—five hundred times allowable limit)
Paclobutrazol (plant growth retardant, fungicide)
Piperonyl butoxide (added to pesticides to enhance toxicity)⁹
Propiconazole (fungicide—three hundred times limit)
Pyraclostrobin (fungicide)
Pyrethrins (insecticide)
Pyridaben (miticide/insecticide)

HEAVY METALS: Aluminum, boron, bismuth, copper, nickel, tin, zinc

Ordinarily,
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having a medical emergency, and it was missed.

School was off again. She was taking one calculus class online. She went to work and did her job, charming the world with her thousand-kilowatt smile while she crumbled inside. The world loved her. And all around her, the lockdowns persisted while the authorities insisted, “The new normal. The new normal. The new normal.” The old world was gone; the new world had arrived. Ordinarily, she could have navigated the changing world and persevered as she always did, but her brain was no longer her domain. Her good reason and sound judgment were circumvented by a biochemical storm that she mistook as, in her words, her own “fucked-up mind.”

On the morning of her death, our daughter called a drug addiction crisis line. They said they would email her a link to a drug program. She wrote of the conversation in her diary, “Too little, too late.” (The link came via email the day after her death.) When the school counselor belatedly tried to reach out to her, feeling there was something more serious about what she had shared with him, it was also too late.

That evening, we were awoken by the police knocking on our door. When they told us Mila was dead, I was certain she had been murdered. There could be no other explanation—nothing else was even within the realm of possibility. But our Mila, strong and true, had died of suicide. That night, I dreamed that an angel stood before me. Her outstretched arms were empty and her water-soaked wings dripped a puddle around her feet. Her head was bowed. “I failed.” That was her message, and that is what is most excruciating to us—in the end, she saw herself as irredeemable. Broken. “Fucked up.” She was so deeply lost in a mind run amok that she couldn’t even recognize the difference between herself and the poison pulsing through her body, overriding her beautiful brain, stealing her sense and her peace and her joy. Instead, she saw it as her utter and inescapable failure at life.

WHY I TELL MILA’S STORY


There are endless studies on the growing prevalence of cannabis-induced psychosis, which, in up to 50 percent of cases that present themselves to emergency departments, progress

to schizophrenia.⁶ In addition, there are studies on a whole host of other side effects that come from using these concentrated THC products. There are support groups where thousands upon thousands of parents come together to grieve for their beautiful children who died by suicide after having their brains hijacked by THC. There are books written by the heartbroken and the fed-up. But there are no governmental resources for kids, and that’s why I’m writing this. It’s the only reason. If I could be so blindsided—an attentive mom when it comes to everything from organic food to the goings-on of my kids to the chemicals in the synthetic clothing I took care to avoid for them—it can happen to anyone. I want it to happen to no one. Ever again.

Please talk about this with your children. This is not about me; instead, I ask for your efforts to educate yourselves, to protect and educate your babies and to inform others on the realities of what is no longer “just pot.” I’m not here to judge anyone’s choices; I’m sharing this very intimate and painful part of our lives because I am being asked to, because it’s the right thing to do and because Mila has been speaking to my heart. For those who smoke pot, hopefully you can see beyond your defenses of a habit to a bigger picture that involves the future and safety of our young.

When I tell you of things Mila said in her diary, it’s not because we had to go looking for it. She left her diary for us, and she wrote notes to us in it. She wanted us to have it. Sadly, she was often so obliterated by the “pens” that she, an honor-roll student, couldn’t spell or form words in its pages. But she left us her diary because I believe that she knew we wouldn’t ever understand otherwise.

And now we live our days. Every day, every moment. Inescapable. And still, we must love and be open to love. This essay is me loving even in the pain. My hope is that some of you might explore some of the resources, read some stories from other parents and come to understand what is happening to too many of our bright and beautiful. It is trite to say, “If one person can be saved, it’s worth it.” I don’t want one person—I want every single one of those beauties ripped back from the clutches of a greedy industry gone wild. *Every single one.*

I write this essay for every parent who doesn't know about this threat to children. My deepest desire is to have these words find the persons they are intended for. I know they're out there; I just don't know who they are. And I write this because my daughter, Mila, who died by suicide on May 10, 2021, insists that I do. For you, Mila. I did as you asked. 

At her Slowdown Farmstead blog on Substack (slowdownfarmstead.com), Tara Couture writes about “cultivating authenticity in a synthetic world” and shares “ruminations on ancestral food, healthy living, family, homesteading, connection to the natural world, life, death and this radical little thing called ‘sovereignty.’” This article is adapted and reprinted with permission from “Mila’s story” (published on Heather Heying’s Natural Selections blog on February 3, 2022)⁷ and “What happened to our daughter” (published at Slowdown Farmstead on September 21, 2022).⁸

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ORGANIZATIONS, ADVOCACY and PARENT SUPPORT GROUPS

Americans Against Legalizing Marijuana (AALM)¹⁰: An excellent video on this page, “Chronic State,” addresses the genetically modified plants commonly sold today.

Every Brain Matters¹¹: See, for example, “Learn about cannabis-induced psychosis (CIP)”¹² and the video, “THC: The Human Consequences.”¹³

Institute for Behavior and Health: “Develops new ideas to reduce illegal drug use.”¹⁴

International Academy on the Science and Impact of Cannabis (IASIC)¹⁵: The IASIC website is loaded with studies and information; see the extensive list of cannabis-related studies by category in the IASIC medical library.¹⁶

Johnny’s Ambassadors – Youth Marijuana Prevention¹⁷: Johnny Stack said to his mother, three days before he died by suicide, “I want you to know you were right. You told me marijuana would hurt my brain. It’s ruined my mind and my life, and I’m sorry. I love you.” See the Johnny’s Ambassadors list of resources for parents.¹⁸

Moms Strong: “Real stories, unmasking the marijuana charade.”¹⁹

Parent Movement 2.0 (“Parenting just got a lot harder with legal marijuana”)²⁰: Review the “Know the Drug” tab,²¹ or see “Marijuana-induced psychosis – what is it?”²²

Parents Opposed to Pot: “Bursting the bubble of marijuana hype.”²³

Smart Approaches to Marijuana (SAM)²⁴: “Preventing the next Big Tobacco.” See *Impact Report 2023-2024: Lessons Learned from State Marijuana Legalization*.

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The Lyme Disease Lie

By Dr. Samantha Bailey

Over the past few years, there have been a lot of requests for us to say something about Lyme disease, so I decided it was time to dedicate an article (and a video¹) to the topic. In this case, the alleged bacterial pathogen is introduced into the body by a tick, and the claim that ticks cause this disease through bites is considered under the germ theory umbrella. But what does the scientific evidence actually reveal? Have the bacteria been shown to cause sickness, and is Lyme disease even a legitimate entity?

The truth is more shocking than many would imagine. It is also a timely topic, as a new fear campaign has been launched in the form of the alleged deadly Crimean-Congo hemorrhagic fever poised to come to the United Kingdom, also said to be spread by ticks.² Additionally, a tick “bioweapon” gaslighting campaign, supposedly implicating the Pentagon, was also playing on corporate media platforms in July 2019.³

First we
should
investigate
how the
disease is
defined.
And this is
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unhinged.

As my husband, Dr. Mark Bailey, summarizes: “The introduction of the term ‘Lyme disease’ in the 1970s was a win for establishment medicine but a grave loss for the public. A label was attached to a nonspecific range of symptoms and signs and the bug hunters then falsely accused *Borrelia*, a bystander bacterial species. If a doctor says you have Lyme disease, they do not know what they are talking about—get out of there before they run non-diagnostic tests or worse, try to ‘treat’ you.”

UNITED STATES VERSUS NEW ZEALAND PARADOX

Part of the reason we have taken a long time to publish something about Lyme disease is that it is said not to exist in our home country of New Zealand. In fact, the Ministry of Health states: “Ticks have the potential to pose public health and biosecurity risks because they can carry and transmit human and animal diseases. However, the Ministry is not aware of any cases of people catching a disease from a tick bite in New Zealand. The main diseases of concern in some other countries are not currently present in New Zealand.”²⁴ This is an interesting situation, because if we have ticks and humans coming and going, then on these officials’ own terms, why would we not have Lyme disease?

They give an explanation that states, “The ticks present in New Zealand have shown the

ability to transmit pathogens, such as bacteria and viruses. Fortunately, the pathogens are rare in New Zealand and damage is mainly isolated to economic loss caused by heavy infestations.” This is all rather wishy-washy. They are claiming that there are ticks that can transmit pathogens and that the pathogens are present, albeit rare, yet there is no Lyme disease. As expected, the New Zealand Ministry, which is notorious for churning out health disinformation, provides no scientific references on its webpage, and the article has been authored anonymously.

Over to the U.S. Centers for Disease Control and Prevention’s (CDC’s) Lyme disease page, which claims: “Lyme disease is the most common vector-borne disease in the United States. Lyme disease is caused by the bacterium *Borrelia burgdorferi* and rarely, *Borrelia mayonii*. It is transmitted to humans through the bite of infected blacklegged ticks.”²⁵ There are no citations provided, simply a note at the end of the page that cites the “content source” as the CDC’s “National Center for Emerging and Zoonotic Infectious Diseases, Division of Vector-Borne Diseases,” but that link doesn’t provide specific citations either.

WHAT IS “LYME DISEASE”?

Before we go on a search for scientific evidence of the alleged causal agent of Lyme disease, first we should investigate how the disease

SOME OF THE MANY FINE SPEAKERS AT WISE TRADITIONS 2023



Keynote address by Sasha Latypova



Mary Ruddick, CNC, on native cultures



Corey Dunn on healthy fast food

is defined. And this is where the whole thing becomes scientifically unhinged. The CDC states that the early signs and symptoms could be “fever, chills, headache, fatigue, muscle and joint aches, and swollen lymph nodes.”⁶ On Wikipedia, it is even worse; the Lyme disease entry states, “Lyme disease can affect several body systems and produce a broad range of symptoms. Not everyone with Lyme disease has all of the symptoms and many of the symptoms are not specific to Lyme disease, but can occur with other diseases, as well.”⁷ This is a farcical state of affairs because the diagnosis is supposed to be based on a history of tick exposure (not even a confirmed bite) and symptoms—but these symptoms can be just about anything.

What about *erythema migrans*, the famous rash said to be specific to Lyme disease? Once again, this is not a specific type of rash, and the CDC even has a page called “The Many Forms of Lyme Disease Rashes.”⁸ This page suggests that the rash *can* be faint, *could* be crusted and *can* appear in different shapes and colors, whereas other indistinguishable rashes can be dismissed as not *erythema migrans* because they are classified as “allergic reactions” to insults such as insect bites and drugs. At this point, we are likely to get some practitioners protesting that they know Lyme disease when they see it. But what exactly are they referring to? They would have to be making up their own diagnostic criteria as well.

WHAT “PATHOGEN”?

In terms of the alleged pathogen involved, we can consult the “big book” of Lyme disease called *Lyme Disease and Relapsing Fever Spirochetes* published in 2021.⁹ In particular, Chapter 13 titled “Lyme Disease Pathogenesis” states the following:

“Lyme disease was first recognized in 1976 when a cluster of cases of juvenile arthritis was recognized in Old Lyme, CT. Many of these patients also reported cutaneous skin lesions that were similar to those reported in Europe that were previously associated with tick bites. There was a strong suspicion that an infectious agent was the underlying cause of both cases in Old Lyme, CT and

in Europe, but it was not until 1982 that a spirochete found in Ixodes ticks was suggested to be the cause (Burgdorfer et al., 1982). The role of this bacterium, named *Borrelia burgdorferi*, as the causative agent of Lyme disease was quickly established as the bacterium was recovered from patients as well as from reservoir hosts, such as the white-footed mouse.”

The single listed citation by Burgdorfer et al. is the 1982 paper¹⁰ with the title “Lyme Disease—A Tick-Borne Spirochetosis?” (Note the question mark at the end of the title.) The paper describes how the researchers collected one hundred twenty-six ticks from Shelter Island, New York in 1981 and found that 61 percent of them had spirochetes (a type of bacterium) in their gut. On this basis, the authors unwarrantedly concluded, “The degree of infection varied; some ticks contained only a few spirochetes, others contained large numbers.”

Finding bacteria in a gut system is not evidence of an infection. We have trillions of microbes in our gut and, like all animals, the microbes are required for our life processes. In any case, it is nonsense to claim that microbes found in tick guts are the smoking gun for the cause of Lyme disease. To make the case for bitten transmission even weaker, the paper’s authors admitted, “No other tissues, including the salivary glands, contained spirochetes.”

In the same paper, Burgdorfer and his co-authors proceeded to describe a study where they allowed about three hundred ticks to feed on eight New Zealand White rabbits. This was an uncontrolled experiment—simply an observational study—rather than an experimental one capable of testing their hypothesis with an independent variable. If they were suggesting that *Borrelia* caused Lyme disease, then some of the rabbits should have been bitten by ticks “infected” with the bacteria and other rabbits bitten by ticks not carrying the bacteria. Unsurprisingly, the biting onslaught by almost forty ticks per rabbit, attached to their shaved abdomens in metal capsules, caused some of them to develop rashes. However, despite testing the rabbits’ blood daily and taking skin biopsies, they found *Borrelia* bacteria in exactly zero.

Finding bacteria in a gut system is not evidence of an infection. In any case, it is nonsense to claim that microbes found in tick guts are the smoking gun for the cause of Lyme disease.

The reality was that they failed to demonstrate transmission, let alone any ability of the bacteria to cause disease.

“ANTIBODIES” AND MORE PSEUDOSCIENCE

Let us emphasize the fact that there is precisely no evidence that *Borrelia* species cause Lyme disease, and yet this 1982 paper is supposed to be one of the studies—if not the foundational paper—for the case. It is an example of the germ theorists’ desperation to make nature fit their model when the science does not back it up; in fact, we can see that they refuted themselves. So, how on earth is this foundational paper accepted as “evidence” to this day?

Due to the patent failure of their experiments, the researchers resorted to an antibody study. The antibodies were created by using an assay that reacted to an antigen contained in a tick specimen mixture. They reported that the antibody was present in all rabbits that had been exposed to ticks, although keep in mind, they are talking about a titer or concentration here—the protein could have been present in the rabbits not exposed to ticks as well, but they set the cut-off for a “positive” at a one in twenty dilution. Then they tested blood from nine patients clinically “diagnosed” with Lyme disease—which leads us straight back to the problem of, what does this even mean? In any case, they reported that the antibody was found in higher levels in these people than in people not diagnosed with Lyme disease.

It is beyond the scope of this article to dive into the deeper problems with antibodies, such as their specificity and the relevance of their detection in a complex organism. You can watch my video series, “The Yin & Yang of HIV”¹¹ or read *Virus Mania*¹² to learn about the scandalous claims that the medical establishment has made with regard to these dubious laboratory assays. Suffice to say, they do not constitute evidence for a pathogen, and all we can say is that the apparent presence of proteins termed “antibodies” in higher amounts may be an indication of tissue inflammation and damage (or healing attempts).

It has been an ongoing offense committed by the germ theorists to claim antibodies relate to “pathogen” exposure or “immunity.” They resort to this trick because they cannot fulfill Koch’s postulates or provide the required foundational evidence through the scientific method. To be fair, the authors of the 1982 paper did use the word “may” when stating that their “observations suggest that the treponema-like organism. . . may be involved in the etiology of Lyme disease.”¹⁰ But this is the paper that the seven hundred fifty-page tome on Lyme disease provides as *the* evidence that *Borrelia* bacteria cause Lyme disease—and almost everyone in the medical industry parrots the fraudulent claim.

KOCH’S POSTULATES FAIL

In *Lyme Disease and Relapsing Fever Spirochetes*, Chapter 24 (“Lyme Disease in Humans”) ventures to state, “Lyme disease is the prototype of an emerging infectious disease”¹³—apparently “emerging” out of the germ theorists’ minds only, not out of nature. The authors claim, “The isolation of its etiologic agent, *Borrelia burgdorferi*, from humans in 1983, capped an intensive hunt for a pathogen that just a short time before

had been cultured from a black legged (deer) tick.” Here, they cite another pivotal paper with the title, “Spirochetes isolated from the blood of two patients with Lyme disease,” published in the *New England Journal of Medicine* in 1983.¹⁴ The headline sounds impressive until you read that they “isolated spirochetes from the blood of 2 of 36 patients in Long Island and Westchester County, New York, who had signs and symptoms suggestive of Lyme disease.” Two out of thirty-six patients “thought to have Lyme disease” means that thirty-four out of thirty-six did not have any detectable bacteria! The logical gymnastics in the paper are incredible; they even suggested that this result “provides the most direct evidence to date of their [spirochetes’] etiologic role in this disease.”

And how did they reconcile their abysmal statistical findings with germ theory? By claiming, without any evidence whatsoever, that “Because of the low frequency of isolations (2 of 36 patients), the spirochetemia is probably transient and of low density in this condition.” Here, they are one step away from the virologists who claim that despite the microbes wreaking havoc in the body, the microbes can’t be found anywhere. The icing on the cake comes when the authors of the 1983 paper bizarrely assert that their paper means that “three of the four Koch’s postulates for establishing the role of the spirochete as the causative agent of Lyme disease have been largely satisfied.” Utter nonsense—not one of Koch’s postulates was satisfied, as analysis of these foundational papers reveals.

MOVING ON FROM ALLOPATHIC MEDICINE

The last aspect to address is the mainstream claim that antibiotics are useful for treating the disease. If this were true, it cannot be due to any antimicrobial action because, as we have just seen, there is no evidence that any of this is caused by bacteria. However, even mainstream practitioners admit that they don’t have sound evidence that antibiotics are effective. If we consult the article titled “Diagnosis and Management of Lyme Disease” in *American Family Physician*,¹⁵ it states that “doxycycline is effective for the treatment of early Lyme disease”

but then lists the evidence rating as a lowly “C,” which equates to “consensus, disease-oriented evidence, usual practice, expert opinion, or case series”—in other words, not established through the scientific method.

Having worked in the system for two decades, I know that doctors hope that one of their prescription medicines will be the magic bullet. Unfortunately, this hope stems from the chronically ingrained and misplaced belief in germ theory and pharmaceuticals. There are other factors as well; a recent video about “medical self-delusion” by Roman Bystranyk, the co-author of *Dissolving Illusions*,¹⁶ summarizes the phenomenon.¹⁷

We have a conundrum here because the term “Lyme disease” is so well known, it seems to most people that it must be real. However, the term should be relegated to the archives of pseudoscience. And, as “terrain” proponents, we should be careful about being drawn into discussions along the lines of, “What causes Lyme disease, if not bacterial infection through tick bites?” It is not something that can be diagnosed because the signs and symptoms are non-specific, the microbiology is non-specific and the so-called “tests” (blood antibodies) are non-specific.¹⁸ I have heard Dr. Tom Cowan¹⁹ say that labeling a patient with “Lyme disease” is completely unhelpful, and I would wholeheartedly agree, as that is what the scientific literature reveals. Symptoms and signs may be real, but the fictional concoction known as “Lyme disease” is an allopathic germ theory cover story. We need to reject the label and attend to each individual’s situation. Focusing on whether they may have been bitten by a tick in the past few months is probably not going to provide the answer to restoring health.

Every case will be different, and the various symptoms and signs are manifestations of the body’s attempts to heal itself. The answers are found in addressing factors such as environmental toxins and dietary errors. And, it should be pointed out, we do not have pharmaceutical deficiencies, so that will not be the answer either.

Some time ago, I moved away from the medical model involving alleged specific disease entities with the realization that the body simply has various conditions. The condition of

the body should be perfect, and this can be achieved through ignoring fear narratives and focusing on right living and right thinking. These principles are covered in detail in the book *Terrain Therapy*,²⁰ as well as in my weekly content and through the Weston A. Price Foundation. ☯

Dr. Samantha Bailey is a content creator, medical author and health educator (visit her site at drsambailey.com/). After training and practicing within the medical system for two decades, she commenced a new phase of understanding and promoting health as a wider concept. [Editor’s note: For more about the history of the condition labeled as Lyme disease, see “Are Explanations for Lyme Disease Another House of Cards?” in the Summer 2021 issue of Wise Traditions.]^{21]}

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Reading Between the Lines

By Merinda Teller

The UN's "One Health" Agenda:

Don't Be Fooled by the Warm and Fuzzy Sales Pitch

As many Americans have come to realize, a one-world government has been the wet dream of so-called “elites” for decades. Pooh-poohing national sovereignty as old-fashioned, banker and Trilateral Commission founder David Rockefeller famously asserted in 1991, “The supranational sovereignty of an intellectual elite and world bankers is surely preferable to the national auto-determination practiced in past centuries.” He then admitted to being “guilty” and “proud of it” for “conspiring with others around the world to build a more integrated global political and economic structure, one world if you will.”¹

Alleged war criminal and Rockefeller protégé Henry Kissinger—the “morally flawed” doyen of twentieth-century “realpolitik”—often and not very subtly reiterated the case for a “harmonized” global order.²⁻⁴ In a 2009 piece in the *International Herald Tribune* titled “The Chance for a New World Order,” Kissinger argued that “common action,” “compatible priorities,” “general rules,” a “common design” and a “grand strategy” were needed to stave off global “chaos.”⁵

One of the one-world government mechanisms that Kissinger no doubt had in mind to help put the desired “rules” and “priorities” in place was “One Health,” a deceptively innocent-sounding global framework spearheaded in the early 2000s by four “unelected technocracies”: the Food and Agriculture Organization (FAO), the World Health Organization (WHO), the World Organisation for Animal Health (WOAH) and the United Nations Environment Programme (UNEP).⁶ These and other One Health champions like to warn that “[s]olving today’s threats and tomorrow’s problems cannot be accomplished with yesterday’s approaches.”⁷ Draping One Health in rhetoric about evolving interactions between “people, animals, plants, and our environment,” the quadripartite bureau-

cratic alliance presents One Health as a “tomorrow”-oriented solution “for a safer world.”⁸

Significantly, One Health’s far-reaching “operational definition,” updated in 2021, is replete with the buzz words favored by twenty-first century globalists and technocrats—words like “unifying,” “collective” and “sustainable”:

“One Health is an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and inter-dependent. The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together to foster well-being and tackle threats to health and ecosystems, while addressing the collective need for clean water, energy and air, safe and nutritious food, taking action on climate change, and contributing to sustainable development.”⁹

Similar flowery language is on display in a short article published by “*The Lancet* One Health Commission” in 2020. (Of note, in addition to representatives of various UN agencies, universities and the CDC, the Commission’s twenty-four members featured Anthony Fauci’s pal, Peter Daszak, whose EcoHealth Alliance has had a “long and profitable relationship with the Pentagon” for biological weapons research.¹⁰) Waxing eloquent about “the complex interconnectedness and interdependence of all living species and the environment,” the Commission promised to work on “policy, implementation, and governance recommendations” destined for “integrat[ion] in policy briefs, international guidelines and protocols, and various high-level global health resolutions.”¹¹ Looking back and “decoding” the Commission’s pledge from a 2023 vantage point, Dr. Meryl Nass suggests that the latter sentence really means, “We plan to shove these ideas down your throat” and “assist in the world takeover.”¹² In January 2023, *The Lancet* published four more papers about One Health,¹³ including a paper documenting “the proliferation of One Health collaborations” around the world—collaborations that likely involved implementation of some of the Commission’s recommendations.¹⁴

For those inclined to dismiss One Health as just so much UN gobbledegook, it is necessary to see that behind all the wordy salesmanship (which includes, since 2015, a One Health journal “to provide a platform for rapid communication of high quality scientific knowledge on inter- and intra-species pathogen transmission”¹⁵ and, since 2016, an annual “One Health Day”¹⁶), One Health and related UN initiatives are wolves in sheep’s

clothing. Notably, the *Lancet* Commission links One Health to the UN's seventeen Sustainable Development Goals (SDGs), which themselves represent “technocracy on steroids,” according to Dutch science writer Rypke Zeilmaker.¹⁷ As writer Patrick Wood has documented in a series of important books about the history and aims of technocracy,¹⁸⁻²⁰ “sustainable development” and “technocracy” are interchangeable terms, both referring to the long-ambitioned globalist push to destroy free enterprise and build out a global system that centrally controls all resources—including energy and food—as well as people. Thus, when One Health’s advocates talk about the need for “global cooperation and global participation using the basic principles enshrined in One Health,”¹⁶ their subtext is a “greater good” form of top-down control that should alarm anyone who cares about individual and national sovereignty.

In this context, it is also important to recognize One Health’s relationship to the WHO’s attempted “power grab”²¹ through amendments to the International Health Regulations (IHR) and/or via a “Pandemic Agreement” that would make the WHO “the biosecurity arm of an unelected, technocratic, unaccountable, authoritarian and totalitarian World Government.”²⁶ As British author Simon Elmer, an expert on the biosecurity state, explained in a March 2023 *Off-Guardian* article, One Health is, in fact, one of the central “legally enforceable principles” being written into the Pandemic Agreement.⁶

“ONE HEALTH” FICTIONS MEET THE “RIGHT CRISIS”

A few years after he made his unapologetic “one world” comments, the ever quotable David Rockefeller commented, “All we need is the right major crisis, and the nations will accept the New World Order.”^{22,23} In April 2020—once again echoing his one-time mentor—Kissinger published a ready-made article in *The Wall Street Journal* titled “The coronavirus pandemic will forever alter the world order.”²⁴

In the context of the dynamic duo’s remarks, it is, therefore, worth noting that One Health made its debut on the world stage in 2003 in connection with—what else?—drummed-up panic around a “coronavirus” (“SARS-CoV-1”) and a putative condition dubbed “severe acute

respiratory syndrome” (“SARS”).¹⁶ And in 2020—following almost two decades of refining the One Health agenda at various conferences—another manufactured “coronavirus” scare furnished the convenient pretext to take One Health to the next level. The 2023 *Lancet* paper on “One Health collaborations” signaled as much when its authors complacently concluded, “The COVID-19 pandemic has shown the world that global health security relies on the ability of health systems collectively to prepare for, prevent, and respond to transboundary threats of epidemic and pandemic potential,” and they also emphasized “the need to apply One Health perspectives” to these processes.¹⁴

At its core, as two decades of One Health boosterism demonstrate, the One Health framework hinges on two powerful and destructive fictions: viral contagion and “zoonosis” (plural: “zoonoses”), a term introduced in the nineteenth century by German pathologist Rudolf Virchow.²⁵ From “swine flu” to “HIV” to “Ebola” to “Zika” to “SARS-CoV-2,” these two intertwined bogeymen have established a track record as effective tools for whipping up fear and getting populations to accept top-down “medical dictates.”²⁶ Where viral contagion is concerned, Sasha Latypova reminds us how skillfully the story-spinners have wielded “the narrative of ‘emerging’ novel viruses,” persuading the public that “[s]cary invisible viruses. . . can pounce out of a jungle any minute, and are just a plane ride away from infecting half the planet with a lethal new pathogen!”²⁷ Unintentionally echoing Latypova’s satire with their own hyperbole, a group of academics put it this way in a 2019 article titled “The One Health approach—why is it so important?”:

“The outbreak of SARS, the first severe and readily transmissible novel disease to emerge in the 21st century, led to the realisation that. . . a previously unknown pathogen could emerge from a wildlife source at any time and in any place and, without warning, threaten the health, well-being, and economies of all societies.”¹⁶

As the “wildlife” aspect of the previous

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quote illustrates, the zoonosis bogeyman helpfully compounds the contagion drama. In fact, the WHO has not one but three squirrely definitions of zoonosis in its toolkit,²⁸ making it possible to tailor ostensible zoonotic threats to any situation. One definition of zoonoses—“diseases and infections naturally transmitted *between* people and vertebrate animals”²⁹—emphasizes that animals, too, can be victims of zoonotic “outbreaks” (think “bird flu”); the two other definitions (found together in a single WHO fact sheet) focus on the threat to humans, referring to either “any disease or infection that is naturally transmissible *from* vertebrate animals *to* humans” or “an infectious disease that has *jumped* from a non-human animal to humans.”³⁰ (The image of a “jumping” virus seems to be a particularly evocative and effective propaganda point—bats or monkeys, anyone?)

Striking a slightly critical note, the authors of the “One Health collaborations” paper state that while One Health is supposed to tackle a wide variety of “global health security hazards”—such as “food safety concerns and food and nutrition security or extreme weather, water security, and environmental degradation”—the latter, thus far, have received less attention.¹⁴ Instead, the dominant and single-minded focus of funded networks operating under the One Health umbrella has been and remains the ever-

sexy issue of “emerging infections and novel pathogens.” And why not, given the WHO’s over-the-top claims that there are over two hundred “known” zoonoses and that zoonoses “comprise a large percentage of new and existing diseases in humans.” As Latypova notes, “What can be better than an invisible threat to justify printing and spending truckloads of money for mega-defense/research contracts, while flying to the global champagne-caviar events and giving each other diverse-inclusive-sustainable science awards?”²⁷

“ONE HEALTH,” FOOD AND FARMING

Despite One Health’s overriding focus on zoonoses and contagion, one should not be complacent about its potential to mess with rights and freedoms in other areas. Yes, fake zoonoses can cover up a multitude of sins (zoonoses seem to handily “emerge” whenever globalists need a health justification for another round of oppression), but in addition, the global organizations behind One Health have made no bones about the fact that they envision a far broader scope—one that “clearly embraces other disciplines and domains, including environmental and ecosystem health, social sciences, ecology, wildlife, land use, and biodiversity.”¹⁶

Where food access and food freedom are concerned, the mention of “land use”—and the CDC’s enthusiastic enumeration of “food safety and food security” and livestock health as core One Health areas^{25,31}—are hardly reassuring, especially when considered against the historical backdrop of Rockefeller’s and Kissinger’s eager weaponization of food.³² A 2020 article by UC Davis researchers illustrates how One Health groups are considering applying One Health in the areas of “animal health, food safety, food security, and sustainable food production.”³³ Calling for a “transdisciplinary” expert team of “microbiologists, pathologists, epidemiologists, veterinarians, animal, plant, and environmental scientists” (farmers are conspicuously absent here), they suggest:

PUTTING THE ONE HEALTH INFRASTRUCTURE IN PLACE

According to a CDC timeline,⁴⁸ the following are some of the “important events in the history of One Health”:

- 2004: At a symposium at Rockefeller University, experts convened by a front group called the Wildlife Conservation Society (WCS) publish twelve “priorities” for a “Globalized World,” dubbed the Manhattan Principles, laying the groundwork for One Health to take off.⁴⁸ (In 2020, the WCS attempted to shed the organization’s long-standing eugenics taint by condemning its founders’ “eugenics-based, pseudoscientific racism, writings, and philosophies” and actions such as putting a young man from Central Africa on display in the Monkey House of the Bronx Zoo for several days in 1906 until halted by outraged Black ministers.⁴⁹)
- 2007: One hundred eleven countries and twenty-nine international organizations recommend the One Health approach for “pandemic preparedness” at an “avian and pandemic influenza” conference.
- 2008: One hundred twenty countries and twenty-six organizations formally endorse One Health in a UN-authored document titled *Contributing to One World, One Health: A Strategic Framework for Reducing Risks of Infectious Diseases at the Animal-Human-Ecosystems Interface*.⁵⁰
- 2009: The CDC establishes a “One Health Office,” and the U.S. Agency for International Development (USAID) launches an “Emerging Pandemic Threats Program.” Twenty-three countries also meet in Canada to recommend “actions that countries could take to advance the concepts of One Health.”
- 2010: The European Union (EU) commits to operating “under the One Health umbrella,” and international agencies continue taking steps to “move the concept of One Health from vision to implementation.”
- 2011 and on: Multiple One Health convocations take place, including a One Health Summit in Davos, Switzerland in 2012 focusing on food safety and security.

- Incorporating One Health approaches in curricula focused on animal and human health to cultivate a “One Health mindset” and create a cadre of “One Health Practitioners” and researchers
- Using One Health as a hook to attract a new (more gullible) generation of farmers and ranchers (the authors point out that 63 percent of U.S. farmers are over fifty-five years old)
- Conducting genomic sequencing of “agriculturally important plants”
- Studying “viral interactions at the interface of produce, wildlife, and humans,” including wildlife’s movements “from garbage sites to produce fields and. . . urban areas. . . all the while eating, defecating, and spreading fecal pathogens in the environment”
- And, in yet another misapplication of the polymerase chain reaction (PCR) technology, using PCR to track and trace “microbial causes of foodborne diseases”

These researchers also proclaim the dangers of “transboundary diseases,” which they define as “epidemics of highly contagious animal diseases”; in this instance, we’re told, the diseases do not cause illness in humans but are alarming for their potential economic impact. For the “highly contagious” part of the story, the authors colorfully list transboundary disease transmission “via fomites, swill, contaminated meat products as well as by direct contact and soft ticks.” (Why “soft” ticks?) Fomites—as explained and made famous by disease detective Kate Winslet in the dreadful 2011 movie *Contagion*—are the “everyday objects” (or “passive vectors”) that supposedly “carry and spread disease and infectious agents”³⁴; fomite hysteria prompted the sanitizer mania of 2020. In the researchers’ conception of “transboundary diseases,” however, it is unclear how livestock are supposed to come into contact with the would-be fomites—doorknobs, light switches, clothing, mobile phones—most often accused of harboring lurking germs.

As an example of a “transboundary disease,” the authors cite “African Swine Fever” (ASF), an example that makes it possible to see how the application of a “One Health mindset” could facilitate abuse and control of livestock-owning farmers or homesteaders. Explaining that “China is the world’s largest producer and consumer of pork” (five hundred million pigs annually), the authors matter-of-factly describe a 14 percent “hog inventory reduction” and a 13 percent “sow inventory reduction” totaling forty-nine million animals—a culling demanded by the Chinese government after ASF was said to have “emerged” (there is that word again) in 2018.³⁵

Events in the UK in 2001 may have set the precedent for mass, expert-dictated animal cullings; in that year, the UK government required the drastic slaughter of millions of cattle and sheep based on unfounded “foot-and-mouth disease” predictions by shill epidemiologist Neil Ferguson (infamous for repeatedly pumping up the threat of scary viruses, including in 2020).³⁵ In the U.S., bogus PCR testing for so-called “highly pathogenic avian influenza” (HPAI) recently has led to the similarly disastrous culling of both small-scale and larger poultry flocks—sixty million birds as of spring 2023.³⁶ Illustrating the draconian power of

those in charge to keep pathogen panic going, WAPF’s Pete Kennedy explains,

“If a farm has one ‘non-negative’ test for HPAI, the USDA will put the farm under quarantine, not lifting the quarantine until the farmer depopulates the flock. There doesn’t have to be any die-offs for a cull order, nor any sign of illness in the birds, just one non-negative test; APHIS [the USDA’s Animal and Plant Health Inspection Service] or a state agency can keep testing until they get the result they want.”³⁶

As WAPF supporters know only too well, many travesties are possible under the regulatory guise of “food safety,” so it is of some concern that experts are proclaiming food safety to be a “linchpin” of One Health.³⁷ For example, both domestically and internationally, it looks like One Health could be used to justify further harassment of small-scale dairy producers (who already are frequent victims of regulatory abuse). A 2017 paper describes experts’ application of a “One Health lens” to dairy production in the West African nation of Mali “for control of zoonoses, reduction of food losses, and emergency preparedness.”³⁸ Noting that 80 percent of Mali’s labor force is agricultural, with livestock representing a significant source of the country’s income, and a wide range of animals (including goats, sheep, cows and camels) involved in milk production, the authors point out that as of 2008, traditional family farms provided 98 percent of domestic milk. What would One Health bring to this long-standing tradition of small-scale dairy production, adapted to the vagaries of drought and, in the north, to nomadic lifestyles? Citing the need to “empower” primary producers “to cope with international food safety standards,” and advocating for public-private “interventions” (meddling) by “local government and international organizations, national and regional agencies, civil society organizations, legal and insurance companies, and research bodies,” the authors recommend:

- Making “professional expertise” available to teach farmers about “the value/food chain” and “new agricultural

techniques,” guided by experts in “governance, economic modeling, policy impact assessment, and scientific and technological advances”

- Promoting farmers’ use of “animal-based monitoring tools”
- Forming networks of dairy farmers to “support tracking of wide-scale data and georeferencing of remote areas”
- “Exploiting” farmer networks as a “surveillance system”

Also of concern, One Health may shape up as a new avenue for attacking raw milk—with “low- and middle-income countries” the target for now, but perhaps with high-income countries becoming a target later on. In a 2019 article by the same UC Davis authors mentioned previously, titled “A One Health perspective on dairy production and dairy food safety,” the authors tsk-tsk about fresh (unpasteurized) milk consumption “in developing countries where regulation and oversight of the dairy industry is lacking,” alleging that this sets dairy up to be “a vector for zoonotic transmission of disease.”³⁹ These sterilization-obsessed researchers profess to be worried about “farm-to-table” pathogens but appear oblivious to raw milk’s “biochemical magic”⁴⁰ and ignorant about the historical circumstances that led to wide-scale pasteurization (such as cows being fed distillery swill and deprived of access to pasture). Celebrating pasteurization’s ostensible triumph, the authors scold consumers who “prefer unpasteurized products” for “putting themselves at risk for developing foodborne diseases.” Their proposed One Health “management approach,” with the technocratic name of “Dairy Dynamic Management,” is to be driven by “specialists” who “understand food safety begins on the farm and diseases can be passed between humans, animals, wildlife and the environment.”³⁹

Experts closer to home are not immune to the lure of One Health rhetoric; they suggest that One Health approaches are a way to achieve “a more favorable balance between food safety, food security, and ecosystem and human health” on small family dairy farms in the U.S.⁴¹

“SUSTAINABLE” IS ALWAYS A COVER STORY

Interestingly, antimicrobial resistance (AMR) features prominently on the list of “global health problems” said to be suited to a One Health approach, due to the triple environmental-animal-human effects resulting from “the irresponsible and excessive use of antimicrobials in . . . agriculture, livestock, and human medicine.”⁴² This is another area that on the surface may sound plausible and helpful, but the fact that AMR is “integrated” into several of the UN’s Sustainable Development Goals should raise a red flag.


In 2022, Mexican researchers revealed one of the possible ulterior motives behind the expressed concerns about AMR—namely, to open the floodgates for “the development and use of vaccines [directed against antibiotic-resistant bacteria] and alternatives.”⁴² A 2023 paper titled “Nanobiotics and the One Health approach” explains that one of those “alternatives” is nanotech.⁴³ In fact, “novel” nanomaterials—including “nano-additives,” “nano-fertilizer,” “nano-pesticide,” “nano growth promoters” and other nanotech wonders—are making rapid inroads in

food and agriculture, “offering complete food solutions from farm to fork.”⁴⁴ Ironically, even the WHO—one of One Health’s principal cheerleaders—admits that “engineered nanoparticles . . . have raised concern about unwanted or unexpected interactions with biological systems, which could result in adverse consequences to human and ecosystem health.”⁴⁵ But even there, it is One Health to the rescue (!), with nanosafety advocates reassuring us that “a transdisciplinary approach, underpinned by the One Health concept” will “support the sustainable development of [agri-nanotechnologies].”⁴⁶

Back in 2011, a citizen submitted a prescient letter to the editor of the *Aspen Times*, commenting on David Rockefeller’s elitist aspirations. The author’s dystopian description of the battle for freedom could have been written in 2020 or beyond:

“The primary obstacle blocking the [Rockefeller-envisioned] ‘sovereignty of an intellectual elite and world bankers’ is a strong, democratic, sovereign America. Both cannot exist simultaneously. Therefore, our mortal enemy has been decimating America for decades, the battlefield littered with the middle class, dazed soldiers wandering in despair, jobs lost, pockets empty, homes foreclosed, dreams crushed and forced to bow to their oppressors. . . . The age-old dream of world domination is alive and well. Our real enemy are the globalists, scientific-technological elites who. . . are attempting to establish the NWO.”⁴⁷

Although those of us fighting for food freedom, health freedom and financial freedom have our work cut out for us, the fortunate fact is that we can learn to see through the feel-good verbiage of stealth initiatives like One Health to recognize and push back against the threats that they conceal. The “scientific-technological elites” who want to control (and poison) us are a bit like the emperor in Hans Christian Andersen’s “The Emperor’s New Clothes.” As one writer sums up the parable, “Andersen’s story shows the vanity of a fictitious Emperor who believes that his subjects accept anything he decrees, even to disbelieve what they can plainly

see. But when his pretensions are punctured by a small child, laughter ensues, the Emperor is humiliated, and he leaves the story powerless.”⁴⁷ If we can laugh at One Health and its fictitious contagion and zoonosis underpinnings, we stand a chance of a similar outcome. 

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Homeopathy Journal

THE USE OF CANNABIS AS A HOMEOPATHIC REMEDY

By Anke Zimmermann, BSc, FCAH

Cannabis can
turn into the
gift that keeps
on giving,
and not in a
nice way.

Disclaimer: This article is not intended to diagnose or treat any disease or condition. It is for educational purposes only. The author advises readers to consult with a qualified health care professional prior to taking any homeopathic remedies.

Touted by enthusiasts as harmless and a good way to relax after a long day, cannabis is the most commonly used recreational drug in the U.S. and many other parts of the world.

The flowers and leaves of the cannabis plant are used for their potential to induce feelings of euphoria (feeling high), a sense of well-being, relaxation and intensified sensory experiences. Colors are brighter, music is sweeter and food—oh, food tastes so good, you don't want to stop eating! Pass the chocolate brownies, please.

Unfortunately, there is no free dessert in the world of mind-altering substances and that which goes up eventually must come down. From having a bad trip lasting a few hours to loss of motivation, lowered IQ and an increased risk of psychotic episodes, as well as transgenerational effects in the offspring of cannabis users, cannabis can turn into the gift that keeps on giving, and not in a nice way.

Enter the dark side of cannabis.

THE DEMENTORS

Alicia, a fourteen-year-old girl, consulted with me regarding social anxiety. She stated, "I got social anxiety after smoking grass every day for a couple of weeks. I smoked it before, but not every day. Now I feel kind of paranoid; I think people are looking at me and talking badly about me. I can't look people in the eye when I'm out on the street, in the bus or in a store."

As if that weren't bad enough, Alicia had also started to have frightening nightmares. She said, "I dream of evil spirits, ghosts, coming to

get me. They are trying to get down my throat. I want to scream but I can't. They remind me of the Dementors in the Harry Potter movies, except that they are not trying to suck out my soul but rather get into my body."

Not only that, but Alicia could feel those spirits flying around her home: "I can feel them around me, especially at night. They are flying through the house at great speed. It was so scary that I told my mom; she used a Bible and a rosary to try and exorcise them, and it kind of worked. I stopped smoking weed, but I still feel kind of paranoid. I also see things in the trees, like wolves—suddenly there is a face between the branches, looking at me and baring its teeth."

Studies have shown that cannabis use can be linked to depression, anxiety and psychotic episodes, but it is not known whether marijuana is the cause or more of a trigger.¹

This young girl may have been affected by the greatly increased potency of cannabis; over the past few decades, the amount of THC in marijuana has increased to three times what it was twenty-five years ago.¹ She may also just have been more sensitive to its effects because of her young age. Cannabis can have more of an impact on teens and young adults, as their brains have not fully matured yet.

Alicia got a homeopathic preparation made from *Cannabis indica* and after a few doses, she started to feel better. However, she had to continue to use it for the next several years; every time she was exposed to cannabis smoke when her friends lit up, even that level of exposure would again trigger her social anxiety and paranoia symptoms.

A DESTROYED WORLD AND "EVERYTHING IS OUT TO GET ME"

I saw another teenager, nineteen-year-old Emilio, because he wanted help quitting mari-

juana. He had been smoking pot continuously since age sixteen. He reported, “I’ve gone into a dark head space, isolated, alone in the universe. I feel lost. After smoking pot, I feel depressed and have angry thoughts, even homicidal thoughts. It makes me go crazy! I lose motivation. I feel small, like a little bug, not the same person. I’m really small and have no power, but I have to fight demons. I want to quit but it keeps sucking me in.”

Sometimes, things were beautiful. He noted, “I can have really positive dreams. A few months ago, I had a dream of a beautiful, French castle. I could see farms and sheep out of the window. There was a girl dancing the tango; it was like happily ever after.” But the castles had their pitfalls: “I’m in a black castle and I fall through holes, or a trap door in the dark. There are little gremlins walking around down there, with black eyes. It feels as if I’m in a game.” He added, “I’m in a post-apocalyptic dark area, a destroyed world, and everything is out to get me.”

Emilio got *Cannabis indica* 200C, 1M and 10M over the course of a few weeks. It helped him enormously with some of his dark thoughts and feelings as well as his nightmares, but he did not continue under my care, so I can’t be sure that it helped him to quit. Nonetheless, his experience provides a good description of the dark side of cannabis.

Cannabis can be like heaven or hell—lofty heights of beauty and sensory delights versus hellish apocalyptic realms filled with monsters and ghouls.

HOMEOPATHIC CANNABIS

In homeopathy, remedies made from both *Cannabis indica* and *Cannabis sativa* were introduced in 1841 by Dr. Charles Friedrich Trinks (1800–1868), a follower of Samuel Hahnemann, the founder of homeopathy. It stands to reason that early homeopaths would have thought of creating a remedy from cannabis, as the intoxicating effects of the drug were well known.

In case any readers are new to homeopathy, it is helpful to recognize that homeopathy is based on the similarity principle, meaning that a substance that can produce certain symptoms

in a healthy person may be used to heal similar symptoms in someone already experiencing such symptoms when given in homeopathic, potentized form. A homeopathic remedy made from cannabis does not contain a single molecule of actual cannabis in any potencies over 12C, it would just be an energetic imprint.

Even without prior use of cannabis, this can be a remedy for serious mental pathology. However, the need for this remedy has most certainly increased with the progressive legalization and rise in the use of cannabis.

Symptoms² that may respond to homeopathic cannabis can include:

- Panic attacks, great anxiety and fearfulness
- Fear of insanity or “losing control”
- Paranoia of all kinds
- Feelings of disorientation and confusion;
- Theorizing (e.g., has a million ideas and explanations)
- Giddy, exhilarated and excited states;
- Causeless laughter;
- Delusions of all kinds
- Lack of a sense of identity
- Anger and rage
- Behavior disorders in children; annoying, spacey, loquacious kids

Homeopathic cannabis can, therefore, be potentially helpful to relieve symptoms caused by the use of cannabis (as in the two cases described); to potentially aid in breaking a habit for or addiction to cannabis; or to help offspring affected by cannabis.

OFFSPRING, YOU SAID?

Indeed, the effects of cannabis do not just stop with the present generation; they can potentially be passed along to children and grandchildren. Cannabis used during pregnancy has been associated with longer-term developmental effects in children and adolescents, including hyperactivity, poor memory and reduction in reasoning and problem-solving skills.³

In my practice, I have seen that even cannabis use before conception, by either parent, has led to various pathologies in offspring, as the case of Carl illustrates. Carl, an adorable ten-year-old boy, was brought to my office for

The effects of cannabis do not just stop with the present generation; they can potentially be passed along to children and grandchildren.

chronic sinusitis of five years' duration. He was always congested, had dark circles under his eyes and snored at night. Moreover, Carl was also highly dyslexic. He said, "I can't read well because the words are always moving on the page. The words can jump up or down to another line altogether, which makes it hard to follow them." He also easily mixed up the letters "b" and "d" as well as "p" and "q."

In math, Carl was often spaced out and in his own world. "I can hear the teacher talking, but the words don't make any sense," he commented. The teachers thought he had a visual processing disorder. Carl was slow to answer questions and seemed a bit spacey. He had dreams of floating and flying in a world of shapes and colors, and he was afraid to go to sleep at night. "I see things in the dark, and I'm scared of ghosts!"

Carl's mom confirmed cannabis use before conception. Amazingly, just one dose of *Cannabis indica* 10M greatly helped his dyslexia symptoms! At the next follow-up, Carl happily reported: "The words don't move on the page anymore! I can read easily now!" The words now behaved and stayed on the same line, as they were supposed to.

Carl's sinus problems also improved. On this note, *Cannabis indica* may be helpful for chronic sinusitis as well as various genitourinary problems, such as kidney and bladder disorders and even gonorrhea. Chronic prostatitis may likewise respond to *Cannabis indica*, if other symptoms fit.

WHAT GOES UP MUST COME DOWN

Cannabis can have harmful effects on people, especially teenagers and young adults, as their brains have not yet fully matured. Cannabis can be linked to social anxiety, panic feelings, paranoia, depression and loss of identity. "4:20" (slang for pot consumption and for April 20, "marijuana culture's high holiday"⁴) may accidentally turn into "4:ever"—whether the substance is smoked or eaten as brownies or other edibles.

Fortunately, homeopathic cannabis may be helpful for those affected by adverse effects of cannabis as well as for children or grandchildren

of cannabis users who display various physical, developmental or behavioral symptoms that may be linked to cannabis.

Again, homeopathic cannabis does not contain any active compounds of cannabis. It is inexpensive and available at various online homeopathic pharmacies or from professional homeopaths. It is always best to consult with a professional homeopath for serious physical, mental or emotional conditions or challenges.

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THE DANGERS OF STEVIA

By Dr. Jocelin Whitaker

When I was studying to become a naturopath and completing my clinical hours, a new sweetener called stevia was becoming popular. However, there was something about it that did not sit right with me. The aftertaste in my mouth made me wonder whether we really were supposed to be eating it. Was there more to this seemingly innocent “natural sugar-free sweetener” than we were hearing about?

I decided not to eat stevia based on how much I disliked the aftertaste, but, being a perpetual student always seeking answers, I wanted to know something about the history of the stevia plant. When I began researching stevia around 2011, I quickly came across its origin story, which described stevia as coming from a tribe (the Paraguayan Matto Grosso Indians) that reportedly used it as a form of “natural” birth control. According to the story, the women of this tribe would eat a fresh leaf from the untouched plant as a form of pregnancy prevention.

Eventually, this very sweet plant made its way to the United States as a “natural sugar-free sweetener” promoted as totally “safe.” But if it was being used as birth control, was this sweetener truly safe? For a plant to work as birth control, it has to affect the hormones in some form or fashion, which means that it also can affect the endocrine system.

IMPACT ON THE LIVER

As I continued to dig, the story began to take on an even more ominous tone. I learned that stevia could affect liver enzymes, an indicator of inflammation or damage to cells in the liver. Left uncorrected, elevated liver enzymes can lead to serious non-reversible liver damage and liver failure. A 2020 study in mice, titled “The hidden hazardous effects of stevia and sucralose consumption in male and female albino

mice in comparison to sucrose,” showed that stevia usage resulted in significantly elevated levels of liver function enzymes (ALT and AST), as well as urea, creatinine, cholesterol, LDL and free fatty acids, which are indicators of decreased liver function, decreased kidney function, increased risk of heart-related issues and more.¹

When I was still in the early stages of my research on stevia’s liver-damaging actions, a customer came into our newly opened health food store looking for a supplement to help reduce her liver enzymes. I could not help asking her, “Before I help you with a supplement, I have to ask: Are you consuming stevia?” She replied that she was not but that she found my question extremely interesting, as I was not the first person to have asked her. I asked who else had inquired about stevia and liver enzymes. When she told me it was her doctor, I almost fell over in shock. She explained, “My doctor has seen enough direct effects from stevia that if he has any patients who are consuming stevia and have elevated liver enzymes on their blood work, he tells them to stop consuming stevia for three weeks and then he repeats their blood work; he is not willing to prescribe anything for elevated liver enzymes until he has done this.”

At a subsequent conference attended by a well-known natural foods industry educator who was very much for stevia, I was introduced to the audience as “the naturopath who doesn’t like stevia.” Conference attendees approached me to tell me of their negative experiences with stevia. A lady who experienced elevated liver enzymes as a direct result of consuming stevia recounted that her enzyme levels had begun falling as soon as she stopped using stevia.

This feedback let me know that I was on the right track and needed to keep studying. Following over eight years of research on the dangers of stevia and xylitol (they are often used together or in alternation), I wrote my sixty-four-page book, *The Real Truth about the Dangers of Stevia and Xylitol*.² My goal in writing the book was to provide people with a written explanation to read, research and share with family and friends.

WHAT IS STEVIA?

Stevia is composed of various compounds that make up the plant’s chemistry: stevioside (5 to 10 percent), rebaudioside A (2 to 4 percent), rebaudioside C (1 to 2 percent), dulcoside A (0.5 to 1 percent) and rebaudioside B, D, E, F and steviolbioside.³⁻⁵ Steviol is a diterpene first isolated from the plant *Stevia rebaudiana*.⁶ When reading labels to avoid stevia, you have to know all of these various names, as some companies will “hide” the stevia under the name of one or more of its compounds.

The processes that companies use to create stevia blends typically

As a substance estimated to be three hundred times sweeter than sugar, stevia is not going to help someone get rid of their sweet tooth or their habit of eating sweets.

involve chemical solvents, including acetonitrile (toxic to the central nervous system), and a GMO corn derivative (sugar alcohol) called erythritol.⁷ Because the steviol glycosides often used to make stevia extracts and liquids undergo significant processing and use various solvents for extraction and purification, any claims creating the impression that steviol glycosides are “natural” are not permitted, and steviol glycosides cannot be described as a “natural sweetener.”⁸ However, the U.S. Food and Drug Administration (FDA) states that it “has not objected” to the use of “highly purified steviol glycosides obtained from stevia leaves” as sweeteners.⁹ On the other hand, crude (whole-leaf) stevia does not have generally recognized as safe (GRAS) status and is not permitted for food additive use.¹⁰

According to both U.S. and European regulators, the Approved Daily Intake (ADI) of stevia—the amount that “should” be free of side effects—is four milligrams per kilogram of body weight.^{11,12} Considering a person’s weight in pounds, that means that someone could consume the following amounts (according to FDA) without incurring side effects (where one packet is equal to one-quarter teaspoon or about four drops of liquid stevia)¹³:

- A person weighing one hundred pounds could consume up to one hundred eighty mg per day, or up to four and a half packets per day or up to eighteen drops.
- A person weighing one hundred fifty pounds could consume up to two hundred seventy mg per day, or up to six and three-quarters packets per day, or up to twenty-seven drops.
- A two-hundred-pound person could consume up to three hundred sixty mg per day, or up to nine packets per day, or up to thirty-six drops.

Just because something is allowed does not make it “safe.” Moreover, many people exceed the ADI, adding two to three dropperfuls (approximately sixty to ninety drops) of stevia to their coffee every morning; even for someone weighing two hundred pounds, this would equate to an intake two to three times

in excess of the FDA’s recommended amount. Even worse, describing the ADI as “without side effects”—as in “without immediate side effects today”—may be shortsighted because it does not look at long-term damage. The real limit may very well be zero drops!

HEALTH EFFECTS: COUNTING THE WAYS

The suspected adverse health effects of stevia are wide-ranging. First, and somewhat paradoxically, stevia products may contribute to weight gain rather than help a person lose weight. The FDA classifies steviol glycosides as a “high-intensity sweetener,” meaning a sweetener that is “many times sweeter than sugar but contribute[s] only a few to no calories when added to foods.”⁹ Think about it—as a substance estimated to be three hundred times sweeter than sugar, stevia is not going to help someone get rid of their sweet tooth or their habit of eating sweets. Instead, stevia may potentially boost the appetite, leading to more sugar cravings throughout the day.¹⁴

Daily stevia consumption is said to obstruct the body’s metabolism. As stevia slows down or stops metabolism, it interrupts the process of food’s conversion into energy. In addition to weight gain, this may also lead to outcomes such as lack of energy and even hair loss.¹⁵

Consumption of stevia may be linked to cancer. A 2017 systematic review of research on “non-nutritive sweeteners,” including stevia, reported that studies investigating stevia’s effects on cancer “are completely lacking.”¹⁶ However, laboratory research indicates that steviol is capable of causing mutations in the genetic material or DNA of cells, which could promote cancer.^{17,18} Additionally, a study published in 2023 found a causal relationship between the sugar alcohol erythritol, added to many stevia products, and liver cancer, as well as a possible relationship with heart disease.^{19,20} In mice, researchers found that stevia led to oxidative stress,¹ which is a primary building block for creating cancerous cells.²¹

A 2014 study out of Latvia suggests that stevia may have a negative effect on probiotic bacteria in the human gastrointestinal tract.²² When the researchers tested the influence of stevioside and rebaudioside A on the growth

of six different strains of *Lactobacillus reuteri*, they found that the two stevia glycosides inhibited the growth of all six strains. The authors noted that *Lactobacillus reuteri* strains “are an important natural inhabitant of the human gastrointestinal tract”; just about every probiotic dietary supplement on the market contains one or more strains from the genus *Lactobacillus*.

Research suggests that problems or complexities in reproduction are indeed a danger of stevia.²³ In female hamsters, a 1998 study reported that high doses of steviol on days six to ten of gestation “were highly toxic to both dams and fetuses” and resulted in a reduced number of offspring.²⁴ The authors’ caveat was that the high doses were considerably more “than the suggested acceptable daily intake of stevioside for humans.”

A 1999 study in rats suggested that regular, long-term stevia consumption could affect the reproductive system of males, specifically resulting in a reduced sperm count. The researcher reported:

“[C]hronic administration (60 days) of a *Stevia rebaudiana* aqueous extract produced a decrease in final weight of testis, seminal vesicle and cauda epididymidis. In addition, the fructose content of the accessory sex glands and the epididymal sperm concentration are decreased. Stevia treatment tended to decrease the plasma testosterone level, probably by a putative affinity of glycosides of extract for a certain androgen receptor, and no alteration occurred in luteinizing hormone level. These data are consistent with the possibility that Stevia extracts may decrease the fertility of male rats.”²⁵

Nutrition scientist Sarah Ballantyne has observed that steviol glycosides “are synthesized in the same pathway as, and end up being structurally very similar to” a class of plant hormones called gibberellins, which are derived from kaurene.²⁶ This means, Ballantyne points out, “that steviol glycosides have a steroid hormone structure.” Human reproductive steroid hormones include estrogen, progesterone and testosterone. Ballantyne points to evidence that

steviol glycosides have contraceptive effects in both males and females.²⁷⁻²⁹ Notably, the steviol glycoside called stevioside has been found to have “potent contraceptive properties in female rats, implying that stevia may have an impact on estrogen, progesterone, or both.”²⁷ In a study published in 2018, researchers found that “adding ‘normal’ amounts of stevia to the drinking water of obese rats worsen[ed] the animal’s ability to conceive,” with only 53 percent of the rats able to achieve pregnancy.³⁰

Stevia also has blood sugar effects. The Living Well blog quotes another blogger as follows: “Stevia is ‘sweet’ on the palate, so the body assumes it is receiving sugar and primes itself to do so. Glucose is cleared from the bloodstream, and blood sugars drop, but no real sugar/glucose is provided to the body to compensate. When this happens, adrenaline and cortisol surge to mobilize sugar from other sources (liver, muscle glycogen, protein, or body tissue) to bring blood glucose back up.”³¹

Commenting on the effects on the adrenals, Lauren Geertsens at the *Empowered Sustenance* blog writes: “The frequent release of the stress hormones (adrenaline and cortisol) in response to the stevia-induced hypoglycemia is damaging to our adrenal glands and overall health. These stress hormones are designed to be utilized when we need to be in a fight-or-flight response—not when we are eating a meal. The consequences of excess stress hormones means a suppressed immune system, increased inflammation, and lower thyroid function. . . just to name a few!”³²


Finally, individuals taking medication should be aware that stevia can interact with some medications; they should consult with their practitioner before consuming or purchasing stevia products.^{33,34}

WHY TAKE THE RISK?

In the conclusion to the 2020 study about the “hidden hazardous effects” of stevia and sucralose (aka Splenda),¹ the authors summarize that both sweeteners increase blood sugar “in spite of their lack of calories,” increase liver enzymes due to the “reshaping” of gut flora, elevate urea and creatinine levels, reduce anti-inflammatory cytokines and elevate

Research suggests that problems or complexities in reproduction are indeed a danger of stevia.

pro-inflammatory cytokine secretion. While acknowledging that sucrose (sugar) is “caloric” and has some of its own risks, they argue that “it is safer than sucralose or stevia.”

This article provides only an abbreviated overview of the research on stevia and its detrimental effects on various body systems, which I explain at greater length in my book. I feel sure that anyone who understands the risks will no longer want to consume stevia or feel safe doing so. 

Dr. Jocelin Whitaker lives in the Bellville, Ohio area with her husband and daughter on a forty-four-acre organic farm. As a one-time homeschooler, she pursued her interests in natural medicine and biblical and natural approaches to health early on. She is now a Doctor of Traditional Naturopathy (ND), Doctor of Philosophy in Natural Health (PhD), a Certified Aromatherapist (CA), Doctor of Biblical Medicine (DBM), Certified Nutritional Counselor (CNC), Holistic Health Practitioner (HHP), Certified Chaplain in Holistic Approaches (New Eden School of Natural Health and Herbal Studies), Certified Fertility Counselor (CFC) and Certified BioEnergetic Technician. In addition to her active practice seeing clients, she is the author of The Real Truth About the Dangers of Stevia and Xylitol. Dr. Jocelin and her family also own and run Whitaker's Natural Market (a health food homesteading store) in Bellville, and she and her husband Marc serve as the WAPF chapter leaders for Ohio's Knox, Richland and Morrow counties. She can be reached at www.drjocelinwhitaker.com.

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ERRATA from FALL WISE TRADITIONS

Page 78 states that David Rusk was U.S. Secretary of State 1961-1969; the correct name is Dean Rusk.
Page 74 incorrectly spelled the Vassaburg brand of cod liver oil.

SHOPPING GUIDE

Corrected Phone Number
Page 11
Larga Vista Ranch lard
719-671-2406

Wise Traditions Podcast Interviews

INTERVIEW WITH JUDITH D. SCHWARTZ

COWS SAVE THE PLANET

HILDA LABRADA GORE: Cows have gotten a bad rap in recent years. Their flatulence and burps have been cited as contributing to climate change. But what if that's not the case? What if, in fact, cows are actually helping save the planet? Judith D. Schwartz is a journalist and the author of *Cows Save the Planet—and Other Improbable Ways of Restoring Soil to Heal the Earth*. She explains how cattle and other ruminants are changing the soil for the better, provides details on soil's micro and macro diversity (including "megafauna" such as earthworms) and reminds us that the very minerals we seek for our own health are found in the soil. Judith, how did you come up with the title of your book?

JUDITH SCHWARTZ: As often happens, the title came upon me. I was actually writing a book about soil. This was a decade ago, when people weren't talking about soil. Writing a book about soil back at that time was lonely. It was me, my books and my sources. I thought, "Soil is amazing." No one else was talking about it. I thought, "I can't call my book *Soil Is Important. You Should Care About It and I Will Tell You Why*." I didn't think that was going to make me many friends. One day, my son had a bunch of books on the floor. I bent down to pick one up. I saw that it was a book by Gary Larson (of *Far Side* fame) called *Cows of Our Planet*, and it showed a ring of cows like the shape of the globe. I thought, "Cows of our planet. *Cows Save the Planet*." That's how it happened. From then on, it wouldn't let me go.

HG: Do you still think it's true that cows save the planet?

JS: I do, but at this point, I would add an asterisk to that. I would say cows save the planet, but not just cows—all other animals, wildlife, plants and living things. Because the more I explore, report and research, the more I think

that biodiversity is the key to life on Earth. Life creates life. Life begets life. Thinking of animals is interesting—because it's that notion of a four-legged thing that moves that gets people to say, "What? Cows save the planet?"—and it opens things up for people to recognize the extent to which animals create our landscapes. We think about cows and other animals being in the landscape; we think that you have this landscape, and the animals happen to be there, but no, the landscape wouldn't be what it is were it not for the wildlife. Now we have livestock, but it was their wild antecedents that created landscapes such as the great plains of the U.S., the savannas of Africa and the grasslands of the world. If we look at forests, we look at other wildlife that created those conditions.

HG: Say more about that. What do you mean that they "created" those landscapes?

JS: One thing I have come to learn is that nature, species and collections of species create the conditions under which they thrive. Let's think about ruminant animals. We have cows now, but in the past and in wild lands, we had all kinds of antelope and buffalo, and in Africa, wildebeest. These creatures were running across the landscape. They created the grasslands. They built the deep-rooted grasses, the rich soil that goes down meters. The roots of the grasses could go down several meters deep, which means that the soils were that deep. That perpetuated the conditions under which these animals thrived. Those ecosystems were created by the behavior and the digestive habits of ruminant animals. I can go into more detail about that.

HG: It reminds me of what Joel Salatin says, "Cattle move, mob and mow." They, and wildlife, are doing all these things. They are not only using the land but also fertilizing it and making it richer.



Hilda Labrada Gore is the producer and host of WAPF's Wise Traditions podcast and a Washington, DC WAPF co-chapter leader. An ancestral health advocate, Hilda is a certified health coach who travels the world (Mongolia, Peru, Ethiopia, Ecuador, Kenya, Australia, etc.) exploring and lifting up traditional health practices. She shares the best of what she has gleaned on her Holistic Hilda YouTube channel, on Instagram (@holistichilda) and at conferences and retreats. Hilda has energy to spare because she keeps her feet on the ground and her face to the sun.

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Nature works
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disturbance.

JS: They do many things at once. To a large extent, that behavior has to do with their response to predators. The way that I have articulated this is that in nature, plants are managed by plant-eating animals. Those plant-eating animals are managed by predators. These animals are moving. They are not just saying, “There’s a wolf. I think I’m going to get out of the way.” Rather, they see a wolf, they bunch up and flee en masse. That behavior has a lot of implications.

They are trampling seeds into the soil so that a diversity of grasses has a chance to germinate. They are pressing in plant matter—decaying plant matter—so it can be broken down by microbial life and incorporated into the soil. That’s the building of the soil. Their hoofs make imprints, their dung adds nutrients and their urine adds moisture. All of this is happening when they flee very rapidly and intensely.

You might look at a landscape after a herd of antelope has been chased away by a lion. It might look rugged, and everything looks messy. What’s happening is that those actions are kickstarting many ecological processes. In our culture, we think that a tame landscape or vista is healthy and desirable, but no. Nature works in action and disturbance. That’s how all of these processes happen—the cycling of moisture, carbon, nutrients, energy and even information doesn’t happen by having a bunch of animals standing there looking pretty.

HG: It’s not about a bucolic vista where we see the cattle on the hillside. It can be more chaotic than that. What came to mind when you were speaking is forest fires. For years, we have been saying, “Let there never be a fire in this area.” Eventually, nature takes care of itself and presents the right conditions for fires to occur, but maybe there is a reason. Even though to our eyes it seems like it’s ravaging a landscape, it may be a necessary process of pruning. There can be growth in the future.

JS: I agree with you halfway, and I will explain why. There are landscapes that co-evolved with fire. Consider a tree like the eucalyptus tree. Remember I said that species in nature create the conditions under which they thrive? Eucalyptus trees need fire in order to break open their seed

pods and for those plants to germinate. In turn, that tree will create the conditions for fire. However, in many environments, fire is a rare thing. In grasslands, you get occasional fires from lightning. What happens is that you get a burn that stimulates certain ecological processes, but it is contained because, in a healthy landscape, you will have a lot of moisture so the fire will not get out of control.

A way that Allan Savory has talked about this is that we know that vegetation needs to be managed. The nutrients in vegetation and biomass need to be cycled. That can be done biochemically through fire. The vegetation burns, and you get ash. That creates the conditions for pioneer species to grow, and you get that cycle happening again and again, or that cycling can occur through biology. That is through the guts or the digestive processes of animals. I would say that now we are out of balance, in that we have much more vegetation being cycled biochemically, whereas our landscapes, health, well-being and biodiversity would be better served if the balance were shifted toward biological cycling.

HG: I want to go back to the animals. We blame cattle for climate change. If they used to run wild, mob, move and mow, maybe that was part of the secret. Now we are out of balance because we are keeping them locked up in confined animal feeding operations (CAFOs). Is that why people are blaming them for climate change—because in those conditions it’s not ripe for enriching the soil or their health or our health?

JS: Yes. When you confine animals, you have taken away the processes that you see in a more spread-out scenario. Ordinarily, you would have resources; the animals would create and give waste, which would be a resource for nature. Everything from the dung beetles, which would bury the dung to the microbial life. These processes build the soil and create the conditions for all kinds of soil life to thrive, enhancing the conditions for a diversity of vegetation to grow. It’s taking what could be a resource and turning it into a pollutant. Those conditions are not good for anybody. It becomes a problem. It’s understandable that people respond and say,

“This isn’t good.” However, going that step further and saying “Cows are bad” is a leap that doesn’t quite make sense. People want to blame something but blaming cattle for our many ecological problems is a symptom of our collective disconnection from the land, because when people are in ongoing relation to the land, then they are observing how animals are affecting the landscape. The more we observe, the more we understand, and the more insights we have to better manage our landscapes.

I want to bring up the fire question, which put me in mind of another animal that often gets blamed for problems. I’m talking about donkeys in Australia. In Australia, donkeys were brought in as pack animals. When the people who arrived from the West were developing the Outback, they had lots of donkeys carrying things. The donkeys helped people as they were homesteading. Then, mechanized transport became available, and people didn’t need the donkeys anymore. They let them go. Many people know that among the many attributes of donkeys is that they live a long time, upwards of forty years. We had all these donkeys running around the Outback creating bands and family groups. That’s the situation in many of the rural areas in Australia, such as Western Australia, which is a vast province and state. They said, “There are all these donkeys. Donkeys aren’t like kangaroos, bandicoots or any of these other animals. They are not native. They are causing problems. They are running around and knocking over people’s fences. We must get rid of them.” That was the narrative about donkeys—that they had to get rid of them.

But a farmer named Chris Hagler thought differently; I have interviewed him extensively. He and his family manage an area of land the size of Singapore, the size of the five boroughs of New York. It’s huge. Their goal or the purpose of their outfit is to restore the landscape. That’s it. They were using cattle in all the right ways, using holistic management and holistic plan grazing, and they were making tremendous progress. They were restoring the land. The main challenge they had was fire.

Kimberley in Western Australia is a very rough and rugged area. There’s fire all the time. At any moment in Kimberley, some area is burning. They were using cattle to control the vegetation, bring moisture and nutrients, add carbon to the soil and things that minimize the intensity and frequency of fire. Then these donkeys showed up and Chris said, “That’s interesting. The donkeys go where the cattle won’t go. They can be part of our fire crew.” His father found ways of using helicopters to herd the donkeys. This was all fabulous except for one thing. The government had already decided the donkeys were pests. This has been going on for years. The donkeys get a reprieve, and then the government says, “We forgot about your donkeys. We want you to get rid of them.” “Wait a second. We are making great progress, and we have had fewer fires, and the fires have been less intense.” This continues.

A little bit more about the donkeys, because this is relevant to this whole question of animals. Scientists have been researching, and they are finding out yet more about how donkeys help that landscape. First of all, they dig wells, and

Blaming cattle for our many ecological problems is a symptom of our collective disconnection from the land.

OUR WISE TRADITIONS PODCAST 2024 NEW YEAR’S RESOLUTIONS

1. We embrace and promote Wise Traditions dietary principles.
2. We host guests who might differ with us on some issues from time to time, but still have valuable information to share with our community.
3. We offer thought-provoking insights on a variety of topics.
4. We will continue to do our best to put out content that informs, inspires and encourages you to live your healthiest life when it comes to food, farming and the healing arts.

These aren’t so much resolutions, actually, as they are commitments to the mission of the Weston A. Price Foundation and to you, the member and listener.

If you have feedback on the podcast, guests you’d like to hear or insights you want to share with us, please email us at info@westonaprice.org and put “podcast” in the subject line. We’re here for you. And we’re all ears.

One way to think about undergrazing is that it's a suboptimal disturbance, or it doesn't have enough animal impact.

in digging wells they get water for themselves, but also for other wildlife. The way that they move their hoofs, they kick up the dirt and they move the leaves around, which creates favorable conditions for many of the small marsupials that have been struggling. Then there's this wonderful scientist named Arian Wallach who talks about invisible megafauna and was involved in donkey research in Australia. Because the donkeys aren't native, most scientists are not paying attention to how the donkeys' behavior has an impact on the land. Many of these species are looked upon as if they don't belong, but they are performing ecological functions that have not been accomplished for thousands of years since the end of the Late Pleistocene in Australia when they lost their megafauna.

HG: Tell us a little bit about undergrazing or resting the land too much. Can you address that?

JS: I have been to Zimbabwe. I spent eight days with biologist Allan Savory (known for developing the Holistic Management model for livestock in which animals' actions and behavior promote ecological restoration) and Jody, his wife. I could see that the land was wonderful. Allan is a master tracker. He can read the landscape like no one else I have ever seen. That was wonderful because I could see from many angles evidence of the improvement of the land thanks to managed grazing. An example was the extent of flooding. He took us to the parkland where you could see from the debris that was up on branches, the floodwaters were several meters high in the rainy season because it wasn't being held on the land; whereas at Dimbangombe at the Africa Centre for Holistic Management, the debris was only up to our knees. When someone can show you this and you understand in a visceral way, it stays with you. I remember he turned to the jeep that we were using and said, "On parkland, the water would have been higher than this vehicle." I have also had several opportunities to go to other game parks in southern Africa because my husband is from South Africa.

The more I learned, the more I could see the suffering of the land. That includes undergrazing. One way to think about undergrazing is that it's a suboptimal disturbance, or it doesn't

have enough animal impact. All the ways that the actions of the animals can enhance the landscape—by cycling moisture, nutrients, carbon and energy—when there's not enough animal impact, then it's much more stagnant. You do not get that cycling. One result is that the vegetation doesn't get pressed into and become incorporated into the soil. That in itself is huge because then you have decaying and drying out plant matter sitting on top of the ground. That has several consequences. It's blocking the sun from any new vegetation that's trying to grow. It's also dried out. If there's a fire, it's going into flames. It's keeping everything stagnant, so important cycling doesn't occur.

Then the soil beneath gets dried out. When the soil gets dried out, then you start losing the life in the soil. As that plant matter decays, it is also throwing carbon up into the atmosphere because it's getting broken down again, like Allan says, biochemically. It's oxidizing. Fire is one form of oxidation, and the breaking down of biomass without it being incorporated into life forms is another.

HG: You mentioned water and how the soil is rich on Allan's property and that it can retain the water. When soil is undisturbed, I imagine you would get a lot of runoff because the soil can't hold the water.

JS: You are losing more soil and then you get bare soil. Bare soil absorbs heat. When you have plants on soil, those plants are cycling moisture. They are transpiring, and that's a cooling mechanism, whereas when you have solar energy and sunlight beaming down on bare soil, it heats up. Above a certain temperature—something like one hundred degrees Fahrenheit, which is not that hard for bare soil to get to—you start losing microbes. Microorganisms start dying. What I'm describing is the process of desertification.

HG: The less healthy the soil is, the less healthy we are as a planet. If we try to grow crops on that degenerated soil, they're not going to have the same nutritional value because there's less organic matter in the soil.

JS: What often happens is, to make up for the

lack of life in the soil, that processing is outsourced. We outsource those processes to chemicals. We are pumping chemicals into the soil to try to get something that looks like a crop. Many crop seeds are engineered to be able to grow in spite of those conditions, as with Roundup crops that are designed to withstand the onslaught of those chemicals.

HG: Years ago (and they are probably still doing it), people noticed poor conditions in some of the slaughterhouses—feces were getting mixed into the ground beef. Instead of cleaning up the slaughterhouses, they started irradiating the meat to get rid of the effect of the feces! When you talk about chemical input, it's like we are detached from nature. We have messed this up, so let's add this poison on top of it. We are making a continual stacked-up mess.

JS: I remember a revelation I had when I was researching *Cows Save the Planet*. I was talking to a farmer who made the observation that the nutrients—magnesium, calcium and all the minerals that are in his children's multivitamins—are what's in the soil. When we test our soil to see whether it's in good condition to give us healthy crops, it's interesting to think about the parallels between the body of the Earth and our physical bodies.

HG: You mentioned carbon, and I think we need to sequester more carbon again because we are disconnected from nature. Regenerative farming does exactly that. What are we talking about here, and what are other ways to sequester carbon that could benefit the planet?

JS: That's where I came into the whole topic of soil. It was pointed out that over time, more carbon has gone into the atmosphere from disturbing and mistreating the soil compared to the burning of fossil fuels. Over time, that has been a huge source of carbon in the atmosphere, and it still is. At first, I was thinking more in a linear sense like, "Let's get carbon in the soil." I started to explore how that was done. As time has gone on, I see that the drawing down of carbon into the soil needn't be the goal in and of itself as much as it is a byproduct of working in harmony with nature, because that is what nature does. I fear sometimes that if carbon sequestration is looked at as a goal in and of itself, then sometimes we end up missing some of the other aspects of good regenerative farming approaches such as managing biodiversity.

HG: It reminds me of when we teach children to do well on the test. They may get an "A," but did they absorb the information, learn other skills about teamwork and curiosity? If we are focused on one goal only, we might be missing other things in the process.

JS: Sometimes, with the goal of a healthy Earth, we get caught up in "getting an A" on the test of sequestering carbon. The extreme version of that is to bury carbon, to put it all in a box underground. Whereas if you look at the whole system, you want that carbon in life forms. We want more life, and carbon is the embodiment of that life.

HG: You say in the subtitle of *Cows Save the Planet* that it's an "improbable" way to heal the soil and the planet and that there are other "improbable" ways. What are some of the improbable ways to heal the soil and the planet?

JS: It's a funny question because it doesn't feel improbable anymore; that reflected my sense of awe and surprise at how central soil is to getting back in balance with nature. I was still in a state of awe. An example is biodiversity. It was such a surprise to realize that biodiversity starts in the soil. Back then, "biodiversity" would have meant that we need to have polar bears, penguins and a variety of animals. We do, but we create the conditions for enhanced biodiversity by beginning in the soil and recognizing that 95 percent of land-based biodiversity is in the soil. There are species there we don't even know, that haven't even been identified.

We keep learning more, and much of what we are learning now is also about the fungal life in the soil and how central that is to sequestering carbon. It's not just that one function of seques-



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We create the conditions for enhanced biodiversity by beginning in the soil and recognizing that 95 percent of land-based biodiversity is in the soil.

tering carbon, but rather what that means. It's not an end in itself, but mycorrhizal fungi, the root-centered fungal networks, are moving that carbon around to serve all the plants and life in the soil. I remember being awed by the biodiversity in the soil and noticing how soil scientists talk about "soil megafauna." That amused me to think of an earthworm as megafauna from the standpoint of the soil. When talking about these tiny creatures, an earthworm might look like an elephant to a microbe.

HG: You suggest that healing the soil can address much more than what we perceive as "climate change." What are some of the other tough issues that can be affected by regenerating the soil?


JS: You mentioned our health. Because the food that we eat can only be as healthful as the soil

in which it has grown; then the animals that we consume can only be as healthy as the soil that has nourished them through the grasses that the animals eat. Good health starts in the soil.

HG: To get specific, let's say a chicken eats the earthworm and the earthworm ate some microbe. Let's say that the first microbe wasn't in the best situation because we have added all these chemicals. That little microbe isn't that great. The earthworm isn't feeling that great because it ate that, then the chicken eats the earthworm, then we eat the chicken. It's going to have a ripple effect on us.

JS: The way that it would play out is that the chemicals would throw off the balance of microbial life in the soil. For example, for certain microbes, you might have overgrowth, and then for other microbes, you might have fewer of them. You might have fewer earthworms surviving, or maybe the bugs that the chickens eat would be less healthy; or, whereas the chickens are used to having a balanced diet of bugs, they might have only one bug.

HG: As we wrap up, I like to ask guests if people could do only one thing to improve their health, what would you recommend?

JS: Be in tune with your body, with what your body needs. So much in our food system is hijacking our sense of taste and energy that it leads us to crave fast energy rather than more sustaining energy. Also, pay attention to your body in the landscape; spend time outdoors in nature in a way where you are paying attention to where you are and giving yourself a chance to feel at home there. That, in itself, enhances not only my sense of well-being but my clarity about what I need. We are creatures of the land and we evolved in the context of our landscapes. Often, we forget that, because we are inside or we are rushed. We have so much to learn and benefit from by paying attention to our surroundings and allowing ourselves to find a home there. 

This was Wise Traditions Podcast episode 440 (September 25, 2023).

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All Thumbs Book Reviews

Alchemy of Herbs: Transform Everyday Ingredients into Foods & Remedies that Heal
By Rosalee de la Forêt
Hay House Inc.

Have you ever owned a book that gave you a thrill on every page? This new beauty by Rosalee de la Forêt will do just that. A passionate teacher of herbal medicine (she is the Education Director at LearningHerbs.com), de la Forêt has earned a place as a leader in a new generation of botanical medicine practitioners and mentors. Using plants as medicine—a no-brainer to humankind for thousands of years in cultures all over the globe—is now making a popular comeback after being sidelined in the twentieth century by synthetic pharmaceuticals. The fact that Hay House published this book and internationally known herbalist Rosemary Gladstar wrote the foreword tells you that there is a big audience for this topic and that this book is worthy of your attention.

There are plenty of great books on herbalism and botanical medicine. I own several (warning: this topic can be addictive), but this one really shines. For the person just getting used to the idea of using plants for wellness, the tantalizing pictures and inviting but non-intimidating recipes are enough to get you hooked. Even if you feel comfortable in this realm and have made a salve or two, there are still plenty of interesting and useful facts to keep the experienced herbalist turning the pages.

From ashwagandha to garlic to rosemary to nutmeg, each chapter is an ode to the myriad special properties of each herb and spice. De la Forêt is a proponent of the concept of energetics, which is more of an art than a science (but if you want the science, the endnotes list dozens of studies). The book catalogs twenty-eight edible products into the five main tastes: pungent, sweet, salty, sour and bitter. Each is explored

through a well-written background and an introduction to the ingredient's medicinal properties and energetics, followed by several recipes for spice-filled foods and beverages as well as topical products such as salves and bath soaks.

De la Forêt does not simply rehash information you can find in a quick Internet search. She has hands-on knowledge and loves each item she showcases for particular reasons. Her suggested usages are helpful; for example, some herbs need to be taken in large quantities to be considered medicinal or are best taken in certain formats (teas versus tinctures).

A quiz helps the reader determine their fundamental constitutional energetics. This is useful when matching an herb or spice with an individual, as well-practiced traditional herbalists do. It can also be important to keep this concept in mind when self-treating an ailment such as a cold, which can vary in its energetics. One sickness may make you feel damp and cold, another dry and hot; in one instance, lavender could do the trick, while at other times, ginger or mustard may be needed. But really, it is best not to overthink this—using herbals is supposed to be fun, and they are supposed to taste good.

In our variegated world full of different colors, tastes, smells and “energies,” one could spend a lifetime getting to know each plant at an intimate level; that’s just what this book invites you to do. “Alchemy” is a term meaning a near magical process of creation or transformation—if you have experienced plants in this way, either as powerful (but still gentle) medicine, or just as a delight to your senses, you get why this is the perfect word. Healing foods are full of flavor, never boring, always nourishing and sometimes revelatory. This book can be your guide on the adventure of discovering those earthly delights for yourself. Two thumbs up. (Learn more at AlchemyofHerbs.com/Apothecary.)

Review by Jennifer Grafiada, NTP



One could spend a lifetime getting to know each plant at an intimate level; that’s just what this book invites you to do.

All Thumbs Book Reviews



***The Dark Side of Prenatal Ultrasound
and the Dangers of Non-Ionizing Radiation***
By Jeanice Barcelo
Createspace Independent Publishing

If you are looking for a well-researched and extremely detailed book regarding the negative effects of ultrasound as well as non-ionizing radiation, I doubt you will find a more thorough option than this one by Jeanice Barcelo. It's difficult to find the truth about the dangers of prenatal ultrasound; Barcelo has done all the work for you and provides an invaluable resource that all mothers should read. In her introduction, Barcelo admits that what started as an attempt to write one chapter regarding ultrasound led her down a rabbit hole. Fortunately, she gives readers the opportunity to travel down the rabbit hole with her.

Barcelo introduces and explains the multiple ways prenatal ultrasound can harm children. Ultrasound is radiation. Cellular damage, mitochondrial disruption, genetic mutations, chromosomal aberrations—these are just a few of the negative consequences discussed in the book. Does the baby hear the ultrasound? Does he or she experience a stressful response to it? Does it cause preterm labor, low birth weight or premature birth? Barcelo answers all of those questions, confirming these and other negative effects as the possible result of ultrasound based on the numerous studies that she cites. She even provides accounts of various mothers' alarming prenatal ultrasound experiences as well as the account of a young child who remembers what it was like to receive an ultrasound while in the womb.

For those of us who need and appreciate visual proof, Barcelo includes images in Chapter Four of normal cells and cells after exposure to ultrasounds. One can see that after the ultrasound exposure, the cells become a tangled mess and move in a “frenetic and distorted” manner, whereas beforehand, the cells had “smooth

edges” and were “moving in a clear direction.”

Although most of the book addresses the history, implementation and negative impacts of fetal ultrasound, it also dives into 5G, dirty electricity, microwave illness, solar energy, smart meters and airport scanners. I found Barcelo's summary of EMF expert Dr. Martin Pall's work particularly interesting in Chapter Nine, titled “Is Non-Ionizing Radiation Safe?” Pall confirms the fact that cell phones and other pulsing wireless devices significantly interfere with calcium signaling and can produce various neuropsychiatric problems. This is just the tip of the iceberg, however; Barcelo spends the rest of the chapter detailing exactly what is occurring in our bodies, as well as in our developing children's brains and bodies, when exposed to non-ionizing radiation. Leaving no stone unturned, she provides readers with a plethora of studies, statistics and summaries of events.

Of course, one of the many questions that arise after reading this book is, “Why is so much of this information being buried?” This is not a pleasant topic or easy book to read. One reads it to discover what is happening to our children and why. It's a book for those looking to understand our children's early exposures (both in utero and after birth), learn where and how children are receiving damaging exposure to radiation and see the detrimental effects it has on their brains and bodies. The wealth of information contained in the book may be upsetting, but it is information that is necessary for all mothers (as well as fathers, doctors and midwives) to read.

The Dark Side of Prenatal Ultrasound will be of great interest to WAPFers who question the medical establishment, yearn to be independent of the medical system and trust mothers' innate ability to grow and give birth to a healthy baby. I will definitely be adding the book to my bookshelf. A big thumbs up!

Review by Anya Adams

After the ultrasound exposure, the cells become a tangled mess and move in a “frenetic and distorted” manner.

All Thumbs Book Reviews

***Dancing with the Rhythms of Life:
A Holistic Doctor's Guide for Women***
By Marianne Rothschild, MD
Gaia Healing

The magical power of a good book is that it can distill a lifetime of another's hard-earned wisdom into something you can possess in your hand. In *Dancing with the Rhythms of Life*, Dr. Marianne Rothschild attempts to offer her readers all of the knowledge she has accumulated over four decades steeped in natural healing.

Her incipient affinity for the world of holistic medicine was spurred, as it is for so many of us, by a negative experience with allopathic medicine. As a young mother, she gave her cranky toddler an antibiotic that caused a scary adverse reaction. Thus, her long excursion began. She practiced midwifery in California in the 1970s until a brush with the law convinced her to take another path. She then completed seven years of conventional medical training, feeling like “a wolf in sheep's clothing” and keeping her love for natural medicine a secret. After moving to Maryland and working at a primary practice affiliated with Johns Hopkins, she transitioned to a home-based private practice. Finally, she could serve her patients the way she wanted, with deep heart-to-heart conversations that could easily take up a whole afternoon.

One senses her capacity for a multi-layered approach to the healing arts through this wide-ranging book, different from the dry, clinical tomes on the typical doctor's shelf. Much of the information is conveyed through Rothschild's retelling of interactions with patients; presumably, she knows that readers may identify with many of the stories. Rothschild clearly possesses not just rote book knowledge but a desire to truly know the patient, down to her inner heart's core.

The book exudes a beautifully feminine quality. Rothschild understands that there are health concerns unique to women that Western medicine does not correctly diagnose or, in

many cases, even acknowledge. She knows that women go through ebbs and flows, currents, tides and seasons—like most of the natural world. The antithesis of “take two pills and call me in the morning,” the book treats each patient as a glorious, intricate being, whose root issue might go deep (e.g., a trauma at age four). She asserts that emotions are trapped energy in the body's collagen fibers, manifesting as physical ailments later in life.

It is uncommon to find a conventionally trained doctor who espouses such concepts, listens so completely and has such a command of protocols under her purview. Not all of us can journey to her rural office, but we can take advantage of what she has compiled, ranging from the specific (such as dealing with food allergies) to the metaphysical (why profound grief can be transformative). The table of contents helpfully guides readers to specific issues like mood disorders, adrenal fatigue or gallbladder flare-ups. At the same time, because Rothschild covers such a broad range of potential concerns—from puberty to menopause and beyond—it is difficult for her to go very deep on each one. And while there is mention of critical facts such as the importance of salt and good saturated fats, readers will not find recipes or in-depth dietary protocols.

Some sections would be equally at home in the self-help genre as in the health genre. There are essays on grief, trauma, depression, sexuality, aging and death. The book also introduces five core rhythms of life (the day, the seasons, the moon cycle, creation and destruction, and reciprocity and generosity). This book might inspire the modern woman to step away from a fast-paced, technology-saturated, superficial and materialistic day-to-day world, and sit with a cup of herbal tea, soak up some of Rothschild's wisdom, get in touch with her intuition and gain appreciation for herself and the breathtakingly intricate world she inhabits. Two thumbs up!

Review by Jennifer Grafiada, NTP



Rothschild understands the fact that there are health concerns unique to women that Western medicine does not correctly diagnose or, in many cases, even acknowledge.

All Thumbs Book Reviews



Vax-Unvax: Let the Science Speak

By Robert F. Kennedy Jr. and
Brian Hooker, PhD
Skyhorse Publishing

Vax-Unvax, published by Skyhorse Publishing under the Children's Health Defense imprint, represents Robert F. Kennedy, Jr.'s and Dr. Brian Hooker's effort to pull together in a single volume over one hundred "mostly unintended" vax-unvax studies reported in the peer-reviewed literature. Officials tell the public that such studies don't exist, but as Kennedy and Hooker point out, important comparisons between vaccinated and unvaccinated groups have sometimes been "nested" within broader research. Kennedy has been posting effective slides summarizing this information on the CHD website since mid-2019 (childrenshealthdefense.org/wp-content/uploads/Vaxxed-Unvaxxed-Parts-I-XII.pdf), and those slides are now the stars of this book. In this instance, in fact, Kennedy—an avid lifelong reader—tells people that with this book they can learn what they need to know by "just looking at the pictures."

Pharmaceutical companies and public health officials want you to believe that vaccine injuries are "one in a million"—so rare that we shouldn't create unnecessary fear by shedding light on their occurrence. However, the famous Lazarus study from 2010, "Electronic Support for Public Health—Vaccine Adverse Event Reporting System" contradicted the "one in a million" narrative over a decade ago, identifying adverse reactions for one in every thirty-eight vaccine doses administered (2.6 percent) and noting that fewer than 1 percent of adverse events are ever reported. These unfavorable outcomes prompted the Department of Health and Human Services (the study's funder) to pull the plug on the initiative.

The first chapter poses the question of why public health officials have never sponsored rigorous studies comparing vaccinated-unvac-

inated outcomes such as autism. Kennedy and Hooker quote the response of vaccine inventor and front man Dr. Paul Offit, director of the Vaccine Education Center at Children's Hospital of Philadelphia. Responding that "It is highly unethical to do a study like that," Offit claimed that would-be participants in the unvaccinated group would be "frankly condemned. . . to develop diseases which can permanently harm them and/or kill them." As Kennedy and Hooker comment, "The fact that vaccine proponents apply this flawed rationale to vaccines alone and not other medicine suggests an agenda not rooted in science or logic."

In a chapter on health outcomes associated with the childhood vaccine schedule, several charts summarize the results of a pilot study that compared the health of vaccinated and unvaccinated six- to twelve-year-olds. The study showed a horrifically increased risk of conditions such as allergic rhinitis, allergy, ADHD, autism, eczema, learning disabilities, and neurodevelopmental disorders among vaccinated children, as well as higher rates of pneumonia and ear infections. Another study confirmed that vaccinated kids face a greater odds of developing asthma, severe allergies, ear infections, gastrointestinal disorders and developmental delays. A third study, which documented illness episodes over the first five years of life, found that vaccinated children experienced more sickness (very high fever, ear and throat infections, convulsions), more "aggressive behavior events" and more hospital admissions and antibiotic use. Shockingly, these studies indicate that post-vaccination ailments follow children through life and show a dose-response relationship—the more vaccines someone receives, the more health problems they are likely to develop.

In Chapter Four, the authors discuss the "CDC Secret Data"—the CDC's never-published finding that boys, and especially African-American boys, had a much greater odds of an

(continued on page 57)

Kennedy—
an avid
lifelong
reader—tells
people that
with this
book they
can learn
what they
need to
know by "just
looking at the
pictures."

All Thumbs Book Reviews

Year of No Garbage: Recycling Lies, Plastic Problems, and One Woman's Trashy Journey to Zero Waste

By Eve O. Schaub
Skyhorse Publishing

Can mankind live without garbage? One woman, Eve O. Schaub, set out to find out and learned a lot along the way. If we can't live without garbage, can we at least cut back? Yes, we can. One obvious point is to ask yourself, when you buy something, whether you really need the item or is it just destined to become garbage? In those cases where you really do need it, what kind of packaging is wrapped around it? Are there better options? Unless you are a pathological pack rat, most of that packaging is of no use to you.

So, what can be recycled? The whole recycling question takes us down quite the rabbit hole. Things like glass, metal and paper products can be recycled. Food scraps can be composted. Many experts have specific recommendations about which food scraps can be composted and which cannot or should not be. My wife and I compost all food scraps and that seems to work. Apparently, Chinese who recycle do the same. I'm sure there are experts doing nuclear facepalms right now, but they'll get over it.

One thing almost everyone needs to buy is food. However, many products, especially

food, come encased in plastic. Since the invention of plastic, we have generated an enormous amount of it. Before the introduction to *Year of No Garbage*, Schaub provides a page titled "Ten Statistics to Be Horrified By." Number six says we have produced eight billion metric tons of plastic in our history. It also says that is the equivalent of one hundred times the mass of the moon. That comparison set off some alarm bells in the back of my head, and the nerd in me just had to check.

Schaub gives a source for the size of the moon, and the cited source gives the moon mass as 7.3477×10^{22} Kgs or 73.5 million metric tons. My alarm bells were still going off, so I checked four other sources: NASA, Wikipedia, space.com and Britannica. They all agree that the mass of the moon is really 7.3477×10^{22} Kgs (10 to the 22nd power, not 1022). In other words, the superscript got lost. That may not visually look like a big difference, but mathematically, we are talking about a difference of 10 to the 18th power. If I haven't slipped any decimal places (which is very possible), the name for that number is one quintillion, or one metric crapload (MCL). Another alternative term would be abbreviated as MSL, but let's move on. The bottom line is, at current rates, we are thousands of years away from producing a wad of plastic that rivals the size of the moon. Many of you are probably in

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Then we learn that many paper products are not really entirely paper.

(continued from page 56)

autism diagnosis following MMR vaccination administered prior to thirty-six months of age (2.4 times greater in the African-American group), compared to boys who got the MMR after age three. Instead of publishing these data, the CDC hid the statistically significant finding by removing some African American boys from the study. Other charts in the same chapter show more inflammatory bowel issues (such as Crohn's and ulcerative colitis) in measles vaccine recipients, as well as an increased incidence of type 1 diabetes among those fully vaccinated

against polio.

Vax-Unvax does not limit its focus to childhood vaccines, but also includes chapters such as "Vaccines and Gulf War Illness" and "Vaccines in Pregnancy," as well as an alarming chapter on the Covid shots (featuring numerous charts on cardiac adverse events).

The studies included in *Vax-Unvax* clearly demonstrate that vaccines cause damage, and we must be grateful to Kennedy and Hooker for uniting them all in one place. What a contribution! This book would make the perfect gift for a mother-in-law (or a daughter-in-law) who doesn't understand vaccine risks. Even though it refers to a lot of statistics, it's easy to read and understand. It should also be on the shelf of every health care practitioner, ready to hand out to people in need. Thumbs up!

Review by Becky Plotner

All Thumbs Book Reviews

(continued from page 57)

a math coma by now, but I thought this was an interesting exercise in how information can get boogered up. I don't really blame Schaub, who correctly quoted her source—but the source was wrong. Nevertheless, the basic and correct point is that we have produced a lot of plastic.

Can we recycle it? Sigh; the short answer is no. But you've been told by your recycling companies that they can recycle number one and two plastic, and so on. Well, there is a lot of fine print behind all that. If you think they can insert a number two plastic container into a machine, and a new, usable piece of plastic magically comes out the other end. . . um, no. Not without inserting some new plastic into the process—and that process works one time at best, and then you are done. That plastic cannot be recycled again. Plastic does not completely break down (unless you consider microplastics broken down); current recycling simply delays the final outcome.

Then we learn that many paper products are not really entirely paper. They have been sneaking plastic into things like, for example, toilet paper. As we have learned, even if that plastic is number two, it doesn't really recycle. You can order toilet paper that doesn't have that problem but, depending on where you are, it may be shipped thousands of miles. The environmental

impact of the shipping makes the benefit of that enterprise dubious at best.

This brings us to TP alternatives like the bidet. Schaub invested in a top-of-the-line Biobidet, which fits on your commode in place of the original seat. It came with heated seat, heated water and multiple settings for all those features. The water stream can be low, medium or who needs an enema? It even comes with a remote. Her model included an automatic lid opening feature she found slightly creepy. I can tell you from personal experience that the lid weighs almost nothing and making it automatic betrays a level of laziness that boggles the mind. Any culture that values this option is really circling the drain.

Schaub learned that if she even sneezes too loud in the next room, the lid will open. This bidet, of course, is made of plastic, but at least it is not a single-use, throwaway item. My wife decided years ago that we needed a bidet, and so we have a Biobidet also, but not with the "potty poltergeist" option. I wasn't sure I would make friends with this thing at first, but in hindsight, I have come to like it. By the way, if you can correctly count the number of puns in this review, you may win a prize. To collect, just call 1-800-FOOLED-U.

Both Schaub and I have learned that no matter how many MCLs that bidet blasts out of your butt, you may still need some toilet paper in the end. So, bottom line, can the normal domestic American go for one year without leaving any garbage behind? The short answer again is no. As Schaub puts it, quitting garbage is like quitting alcohol when you're trapped in a bar. After removing the garbage can from the kitchen for one year, her household was forced to return what they sometimes refer to as the "bin of shame." That may not sound like the happiest ending, but the book is written in a very entertaining style and the thumb is UP.

Review by Tim Boyd

BOOK REVIEWS IN *Wise Traditions*

The Weston A. Price Foundation receives two or three books *per week*, all of course seeking a Thumbs Up review. What are the criteria we use for choosing a book to review, and for giving a Thumbs Up?

- First and foremost, we are looking for books that add to the WAPF message. Dietary advice should incorporate the WAPF guidelines while adding new insights, new discoveries and new therapies.
- We are especially interested in books on the fat-soluble vitamins, traditional food preparation methods and healing protocols based on the WAPF dietary principles.
- We look for consistency. If you talk about toxins in vaccines in one part of your book but say you are not against vaccines in another part of your book, or praise fat in your text but include recipes featuring lean meat, we are unlikely to review it.
- We do not like to give Thumbs Down reviews. If we do not agree with the major tenets expounded in a book sent to us, we will just not review it. However, we feel that we have an obligation to point out the problems in influential or bestselling books that peddle misinformation, and for these we will give a negative review. We also will give a negative review to any book that misrepresents the findings of Weston A. Price.
- If you want us to review your book, please do not send it as an email attachment. Have the courtesy to send us a hard copy book or a printout of your ebook or manuscript in a notebook or coil binding.

All Thumbs Book Reviews

The Nourishing Asian Kitchen

Sophia Nguyen Eng

Chelsea Green Publishing

The Nourishing Asian Kitchen is absolutely beautiful and spot on. It educates and encompasses a broad scope of popular Asian dishes and sauces, all in keeping with Wise Traditions principles. These clearly were a source of inspiration for the author, as they had transformed her family's eating habits and consequently their health.

With her Vietnamese background and her husband's Chinese and Taiwanese heritage, they were both exposed to nourishing nose-to-tail eating from a young age. Living in California as a young married couple, they learned about (and enjoyed) Korean, Japanese and Thai cuisine, as well. When health concerns led them to embark on an overhaul of their diet, they knew they still wanted to enjoy these foods, but they wanted to prepare them in the most nourishing way possible, avoiding seed oils and MSG, for example.

In the book's introduction, Sophia says "I knew that adopting [Joel] Salatin's approach to agriculture and Wise Traditions approach to nutrition would serve our family well, but I wasn't entirely sure how to do it in the context of a modern first-and second-generation immigrant family. I was beginning to suspect that we were going to have to make it up as we went along.... Focusing on a few key staples was the first step in a years-long journey we took to recreate the

Asian dishes our family loved so they would be more nourishing and nutrient-dense." This book is proof positive that she has hit the mark.

Sophia sets out to educate the reader about nutrition and points them to resources that can help them on their journey. In the "Getting Started" chapter, she explains in detail the dietary guidelines set forth by WAPF. She describes the GAPS diet, promoted by Dr. Natasha Campbell-McBride.

Sophia also takes the time to go over the most essential ingredients for a nutrient-dense diet. She describes the wonders of raw milk, the importance of animal fats and meat from regenerative farms and why we should avoid rancid seed oils. She reviews the fat-soluble activators and the benefits of arachidonic acid, found in pastured meats, for example. This makes the book an excellent resource for those new to this way of eating and a great way for the rest of us to brush up on the basics.

Sophia prefaces the recipe section with a chapter on "Mastering the Basics," where she goes over how to make a variety of bone broths, including fish broth, gelatinous chicken bone broth and pork bone broth. She notes that for the latter—the pork bone broth—there is traditionally an additional step for ridding the impurities from the broth. It includes placing the bones in a stockpot of boiling water, returning it to a boil for an additional five minutes to release impurities that then float to the top as scum. Rather than just skimming that off, as some might do, she recommends dumping the bones and water into a clean sink and rinsing the bones under running



For pork broth, there is traditionally an additional step for ridding the impurities from the broth.

REAL FOOD FOR HAPPY KIDS

By Kelly Moeggenborg, Illustrated by Karine Jones

Kelly Moeggenborg, of Kelly the Kitchen Kop fame, understands how important it is to reach everyone with the great news about the Wise Traditions diet, no matter the age or level of education; and Kelly reaches our youngsters with this charming book. In rhyming verse and with great illustrations, she covers all the principles, including raw milk, pasture-based farming, sourdough bread, sauerkraut for the tummy, broth, eggs, pâté, eggs, good fats including butter and cream—and how to make the transition. At the end of the book is a quiz and vocabulary lesson.

This book gets an enthusiastic Thumbs Up.

Review by Sally Fallon Morell

All Thumbs Book Reviews

This cookbook aims to rekindle your appreciation for the wisdom of our ancestors.

water to remove any clinging residue. Then the pot can be refilled, and the bones returned to it, along with the onion, ginger and peppercorns, where the broth-making process continues.

I can't begin to tell you how thorough the book is! There's a section on varieties of rices and what you can do with them. There's a complete chapter on sauces and seasonings, including recipes for tamarind dipping sauce, fermented anchovy sauce and black garlic butter. There's a chapter dedicated to recipes for vegetables and sides, poultry and eggs, beef, lamb and even offal.

I gained understanding about what it takes to make decent (and healthy) phở, accompanying sauces and even pickled daikon. I was inspired. But I couldn't very well recommend this book without at least trying a recipe or two. (Isn't that the gold standard for any cookbook? Are the recipes replicable and as tantalizing as they appear?)

I'm happy to report that the answer is a resounding "yes" (at least for the Vietnamese "Rotisserie" Chicken Thighs and the "Mango

Sticky Rice"). You may need to try some of the other recipes for yourself and see what you think!

Just don't get discouraged (as I did at first) by the layout of the recipes. I did find myself wishing that the recipe steps were presented differently, with bullet points or numbers, rather than in paragraph form. I also had to overcome my own hesitance at trying some recipes-within-recipes, when sauces or broths had to be made first, before diving into the main recipe.

Be that as it may, I believe Sophia achieved the goal she relayed near the start of the book. "Guided by the principles of the Weston A. Price Foundation, this cookbook aims to rekindle your appreciation for the wisdom of our ancestors and inspire you to embark on a culinary journey that blends cultural heritage with modern health-consciousness. Join us as we rediscover the nourishing traditions of Asian cuisine, one recipe at a time." This is why this book, in my estimation, merits a happy, healthy thumbs up.

Review by Hilda Labrada Gore

IN MEMORY OF CHAPTER LEADER BECKY PLOTNER

It is with deep sadness that we announce the passing of WAPF co-chapter leader for North Georgia, Dr. Becky Plotner. Becky was a trusted voice in the GAPS practitioner community, and her consulting work as well as her three books have helped thousands of people navigate the healing process that only the GAPS diet can bring. She had a rare and unique ability to make everyone she encountered feel like the most important person in the world.

Becky passed away at home on November 6, surrounded by her husband Kevin, sons Gage and Cooper, and Gage's new bride, Ashley. She was at peace in all respects.

Because it's natural to ask questions, Becky was diagnosed five years ago with stage IV breast cancer. She was very private and treated herself naturally and holistically for the last five years, taking two or three specialized practitioners into her confidence. Her life for most of that time period was active and full of purpose and passion.

She loved the Foundation deeply and embodied Dr. Price's passion to "Teach, teach, teach."

Becky was a naturopathic doctor, writer, journalist, devoted teacher and an inspiration to all who had the privilege of knowing her. She loved learning and teaching others how to homestead out of their backyard by raising her own chickens and pigs and by growing vegetables. She loved spending time in her garden, hiking, kayaking, biking and camping with her family. Her love for those around her and her zeal for life touched everyone she met with joy and love. Becky was a light to all who knew her, she held a special place in her heart for God and her family. Her strength was unwavering, even in the face of life's most challenging trials. Her presence was a blessing to everyone who crossed her path.



All Thumbs Book Reviews

Shots Fired: Vaccine Weapons, Medical Tyranny and the War Against Humanity
By Shannon Rowan
Rowanberry Books


Shots Fired covers the other side of medical and vaccine history—the largely censored side that hasn’t been published readily, discussed or even passed down from generation to generation. Rowan exposes how fortunate connections moved certain vaccines along to market, without proof of a virus or contagion and with no evidence that they “worked.” She brings history to life, quoting past figures who stood up against vaccination and other forms of poisoning, while also walking readers through the similarities in how events unfolded during the Covid years.

This meaty book, nearly eight hundred pages long, is not a light read. It covers milkmaids, bedbugs and historical facts that have been hidden from sight, even in the greatest vaccination books written today. Rowan uses quotes and statements from historical documents, sharing comments from individuals who opposed vaccines and discussing how the “infectious” disease problem miraculously disappeared when sanitation issues got addressed. She also explains how, over time, it became more obvious that vaccines were failing to deliver on their promise; to accommodate the outcomes, scientists and officials changed the definition of what vaccines were supposed to do.

During the smallpox vaccination era, some spoke up against the poisoning, while others complied, only to watch their children die. One town fared well with a 4 percent smallpox vaccination rate, while another town with a 95 percent vaccination rate suffered greatly. The book provides proof of the destructive agenda through statistics, letters and documents.

Rowan also walks readers through the broader history of big medicine and big chemical industry players like Monsanto, covering substances like DDT, aspartame, mercury,

arsenic, fluoride, mRNA drugs and graphene oxide. She also discusses topics like the viral paradigm, EMFs and lying with statistics—the list is long. She goes into detail covering exactly what I wanted to know, even when I did not know that I wanted to know it! As one example, she describes the many uses of formaldehyde and formalin—for embalming corpses, making cardboard, producing egg cartons, manufacturing gel capsules (so they will harden), disinfecting food containers and . . . as a food preservative. The WHO banned it for its cancer-causing properties. She informs us that numerous individuals were found contaminating wells with formaldehyde in Liberia—wells that supplied water to entire towns—and were paid to do so at the height of the “Ebola outbreak.” One man arrested for this act admitted that formaldehyde poisoning causes symptoms consistent with Ebola. Rowan also unfolds the story of people dressed as nurses who administered Ebola vaccines with syringes that contained formaldehyde—again, causing Ebola-like symptoms. When the individuals died, their organs were harvested for organ-trafficking operations.

Shots Fired is the most thorough and well-documented book I’ve read in years, painting a clear picture of medical and vaccination history. I spent hours studying Rowan’s citations and following her evidence that the diseases we vaccinate for today still exist but are just labeled under different names. Nothing in the book goes against WAPF principles; on the contrary, it assists in putting puzzle pieces together on how the medical model has taken over, right under our very noses. Knowing the tactics will help us to better protect and defend our medical choices in the future. Although this big book has very small print (and even smaller print in the citations), it should be mandatory reading for every health class, so that in time we stop making the same mistakes. It gets a hearty thumbs-up, raised high and held long. 

Review by Becky Plotner



Numerous individuals were found contaminating wells with formaldehyde in Liberia and were paid to do so at the height of the “Ebola outbreak.”

Vaccination Updates

NAVIGATING NOVEL RSV VACCINES AMID A COMPLEX HISTORY

By Kendall Nelson, Director, *The Greater Good*

When clinicians do decide to test for “RSV,” they use the very same “pointless,” “useless” and “meaningless” methodologies deployed to “diagnose” other imaginary viruses.

In mid-2023, the Centers for Disease Control and Prevention (CDC) began hyping the imminent startup of the respiratory syncytial virus (RSV) “season,” at the same time conveniently introducing two new RSV vaccines and one new RSV “immunization.” The agency now recommends nearly cradle-to-grave RSV biologics: for babies and some toddlers, pregnant women (during weeks thirty-two to thirty-six of pregnancy) and adults over age sixty.¹

According to mainstream virus narratives, the symptoms labeled as “RSV” are common, seasonal (starting in the fall and peaking in the winter in the U.S.) and experienced by “almost all children” by their second birthday.² For the most part, CDC asserts, RSV manifests as mild, cold-like symptoms such as a runny nose, reduced appetite, coughing, sneezing, fever and/or wheezing.³ Medical experts admit that these self-limiting symptoms are “clinically indistinguishable from those of other viral respiratory infections.”⁴ In fact, the American Academy of Pediatrics discourages routine lab testing for RSV “because treatment is supportive only, and diagnosis does not change the management of disease for most patients.”⁴ Notably, when clinicians do decide to test for “RSV,” they use the very same “pointless,” “useless” and “meaningless” methodologies—polymerase chain reaction (PCR) and rapid antigen testing (RAT)—deployed to “diagnose” other imaginary viruses.⁵

The push for RSV vaccination derives its stated rationale from the claim that RSV poses greater risks to certain vulnerable groups (premature infants, young children, older adults and the immunocompromised), in whom it reportedly can segue into more serious bronchiolitis or pneumonia.^{4,6} Studies claim that RSV is the leading cause of hospitalization among infants under one year of age⁷; in children under age five, CDC blames RSV for over two million

outpatient visits every year and fifty-eight to eighty thousand annual hospitalizations.⁸ CDC also attributes one hundred to three hundred yearly under-five deaths to RSV, but a study published in 2021 by the agency’s own researchers showed that for the 2005–2016 period, in which approximately four million babies were born annually, RSV was listed as the “primary underlying cause of death” on death certificates for, on average, only twenty-three children under age five annually, and an annual tally of just seventeen infants under age one.⁹

As for older adults in the senior age group (age sixty-five and up), the CDC’s very rough estimate is that each year RSV is responsible for anywhere from sixty to one hundred sixty thousand hospitalizations and six to ten thousand deaths (the agency admits that these “wide ranges” reveal “substantial uncertainty” about the true burden of disease attributable to RSV).^{1,10} To heighten the drama, public health officials warn seniors that if they have underlying conditions like cardiovascular disease, diabetes, chronic obstructive pulmonary disease (COPD), asthma or immunodeficiencies, they will be more likely to experience severe RSV complications and poor outcomes.¹⁰⁻¹²

A BANNER YEAR FOR RSV VACCINES

Until 2023, the history of attempts to develop RSV vaccines had been marked by six decades of failures. In the first go-round of trials, in 1967, two infants died and the majority of other young study participants landed in the hospital after receiving vaccines “inactivated” with formalin (an aqueous solution containing roughly 40 percent formaldehyde).¹³ The toxic effects of injected formaldehyde and formalin have been well known since at least 1905, when a Chicago pathologist observed that a “definite reaction is obtained” even with “very dilute” formulin; the author then enumerated a variety

of disturbing effects depending on the locus of injection, including “intense exudation” with subcutaneous injection and myositis (inflamed muscles) with intramuscular injection.¹⁴ The pathologist also observed that “Pneumonia and bronchitis are found in all animals after the injection of formalin.” Ignoring this body of knowledge, researchers have persisted in blaming the 1967 trials’ disastrous outcomes on the dubious and unproven concept of “antibody-dependent enhancement,”¹⁵ which hypothesizes a skewed immune response in vaccinated individuals that supposedly predisposes them to more severe illness when they encounter the putative germ later on.¹⁶ (In 2020, vaccine proponent Peter Hotez resurrected the antibody-dependent enhancement bogeyman with respect to the Covid injections.¹⁷)

In light of this historical context, 2023 represented a banner year for would-be manufacturers of RSV injections. In May, the Food and Drug Administration (FDA) began by approving two different RSV shots for adults sixty years of age and older—GlaxoSmithKline’s (GSK’s) Arexvy and Pfizer’s Abrysvo—making them the first RSV vaccines ever to make it through the regulatory gauntlet in the U.S.^{18,19} Both adult RSV vaccines derive their antigen by culturing “genetically engineered Chinese Hamster Ovary cells.”^{20,21} Additionally, GSK’s

vaccine incorporates a proprietary two-pronged “adjuvant system” (AS01), which includes two “immunostimulants”: monophosphoryl lipid A (MPL) (a detoxified form of the endotoxin lipopolysaccharide) and a saponin/surfactant called QS-21, derived from *Quillaja saponaria* Molina (commonly referred to as soapbark tree).^{22,23} GSK first deployed AS01 in its Shingrix shingles vaccine. Vaccine scientists acknowledge that while they are unclear on precisely “how immunostimulants function in combination,” the adjuvant system approach “results in complex patterns of innate immune activation.”²⁴ In fact, in 2019, a research group funded by GSK approvingly reported “systemic reactogenicity” (assessed via measurement of inflammatory cytokines) in individuals who received an AS01-adjuvanted hepatitis B vaccine, even exceeding the reactogenicity induced by aluminum-adjuvanted vaccines.²⁵

In July, the CDC followed up the FDA approvals with its recommendation that older adults get one of the new RSV vaccines, while couching its statements with the modest caveat that individuals should “talk to their healthcare provider about whether RSV vaccination is appropriate for them.”²¹

MONOCLONAL ANTIBODIES FOR THE KIDS

Back in 2004, the FDA approved a “monoclonal antibody” called palivizumab (brand name Synagis) “for the prevention of serious lower respiratory tract disease caused by RSV in children at high risk of RSV disease,” okaying the product (made by AstraZeneca subsidiary MedImmune) for monthly administration “throughout the RSV season.”²⁶ FDA defines monoclonal antibodies, which it classifies as “biologics” rather than drugs or vaccines,²⁷ as “laboratory-made proteins that mimic the immune system’s ability to fight off harmful pathogens such as viruses.”²⁸

In July 2023, hot on the heels of its Arexvy and Abrysvo approvals, FDA approved a new RSV monoclonal antibody product for infants and

HEALTH FREEDOM DEFENSE FUND

Health freedom is one of our most sacred and cherished rights, but threats to that freedom have occurred with increasing frequency over the past few years. Health Freedom Defense Fund was founded to protect those fundamental rights and is honored to have the Weston A. Price Foundation’s support in pursuing our mission.

HFDF furthers the cause of health freedom through litigation and to that end we have filed many lawsuits strategically focused on resisting infringements of our rights by government, businesses, schools and other organizations. Our biggest success was a lawsuit striking down the federal travel mask mandate but the Department of Justice is appealing as the CDC wants the right to mask you again, absent scientific justification.

Any funds donated will go to advancing the litigation underway. Some of the critical lawsuits your donation will support would be:

- DOJ’s appeal of HFDF’s federal travel mask mandate lawsuit
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Enthusiastic headlines surrounding nirsevimab's approval neglected to mention that AstraZeneca's clinical trials killed twelve infants in the group that received the biologic.

young children that does not require monthly dosing.²⁹ The product—generic name nirsevimab, brand name Beyfortus—is a joint effort by AstraZeneca and Sanofi.²⁸ The CDC immediately recommended that all infants under eight months of age get a dose of nirsevimab if born during or entering “their first. . . RSV season,” also advising one dose for infants and children between eight and nineteen months of age “at increased risk for severe RSV disease and entering their second RSV season.”³⁰

Enthusiastic headlines surrounding nirsevimab's approval neglected to mention that AstraZeneca's clinical trials killed twelve infants in the group that received the biologic, while demonstrating a paltry 48 percent “efficacy.”^{31,32} In fact, monoclonal antibody injections are known to come with inherent risks, including an association with severe allergic reactions and other hypersensitivity responses.³¹ Other potential complications, described as “infusion-related reactions,” include “flushing, fever/chills, back or abdominal pain, nausea/vomiting, pruritus, or skin rashes.”³³ Brian Hooker, PhD, senior director of science and research at Children's Health Defense, flagged as “odd” and disturbing the fact that four of the twelve infant deaths in the trials were due to cardiac arrest, with another two deaths attributed to sudden infant death syndrome (SIDS).³¹

THE PRENATAL PILE-UP

Rounding out the year's RSV innovations, FDA, in August, extended the indications for use of Pfizer's Abrysvo to pregnant women.³⁴

The CDC's Advisory Committee on Immunization Practices (ACIP) followed up in September with an eleven-to-one vote in favor of the RSV vaccine for expectant mothers.¹ The ostensible rationale cited by ACIP was that administering an RSV vaccine to pregnant women enables mothers to transmit protective antibodies to their unborn children, safeguarding them against RSV from birth through the first six months of life.³⁵ However, even as CDC director Mandy Cohen praised FDA for approving Pfizer's vaccine, other experts questioned the decision. Cardiologist Peter McCullough commented, “Vaccination of the mother for passive immunization of the infant is an unnecessary and risky strategy that will undoubtedly lead to fetal loss or premature deliveries when deployed on a large scale.”³⁶

Both GSK and Pfizer had embarked on the development of a prenatal RSV vaccine. The two companies' neck-and-neck efforts and formulations shared remarkably similar designs—and both were associated with heightened rates of premature births and infant mortality. The alarming surge in preterm and neonatal fatalities during phase 3 trials forced GSK to halt its trials. Trial data revealed a 6.8 percent incidence of preterm birth in the vaccine group (238/3496) compared to 4.9 percent (86/1739) in the placebo group—or approximately one additional preterm birth for every fifty-four vaccinated mothers—as well as thirteen versus three neonatal deaths in the vaccine versus placebo arms of the study.³⁷

Pfizer, while producing similar results,

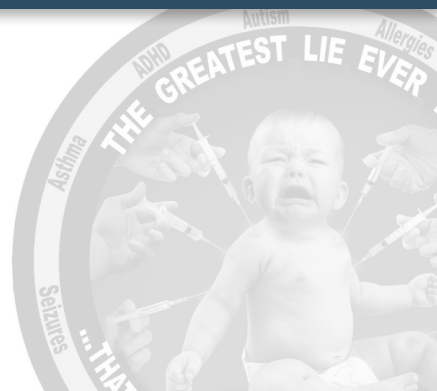


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continued with its trials. In May 2023, *The BMJ* published a news story describing experts' concerns about Pfizer's maternal RSV vaccine candidate, pointing out that some researchers were urging a thorough examination of Pfizer's trial data and rigorous post-approval surveillance.³⁷ Even though adverse event tables from Pfizer's phase 2 study, published in October 2022, reported a preterm birth rate of 5.3 percent in the Abrysvo group (6/114) versus 2.6 percent (3/116) in the placebo group, Pfizer informed *The BMJ* that they had observed "no imbalance of neonatal deaths" in their phase 3 trial.³⁷ The FDA's approval of Abrysvo for pregnant women implies that the regulatory agency chose to take Pfizer at its word.

In its presentation to ACIP, Pfizer reported that among the three thousand six hundred eighty-two pregnant women in the Abrysvo arm of their "placebo-controlled" clinical trial, 14 percent experienced an adverse event within a month of vaccination.³⁵ Of these, 4.2 percent of vaccinated participants experienced a "serious" adverse event, 1.7 percent had a "severe" adverse event, and 0.5 percent had an adverse event categorized as "life-threatening."³⁵ The alarming inventory of adverse events included "fetal growth restriction, fetal tachycardia, gestational diabetes, nonreassuring fetal heart rate pattern, premature labor, premature separation of placenta, vaginal hemorrhage and thrombocytopenia."³⁸ The authors of another Pfizer-backed study focused on older adults, published in the *New England Journal of Medicine* in April, cautioned that Guillain-Barré syndrome was also a potential adverse effect of Abrysvo.³⁹ In the GSK trials for Arexvy, vaccine recipients had a heightened incidence of atrial fibrillation, a severe heart condition associated with complications like stroke, heart attack and heart failure.⁴⁰

In the Pfizer trials, none of these types of events were recorded among the 13 percent of "placebo" participants reported to have also experienced an adverse event.³⁸ However, it should be noted that rather than use a proper inert placebo, Pfizer's investigators fudged the comparison, using a "placebo" consisting of "excipients matched to those used in the . . . vaccine formulation, minus the active ingredients."⁴¹

Among the infants born to Abrysvo-vaccinated mothers, Pfizer's data revealed that 37.1 percent experienced adverse events within the first month after birth: 15.5 percent "serious," 4.5 percent "severe" and 1 percent "life-threatening."³⁵ Adverse events for infants included "acute respiratory failure, bronchiolitis, cardiac murmur, chordee (bent penis), conjunctival hemorrhage, hypoglycemia, jaundice, low birth weight, neonatal hypoxia, neonatal respiratory failure, seizure, sepsis, upper respiratory tract infection and vascular malformation."³⁸ Pfizer produced no data to assess the effects of Abrysvo vaccination on the breastfed infant or on milk production or excretion, nor did the manufacturer evaluate the vaccine for carcinogenicity, genotoxicity or impairment of male fertility.⁴²

SAY NO TO THE PIPELINE

There are growing concerns about the number of vaccines given to children, many of which are mandated. The U.S. vaccine schedule for children and adolescents currently amounts to as many as six dozen doses by age eighteen, including up to twenty-seven doses of ten vaccines within the first fifteen months of life.⁴³ Additionally, children routinely receive one to two annual flu shots. Often, multiple vaccines are administered simultaneously. Package inserts warn of almost four hundred different types of possible adverse events.⁴⁴ Under the federal Vaccine Injury Compensation Program (VICP), vaccine manufacturers have a comprehensive liability shield when their vaccines result in injury or death.⁴⁵

Illnesses labeled as "RSV" in infants are generally an easily manageable condition. Dr. McCullough notes the effectiveness of nebulizer therapy, whether administered at home or in a clinical setting, and observes that when hospitalization occurs, it is "usually a product of inadequate home treatment"; in that event, the supportive hospital care required is typically "brief."³⁶ Considering these factors, why risk an experimental vaccine?

The same question can be asked where pregnant women are concerned. With the addition of prenatal RSV vaccination, the CDC now advises a minimum of four maternal vaccines—influenza, Tdap (tetanus, diphtheria and acellular pertussis), Covid and RSV—against six appar-

A FAILURE IN THEIR OWN TERMS


CDC claims that Pfizer's Abrysvo vaccine demonstrated an 80 percent reduction in RSV hospitalizations and health care visits for infants within their first six months. However, closer examination of the data reveals that Pfizer's clinical trial failed to yield "statistically significant results regarding the prevention of infant medical visits caused by RSV, including for non-severe cases."³⁸ Moreover, data presented to ACIP in February revealed uncertainty about the efficacy of the Pfizer and GSK vaccines beyond the six- to seven-month clinical trial follow-up period.⁵²

Additionally, the CDC admitted that the sample sizes used to study the two vaccines were insufficient to reliably estimate whether the vaccines could have had any positive impact on outcomes like hospitalization and death.⁵³ The clinical trials also only included participants who were healthy and had low-risk pregnancies.⁵⁴

It is crucial
to avoid
becoming
ensnared in
a cycle of
fear about
yet another
scary virus.

ent disease threats.⁴⁶ Depending on individual circumstances, hepatitis B and hepatitis A vaccines, as well as travel vaccines, also may be recommended for some pregnant women.⁴⁷ No clinical trial has ever assessed the potential for synergistic adverse events resulting from administration of multiple maternal vaccines during a single pregnancy. Fortunately, fewer and fewer women are complying with the CDC's recommendations regarding vaccination during pregnancy; a maternal-fetal medicine specialist lamented, "We are meeting more resistance than I ever remember. We didn't get this kind of pushback on this scale before the pandemic. Now all vaccines are lumped together as bad."⁴⁸

With the global RSV vaccine market projected to reach ten billion dollars by 2030, Pfizer and AstraZeneca may soon face increased competition.⁴⁹ The National Institutes of Health (NIH) has identified up to thirty RSV vaccine candidates in the pipeline using different vaccine formats, ranging from live-attenuated vaccines to vectored, subunit and particle-based vaccines.⁵⁰ FDA has also granted Moderna a fast-track designation for the company's experimental mRNA vaccine targeting RSV.⁵¹ Currently, the expedited FDA review applies solely to older adults, but it's worth noting that Moderna's phase 1 trials also included children as young as one year old.

It is crucial to avoid becoming ensnared in a cycle of fear about yet another scary virus. The media are only too glad to function as PR agents for vaccine makers and complicit regulators, warning of a potential "triple-demic" (RSV, influenza and Covid). During Covid, the media's influence on thoughts, emotions and behaviors led people to obey authority figures and conform to unprecedented and dysfunctional social norms, resulting in severe economic and health consequences. Then, the media began to inform us of a surge in RSV-related pediatric hospitalizations and ER visits. . . just as RSV-related products were receiving market approval. With FDA and CDC continuing to endorse vaccines and drugs subjected to scant or farcical safety testing, it is a good time to remember that mild illnesses can play a vital role in the body's detoxification and regeneration processes.

Kendall Nelson is a documentary filmmaker actively engaged in directing, producing and distributing media that matter. With over twenty years of television and film experience, Nelson's lifelong commitment is to bring about awareness through her work, including advocating health freedom, simple living and real food. She is an Idaho chapter board member of the International Women's Forum.

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EXHIBITORS AT WISE TRADITIONS 2023

CLOCKWISE FROM LEFT:
Oyster Max serves up an oyster bar;
Sea-90 provides high-mineral salt;
Walkabout showcases Australian emu oil;
customers sample cod liver oil from Green Pasture.





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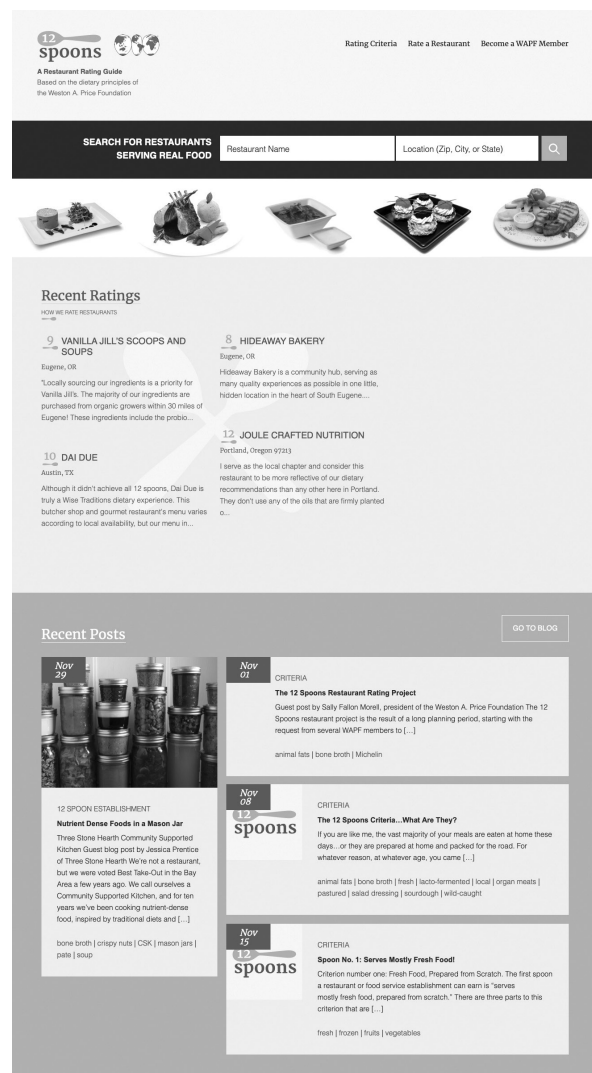
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- 3 Offers some pastured meat, eggs, or dairy.
- 4 Serves some organ meats (liver, pate, sweetbreads, etc.).
- 5 Uses natural fats for cooking (butter, lard, tallow, duck fat, olive oil, etc.).
- 6 Makes bone broths/stocks for soups, stews, gravies, sauces.
- 7 Makes own seasoning mixes (no MSG or flavoring packets).
- 8 Makes own salad dressings using olive oil or cold-pressed sesame oil.
- 9 Offers genuine sourdough bread.
- 10 Offers lacto-fermented beverages such as kombucha or kvass.
- 11 Offers lacto-fermented condiments.
- 12 Serves naturally sweetened desserts (using raw honey, maple syrup, date sugar, etc.).

Farm and Ranch

WHERE'S THE BEEF? REGULATORY BARRIER TO ENTRY AND COMPETITION IN MEAT PROCESSING

By Joel Salatin

Testimony by Joel Salatin to the House of Representatives Judiciary Committee: Subcommittee on the Administrative State, Regulatory Reform, and Antitrust, June 13, 2023

Right now, nationwide, a farmer wanting to get a slaughter slot in a small federal-inspected meat processing plant often must book six months to a year in advance. For pork, that's before the piggie is even born. It's never been like this. What happened?

In short, regulatory extortion tyranny. Inspection regulations are size prejudicial. I know one facility that was ordered closed because it wasn't processing fast enough. The Food Safety Inspection Service measures its efficiency by pounds inspected per personnel-hour, creating an adversarial discriminatory attitude toward small plants.

In 1906 when Upton Sinclair wrote *The Jungle*, seven large companies controlled half the nation's meat processing capacity. After a century of government intervention, four now control 85 percent. When licenses and compliance make entering and maintaining an abattoir more burdensome to small facilities than large, concentration and centralization is not an anti-trust issue; it's a discriminatory regulatory issue.

It's a perfect example of mission creep. What started sincerely as a food safety objective morphed into regulatory overburdensome harassment. A small plant operator dare not object to subjective and political inspector decisions because "poke and sniff" allows retribution toward folks with questions. Entrepreneurs are enslaved and held hostage by bureaucrats who share no business risk and rule without restraint. Meanwhile, more Americans desire a more localized, stable, secure, transparent, nutrient-dense, relational, trustworthy food supply than centralized industrial facilities offer. We have

eager and willing buyers, farmers desperate to direct market to their neighbors, but a bureaucracy that stands in the way of voluntary consenting adults exercising freedom of choice for their body's microbiome fuel. Few human decisions speak to freedom like what we have a right to swallow.

I can butcher a beef in the field, process it and give it away. But if I sell an ounce, I'm a criminal. What is it about exchanging money that suddenly makes meat unsafe? Clearly current regulations are not about safety; they are about market access.

Our society recognizes scale and relationship when assessing risk. In Virginia, we can keep three daycare children in our private home without licenses and governmental oversight. Why? Because an entity and arrangement that small inherently offers seller-buyer intimacy that vets itself equal to licenses and inspectors.

In Virginia, we can keep three eldercare patients in our private home without licenses and government oversight. Why? Because such an intimate arrangement protects equal to the government.

Expectations and trust provide context in any transaction. People who want to disentangle from the agri-industrial-governmental crony complex don't expect their provenance to be squeezed through the regulatory process. They trust their farmer more than a government agent. While this group, both farmer and customer, may represent a lunatic fringe of society, we all know that's where innovation comes from. And how a society deals with its unorthodox element defines its march toward tyranny or freedom.

Our society, desperate for food security and stability, wallows in a morass of regulatory impediments to what we need and desire. What remedies exist?

Right now, 1967's PL90-492, known as the "Producer-Grower Exemption," allows 20,000

What started sincerely as a food safety objective morphed into regulatory overburdensome harassment.


head of poultry to be processed on-farm without inspection; this has enabled thousands of community-scaled neighbor-to-neighbor entrepreneurs to launch small broiler operations. To my knowledge, not a single customer has been harmed by this exemption. Why not extend it to beef? Pork?

Right now, custom processing designation allows me to sell pre-slaughter portions of an animal, usually in wholes, halves and quarters. Why limit my customers to large volumes? Let them buy by-the-cut—Congressman Thomas Massie’s PRIME Act would enable this.

Another remedy could simply be a Food Emancipation Proclamation, allowing farmers

currently enslaved by regulatory shackles to sell meat to neighbors. Right now, farmers can give it away; they just can’t sell it. Neighbors can buy and feed it to their children. Clearly, if uninspected meat is hazardous, the commerce prohibition should be on the buyer as well as the seller. But it’s not, which clearly illustrates the prohibition’s hypocrisy.

Surely if we really want freedom of food choice and food security, we can create a remedy that refuses to criminalize neighborly meat transactions. The only reason food freedom was not written into our Bill of Rights was because our nation’s founders could not have imagined a time when neighbors could not exchange a chuck roast or sausage. At some point, requiring professional league infrastructure and referees on a sandlot pickup ball game is both inappropriate and malicious.

It’s time to remove the heavy hand of tyranny from America’s food system by allowing market access, opportunity and competition for producers and consumers seeking freedom of food choice. 

WISE TRADITIONS 2023 ANNUAL FARM TOUR



Tour guides Will Winter and Steve Campbell offer a wealth of information.



Marla Biggs of Hedgewood Farms, Paola, Kansas.



Happy chickens and pigs enjoy the out-of-doors at Hedgewood Farms.



Derek George of George Farms, Wellsville, Kansas, prepares grassfed burgers for one hundred farm tour participants.



LEFT: Stephen Noffke of Skyview Farm and Creamery, Pleasanton, describes the cheese-making process.



RIGHT: Bill Noffke explains their dairy operation.



Josh and Kendra Brown with children Garrett and Gideon from Harmony Farms, Fontana, Kansas. The farm produces beef and goats.

A Campaign for Real Milk

GOT RAW MILK?
UCLA PROFESSOR OF MEDICINE SAYS “NO THANKS!”
By Sally Fallon Morell

During the last few years, bureaucrats and public health officials have been quiet about raw milk, but then Iowa legalized its sale in May. The accompanying publicity—in *The New York Times* and *USA Today*,^{1,2} plus many other publications—has resulted in a flurry of pro-pasteurization, anti-raw milk Internet posts. One of these appeared on December 8, 2023,³ written by Claire Panosian Dunavan, professor emeritus of medicine and infectious diseases at the David Geffen School of Medicine at the University of California, Los Angeles (UCLA) and past president of the American Society of Tropical Medicine and Hygiene.

Dunavan can’t understand the “risky allure” of raw milk. “Is it buyers’ faith in ‘nature’s perfect food’ or sellers’ pure, naked greed?” she asks.

The main claims in her article:

- In the 1890s, Nathan Straus (co-owner of Macy’s) started a private foundation to dispense pasteurized milk after his son died of typhus during a vacation in Italy—the death blamed on raw milk. (Dunavan then credits

Straus with a drop in U.S. infant mortality from one hundred twenty-five per thousand to fewer than sixteen per thousand between 1891 and 1925.)

- Raw milk consumers are eight hundred forty times more likely to suffer illness than those who drink pasteurized dairy.
- Recent outbreaks of illness blamed on raw milk have occurred in California, Utah and Idaho.
- Raw milk contains dangerous pathogens like campylobacter and salmonella.
- Raw milk may cause Guillain-Barré syndrome.
- People are avoiding pasteurized milk because of milk allergy “as opposed to a serious, even life-threatening infection.”
- The real villains are the people who sell raw milk “because they believe there’s an audience out there that will buy it,” even though they “know” that raw milk will harm some people.

Let’s look at these points one by one, starting with the accusation that raw milk farmers



TRADITIONAL SATURDAY LUNCH AT WISE TRADITIONS 2023



Chicken soup, sausage medley, sauerkraut, salad and sourdough bread with butter, plus our raw-cheese cheesecake.

are motivated by pure, naked greed. (In the spirit of full disclosure, I am a dairy farmer who sells raw milk.)

Conventional dairy farmers today receive about the same price as they did during World War II, even while their costs have skyrocketed. Typically, they get \$1.45 per gallon, which costs them \$2.00 to produce.⁴ This explains why the number of licensed dairy operations in the U.S. has steadily declined by more than 55 percent,⁵ from 70,375 in 2003 to 31,657 in 2020. More than three thousand dairy farms stopped production during 2020 alone—that's eight per day.

Some of these farmers have avoided going bankrupt by switching to raw milk sales. Typically, consumers are happy to pay from five to ten dollars per half gallon—enough to save the family farm, especially if the farmer reduces his costs by nourishing his cows on grass (the natural food for cows) rather than feeding grain.

Dunavan refers to farmers' desire to make a decent living as “pure, naked greed,” but let me give you an example of real greed. Dairy company CEOs typically make salaries upwards of three million dollars per year. They do this by keeping milk prices as low as possible—hence the heartbreak of losing the farm inflicted on thousands of dairy farmers. That is what most of us would call pure, naked greed.

TRUE CAUSES OF INFANT MORTALITY

About Nathan Straus losing his son to typhus and blaming it on raw milk, according to that font of conventional knowledge, Wikipedia, typhus is caused by bacteria spread by lice, chiggers or fleas.⁶ Since Dunavan is a public health expert, she should know this. (I have not been able to find any reference to raw milk causing typhus, except for the case of Straus' son.) Typhus reigns in filthy conditions and it was a real problem, especially in cities, before the advent of modern housing, sewage systems and washing machines. Even today we see outbreaks of typhus, but public health experts typically blame them on rats, never on raw milk!⁷

As for the decline in infant mortality in the U.S. at the turn of the twentieth century, it was during this period that public officials worked to clean up our cities with the installation of sewage systems, rubbish

collection and clean water. This was also the period when the car gradually replaced the horse and mule—before the car, our cities were stinking cesspools of manure and grime. Immigrants huddled in crowded housing without running water and refrigeration, and with only rudimentary sanitation (Figure 1). The death rate by the age of five was 50 percent—and this was blamed on raw milk rather than unsanitary conditions—officials called it the “milk problem” (Figure 2).

Raw milk may indeed have contributed to the high death rate because it came from distillery dairies—inner city confinement dairies of unimaginable filth where cows were fed distillery waste. The milk was so deficient and watery that chalk was often added to make it look white--this was the milk that Straus wanted to pasteurize. However, pasteurization cannot take the credit for the decline in infant mortality as it was around this time that distillery dairies were banned. The real hero was not Nathan Straus, who did nothing for public clean-up efforts, but Dr. Henry Coit, who worked to bring clean raw milk from the countryside to the cities. Public health officials at the time lauded Coit's certified raw milk with saving children's lives and noted that children in orphanages brought up on raw milk were healthier than those given pasteurized milk.

QUESTIONING THE REPORTS

About raw milk safety, Dunavan repeats the recent claim that people who drink raw



FIGURE 1. Slum life in New York City's Golden Age.

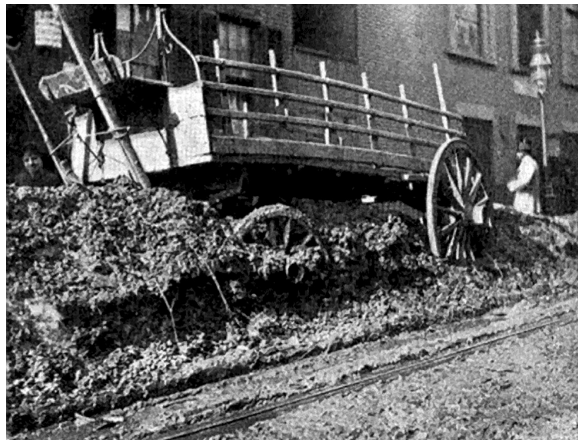


FIGURE 2. Manure piled up on a New York City street creating deadly unsanitary conditions—health officials called this the “milk problem.”

milk are eight hundred forty times more likely to contract food-borne illness than those who don't.⁸ But an analysis by epidemiologist Peg Coleman, based on data considered by the Food and Drug Administration (FDA) and the Food Safety and Inspection Service (FSIS), found that on a per annum basis, out of twenty-three foods considered, pasteurized milk ranked second highest and raw milk ranked seventh highest in causing severe illness.⁹ The real question that one must ask, however, is how accurate are reports of illness and death from raw milk?

The Weston A. Price Foundation analyzed a 2007 PowerPoint presentation by John F. Sheehan, then director of FDA's Division of Dairy and Egg Safety, who contended that pasteurization is the only way to ensure the safety of milk.¹⁰ Table 1 shows that the fifteen studies Sheehan referenced (through 2005) either were methodologically flawed or that bias or outright fabrication guided the conclusions that he drew; not one of the studies cited by the FDA actually proved that raw milk caused the illness. We need to do the same analysis for reports of raw milk illness from 2005 to the present—one that includes the claims of illness from raw milk in California, Idaho and Utah. It's safe to assume that many of them are bogus, given the alacrity of public health officials to blame raw milk for any illness without a thorough examination of all the data.

According to the late Dr. Ted Beals, who analyzed reports of foodborne illness from 1999 to 2011,¹¹ government data report an average of forty-two illnesses from raw milk per year out of nearly ninety-one thousand (90,771) illnesses from all sources. Using these figures, Dr. Beals concluded that one is thirty-five thousand times

more likely to become ill from other foods than from raw milk. Beals also noted that there is no way to quantify whether any one food is safer than another from the data we have, but at the same time, it is clear that there is no basis for singling out raw milk as "inherently dangerous."

Recently, melons have ranked high in causing illness—including an outbreak from cantaloupe that resulted in over three hundred illnesses, over one hundred hospitalizations and four deaths. Where is Dunavan's outcry against greedy melon growers? And what about raw oysters, which kill fifteen people per year?¹² Where are the warnings to oyster lovers not to eat these terrible things?

PATHOGEN FACTS

Dunavan implies that raw milk can cause Guillain-Barré syndrome (GBS)—a degeneration of the nerve cells that causes muscle weakness and paralysis—because raw milk can carry campylobacter, and campylobacter often gets the blame for GBS. Of course, many, many foods harbor campylobacter. In 2019, there were over one hundred fifty thousand reported cases of GBS worldwide;¹³ a quick Internet search does not find any of these cases associated with the consumption of raw milk.

By the way, campylobacter and salmonella, the two pathogens most commonly associated with raw milk, do not grow in refrigerated raw milk. In a pilot study sponsored by the Raw Milk Institute, refrigerated raw milk inoculated with high and moderate counts of these pathogens suppressed their growth.¹⁴ Inoculated listeria did grow in raw milk, but an association of this pathogen with raw milk is extremely rare. Moreover, a recent systematic review found that the risks of severe listeriosis infection were greater for pasteurized milk products than for raw milk products.¹⁵

CONSUMERS SHUNNING PASTEURIZED MILK

Dunavan wonders why people would indulge in the risky behavior of drinking raw milk. There are very good reasons for drinking raw milk, but first, let's consider why fewer and fewer people are drinking *pasteurized* milk. In both the UK and the U.S., consumption of pasteurized milk has declined by 50 percent since 1974 (Figure 3). (I would love to know whether Dunavan herself drinks pasteurized milk!)

To find out why consumption of pasteurized milk is declining, let's consider a 2019 study out of China, entitled "Processing milk causes the

TABLE 1. Unfounded conclusions from raw milk studies

LAW OR BIAS	NUMBER	PERCENT
No Valid Positive Milk Sample	12/15	80%
No Valid Statistical Association with Raw Milk	10/15	67%
Findings Misrepresented by FDA	7/15	47%
Alternatives Discovered, Not Pursued	5/15	33%
No Evidence Anyone Consumed Raw Milk Products	2/15	13%
Outbreak Did Not Even Exist	1/15	13%
Did Not Show that Pasteurization Would Have Prevented Outbreak	15/15	100%

formation of protein oxidation products which impair spatial learning and memory in rats.”¹⁶ The researchers subjected milk to four processing techniques: boiling, microwave heating, spray-drying and freeze-drying. (Boiling takes milk to 212 degrees F; ultra-pasteurization takes milk to 280 degrees F. Most milk sold today is ultra-pasteurized.) All four techniques (even freeze-drying) caused oxidative damage to the milk proteins and resulted in “various degrees of redox state imbalance and oxidative damage in plasma, liver, and brain tissues.” Feeding damaged milk proteins to rats resulted in learning and memory impairment—no wonder IQ levels are falling!

The researchers concluded, “humans should control milk protein oxidation and improve the processing methods applied to food.” But how to improve those processing methods? What types of processing methods would they suggest? How about no processing at all? Why not just treat milk carefully and cleanly and let the many natural antimicrobial compounds in raw milk do their work?¹⁷

Milk proteins are not tough like muscle or collagen proteins; they are extremely fragile and easily damaged by heat and pressure (as in heated drying). No wonder the consumption of industrial pasteurized milk is declining—the body sees processed and damaged milk proteins as foreign proteins and mounts an immune response. This explains why milk protein is the number-one allergy and why studies link consumption of pasteurized milk with digestive disorders, rashes, asthma, diabetes . . . and even sudden death.

Based on statistics provided by the Allergy & Asthma Network,¹⁸ one can deduce that pasteurized milk causes approximately twenty deaths from anaphylactic shock *per year*! The type of milk that is truly dangerous is pasteurized milk. Yes, indeed, a good “reason not to” drink pasteurized milk is allergy—life-threatening allergy. Parents are figuring out that they shouldn’t give this junk to their children. . . or drink it themselves.

Pasteurized milk is the milk that causes health problems, while raw milk is indeed Nature’s Perfect Food—after all, it is the food in

Nature that nourishes all mammals, loaded with vitamins and minerals, each one of which has a special enzyme that ensures 100 percent assimilation. When milk is pasteurized, these nutrients are largely destroyed, or rendered very difficult to absorb (Table 2).

REASONS TO GO RAW

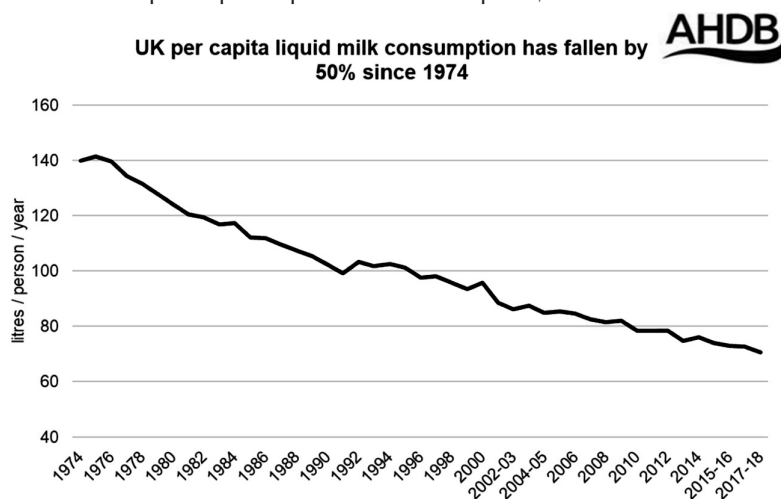
More reasons to drink raw milk: less asthma and respiratory infections, fewer allergies and rashes. These are the conclusions of a number of European studies, which pasteurization proponents in the U.S. dismiss, but which public health officials in Europe have taken seriously. These include:

- A 2001 study published in *The Lancet*: Less asthma, fewer allergies;²⁷
- The 2006 PARSIFAL study (*Clinical & Experimental Allergy*): Less asthma, fewer allergies;²⁸
- The 2011 GABRIELA study (*Journal of Allergy and Clinical Immunology*): Less asthma, fewer allergies;²⁹
- A 2012 study (*Current Opinion in Allergy and Clinical Immunology*): Less asthma, fewer allergies;³⁰
- The 2014 PASTURE study (*Journal of Allergy and Clinical Immunology*): Less respiratory infection.^{31,32}

In the U.S., asthma kills nine people per day, many of them children. When parents see that raw milk relieves asthma in their child, they go out of their way to obtain this magical product from greedy farmers.

There’s more: early studies indicate that raw milk given to growing animals confers longer and denser bones compared to pasteurized milk.³³ I’ve heard from several gals diagnosed with osteoporosis who started drinking raw milk daily and passed their bone density test two years later. Raw milk also contributes to strong, healthy teeth.³⁴ And many people who can’t tolerate pasteurized milk can enjoy raw milk without problems.³⁵ I’ve even had parents tell me that their children’s behavior improved after they made just one change in their diet—switching from pasteurized to raw milk.

FIGURE 3. UK per capita liquid milk consumption, 1974–2018



Source: Defra Family Food Survey

LOOKING TO THE FUTURE

For these and other reasons—such as the fact that raw milk tastes so good—raw milk sales are booming. Our website realmilk.com gets over four hundred thousand visits per month, most of them to the Raw Milk Finder page. When we set up realmilk.com in 1999, we had only a handful of listings; today, the website lists over three thousand places to get raw milk in the U.S., and there are many more not listed. Raw milk farmers tell me that they can't produce enough raw milk to meet the demand—which means that these greedy farmers aren't charging enough for it.

The truth is, pasteurization is a Rust Belt technology—a bit like hitting a pile of manure with a sledgehammer. It lets the industry get away with raising cows in filthy, crowded conditions, but it doesn't make milk any safer and it ruins Nature's perfect food. We have come a long way since the days of Nathan Straus. We have the technology to produce clean raw milk—stainless steel, rapid cooling, on-farm testing, an efficient nationwide cold chain—and get it to every growing child in the country.

Raw milk is the future. I predict that within twenty years, pasteurized milk will be a thing of the past. Small, grass-based dairy farms will proliferate to meet the demand, and no couple will start a family without making sure there is a supply of raw milk nearby. Health officials

like Professor Dunavan can protest all they want, but fewer and fewer people are listening. ☯

Sally Fallon Morell is founder of A Campaign for Real Milk and president of the Weston A. Price Foundation.

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TABLE 2. Destruction of nutrients by pasteurization

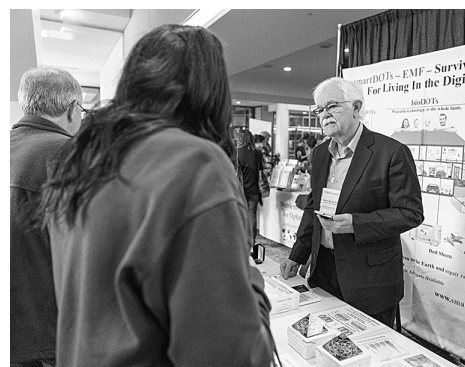
Vitamin C	Raw milk but not pasteurized can resolve scurvy. "Without doubt. . . the explosive increase in infantile scurvy during the latter part of the 19th century coincided with the advent of use of heated milks." ¹⁹
Calcium	Longer and denser bones on raw milk. (Source: Studies from Randleigh Farm.)
Folate	Carrier protein inactivated during pasteurization. ²⁰
Vitamin B12	Binding protein inactivated by pasteurization.
Vitamin B6	Animal studies indicate B6 poorly absorbed from pasteurized milk. (Source: Studies from Randleigh Farm.)
Vitamin B2	Completely destroyed. ²¹
Vitamin A	Beta-lactoglobulin, a heat-sensitive protein in milk, increases intestinal absorption of vitamin A. Heat degrades vitamin A. ^{22,23}
Vitamin D	Present in milk bound to lactoglobulins, pasteurization cuts assimilation in half. ²⁴
Iron	Lactoferrin, which contributes to iron assimilation, destroyed during pasteurization. Children on pasteurized milk tend to anemia.
Minerals	Bound to proteins inactivated by pasteurization; Lactobacilli, destroyed by pasteurization, enhance mineral absorption. ^{25,26}

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MORE GREAT EXHIBITORS AT WISE TRADITIONS 2023



CLOCKWISE FROM UPPER LEFT: Conference goers sample delicious cheese from Simply Grass Fed; attendees relax in infrared light from Sauna Space; readers browse the many interesting titles from Chelsea Green; Marcus Plourde explains how Smart Dots work; learning about the benefits of mineral-rich salt from Baja Gold; and the many choices from To Your Health Sprouted Flour Company.



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COLORADO - LEGAL RAW MILK SALES ON THE TABLE

2023 was a big year for the expansion and legalization of raw dairy sales in the state legislatures. The 2024 state legislative session could see more of the same; one state where an effort to legalize raw milk sales is underway is Colorado. Currently, only distribution of raw milk through herdshare agreements is legal in the state; Colorado is an outlier in the region—all other states in the Rocky Mountain time zone have legalized raw milk sales.

With Governor Jared Polis indicating he would sign a bill legalizing raw milk sales, the Water Resources and Agriculture Review Committee in the state General Assembly has drafted an interim committee bill to legalize raw milk sales. If the bill is going to get broad support from raw milk producers and consumers, its sponsor is going to have to amend several provisions in the current version.

The interim bill legalizes direct sales from the raw milk producers to consumers at the producer's place of business, at the consumer's residence, or at a farmers market or roadside market, if the producer registers with the state department of agriculture. That's favorable enough, but other provisions in the bill are potentially so onerous that many producers could decide not to make the transition from operating a herdshares program to directly selling raw milk.

For starters, the bill gives the state department of agriculture power to issue rules relating to recordkeeping and the storage, handling, labeling and transportation of raw milk beyond requirements already in the bill. The agriculture department has the power to embargo a producer's raw milk and to prohibit its sale during an investigation determining whether the producer has violated any requirements either of the bill or of the rules the department has issued. If the department finds the producer has committed violations, it can either (1) request that the attorney general or district attorney bring a criminal or civil action; or (2) "upon notice and an opportunity to be heard, impose a civil penalty in amount not to exceed \$1000 per violation. *Each container of raw milk sold in violation of this section constitutes a separate violation.* If the department determines that a producer has committed two or more separate violations within a twelve-month period, the department may suspend for a period of twelve months, the raw milk producer's registration...." [emphasis added].

In addition to the draconian penalties the bill prescribes, it also gives the department power to distribute "educational materials regarding the consumption of raw milk, which materials may include language, stating that there are no proven health benefits associated with the consumption of raw milk, but there are known harms associated with its consumption, such as severe infections."

As it now stands, the punitive measures in the bill could easily be a deterrent to producers changing from a herdshare operation to selling raw milk; there are no penalties contained in the Colorado herdshare law (Colorado Revised Statutes, section 25-5.5-117). There could be little or no increase in access to raw milk for Colorado consumers if the bill's content remains the same.

NEW MEXICO – RAW MILK SALES NOW LEGAL IN ALBUQUERQUE

On December 5, Mayor Tim Keller signed an ordinance legalizing raw milk sales in Albuquerque by state licensed producers, including at retail stores in the city. Albuquerque stores selling raw milk must hold a raw milk permit issued by the city's Environmental Health Department.

Retail sales of raw milk have long been legal in the rest of the state, but there has been a total ban on any sales in Albuquerque which has over one quarter of the state's population.

Activist Lissa Knudsen, with help from the Raw Milk Institute and local raw milk producer Desmet Dairy, was the driving force behind the new ordinance. The ordinance passed out of the Albuquerque city council's Finance and Government Operations Committee in October 2023 and the City Council the following month en route to the mayor's desk.

Now that the sale of raw milk in retail stores has expanded to a city with over half a million people, the number of licensed dairies in New Mexico should increase. There are few licensed raw milk dairies in the state at the present time.

Healthy Baby Gallery



I wanted to share about my son Fulton, born at home in July, 2023 weighing over nine pounds at birth. Now four months old, he weighs a hefty twenty-two pounds! We are avid believers in the Wise Traditions nutrition, starting at conception and even prior, so Fulton's nutrition started more than four months before conception with a prenatal diet of organ meats, homemade fermented foods, cage-free eggs, wild-caught fish and daily cod liver oil. At four months, Fulton has been enjoying breastmilk (on demand), a cage-free, farm-fresh egg yolk almost daily as well as cod liver oil daily, and he will try chicken liver when he turns six months. The way that he has been nourished shows in his looks and behavior—he is one strong baby in every way possible. How priceless it is to know how our food choices have formed him.



Lola and Luca were born in 2021 and 2023, respectively. Mom and dad were lucky to discover *Nourishing Traditions* and WAPF well before conceiving their children and are thrilled that the children are robust and thriving. First foods for both babies were breastmilk, cod liver oil, pastured egg yolks and raw cultured butter. Lola is very alert; her first word was “ball” and she was out of diapers completely by fourteen months. Luca, like Lola, is doing elimination communication and is equally bright with a charming gaze. Mom is deeply supported in her postpartum phase with ample liver, raw dairy and sunrise walks.

Local Chapters

Local chapters help you find locally-grown organic and biodynamic vegetables, fruits and grains; and raw milk products, butter, eggs, chicken and meat from pasture-fed animals. They also represent the Weston A. Price Foundation at local fairs and conferences and may host cooking classes, potluck dinners and other activities to help you learn to integrate properly prepared whole foods into your life. Local chapters may be able to put you in touch with health practitioners who share our philosophy and goals. **IMPORTANT WARNING: This chapter list is meant for individuals to contact a local chapter for food sources and for small farms or food producers to contact chapters near them. It is not for use by vendors and marketers. If you use the chapter email addresses to promote a product, even a free product or giveaway, we will not allow your company to advertise in *Wise Traditions* journal nor exhibit at our conference.**

ALABAMA

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WASHINGTON, DC CHAPTER
Yolanda Hawthorne, WAPF's member coordinator, put on her chef's hat and demonstrated making pâté at a DC chapter meeting in November. The pâté was enjoyed on sour-dough bread prepared by Emma Wise, DC co-chapter leader.



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LOCAL CHAPTER BASIC REQUIREMENTS

1. Create a food resource list of organic or biodynamic produce, milk products from pasture-fed livestock (preferably raw), pasture-fed eggs and livestock and properly produced whole foods in your area.
2. Provide a contact phone number to be listed on the website and in our quarterly magazine.
3. Provide Weston A. Price Foundation materials to inquirers, and make available as appropriate in local health food stores, libraries and service organizations and to health care practitioners.
4. Provide a yearly report of your local chapter activities.
5. Be a member in good standing of the Weston A. Price Foundation.
6. Sign a contract on the use of the Weston A. Price Foundation name and trademark.

OPTIONAL ACTIVITIES

1. Maintain a list of local health care practitioners who support the Foundation's teachings regarding diet and health.
2. Represent the Foundation at local conferences and fairs.
3. Organize social gatherings, such as support groups and pot luck dinners, to present the Weston A. Price Foundation philosophy and materials.
4. Present seminars, workshops and/or cooking classes featuring speakers from the Weston A. Price Foundation, or local speakers who support the Foundation's goals and philosophy.
5. Represent the Weston A. Price Foundation philosophy and goals to local media, governments and lawmakers.
6. Lobby for the elimination of laws that restrict access to locally produced and processed food (such as pasteurization laws) or that limit health freedoms in any way.
7. Publish a simple newsletter containing information and announcements for local chapter members.
8. Work with schools to provide curriculum materials and training for classes in physical education, human development and home economics.
9. Help the Foundation find outlets for the sale of its quarterly magazine.

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CHAPTER RESOURCES

Resources for chapter leaders can be accessed at westonaprice.org/local-chapters/chapter-resources, including our trifold brochures in Word format, the chapter handbook, PowerPoint presentations, business cards and more.

The Weston A. Price Foundation currently has 446 local chapters:
375 serve the District of Columbia and every state in the U.S.
except Delaware and West Virginia and 71 serve 26 other countries.

LOCAL CHAPTER CHAT GROUP

Our chapter leaders have a wonderful secure platform to carry on our many beneficial discussions, developed by Jay Hamilton-Roth, the husband of one of our chapter leaders. We encourage all chapter leaders and co-leaders to join if interested in learning and growing as leaders and individuals. To join, contact Maureen Diaz: outreach@westonaprice.org.

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The Shop Heard 'Round the World

Dedicated to Helping the Consumer Obtain Nutrient-Dense Foods and Accurate Nutrition Information

CO

Meadow Maid Foods, 100% grass-fed, grass-finished beef. On pasture year-round at the family ranch in WY. Production practices detailed on our website. Custom beef, Farmers markets, and food co-op in Fort Collins. meadowmaidfoods.com, (307) 534-2289.

Rafter W Ranch, Simla, CO. A family-owned ranch, practicing regenerative agriculture, bringing you nutrient-dense food. Our animals are **100% certified American Grass-fed**. Our beef is 30-day dry-aged. We also offer pasture-raised lamb and broiler chickens. Bones, offal (liver, tongue, oxtail, kidney, cheek, heart) and other choice cuts available. Bulk and piece orders. We are part of the Harvest Host. Pick-up locations along the Front Range and **NOW shipping** in CO. (719) 541-1002, rafterwranch.net.

GA

Broad River Beef, LLC, tender, flavorful Angus beef, 100% grass-finished, toxin-free and mineral rich. Cuts you actually use available in sizes that actually fit in your refrigerator. Produced seasonally with nature. Delivery available from Atlanta through northeast Georgia. broadriverbeef.com, (706) 310-8060.

ID

Idaho Food Coop specializes in providing pasture raised meats and wild caught fish. Beef and lamb are grass finished and our poultry is pasture raised. Pastured meats, organs and bones are available. Pickup locations are located throughout southern Idaho. idahofoodcoop.com.

IL

Honeysuckle Farm, Morris, Illinois is a family-owned and operated small-scale, pasture-based farm. We offer pastured eggs, chicken, turkey, and pork, raw honey, syrup, and raw A2 milk. Locally milled non-GMO feed, antibiotic and chemical-free. Order online at honeysucklefarm.net.

ORGANIC, HEIRLOOM, GRAINS, FLOURS, BAKED GOODS AND MEATS. Small family farm using heirloom varieties and growing methods then processing grains in a traditional manner. We accomplish this by doing everything on our farm in Dwight, Illinois. www.qualityorganic.net (815) 584-1850.

IN

DEVON BEEF, 100% grass fed, no antibiotics, no growth hormones. Full cow, 1/2 cow or individual cuts from my ranch in St. Leon, Indiana. Pastured pork, 100% antibiotic free, fed minimum amount of organic corn, 100% outdoors on pasture and woods. All meat USDA inspected. Information on how we raise our beef and pork plus important

health links at abundantgreenpastures.com or Mike at (513) 646-8739.

HILL N DALE, RED DEVON 100% grass fed beef, RED WATTLE non-gmo pork, ROBUST WHITE pastured chickens, BRONZE pastured turkeys. On Farm Store open six days a week, delivery available. 12683 South 300 East, North Manchester, IN (260) 578-7294.

MA

Many Hands Organic Farm in Barre, MA. All products certified organic and free range. Lard, pork, chicken and turkey stocks, pork, chicken, turkey and 26 weeks of CSA. No till, nutrient dense. mhof.net; (978) 355-2853; farm@mhof.net.

MD

Nick's Organic Farm, since 1979 offering quality products to Washington, DC, suburban MD, No. VA, Baltimore and Frederick areas. 100% grass-fed beef (no grain ever), pastured chicken, turkey, eggs. Using a regenerative 12 year crop rotation, we constantly move our livestock to fresh pastures to build our soils. Our animals receive only organic feed raised on our farm, no hormones, no antibiotics, no animal by-products, no GMOs. Beef and poultry liver, organ meats, fat, and bones, chicken/turkey feet, beef sausage and jerky. Hay, straw, poultry feeds, food grade grains, popcorn, stone ground heirloom cornmeal (301) 983-2167; nicksorganicfarm.com; nicksorganicfarm@comcast.net. **JOIN our mailing list** to receive **order forms** and an invitation to our annual **Buckeystown Farm Tour**.

100% soy-free chicken, eggs, pork and beef. Chicken livers, chicken feet and heads. Bacon and sausage. Raw pet milk. Raw milk blue and cheddar cheese by cheesemaker Sally Fallon Morell. **Will ship** whole cheese wheels. Southern Maryland, within 1 hour of downtown Annapolis and Washington, DC. Saturday farm tours. Store open Thursday and Friday 10-6, Saturday 10-4 and by appointment. P. A. Bowen Farmstead, 15701 Doctor Bowen Road, Brandywine, MD. (301) 579-2727, pabowenfarmstead.com.

MN

Farm On Wheels offers animals raised green grass-fed & organic. USDA inspected. Nutrient-dense beef, lamb, chicken, eggs, turkey, goose, duck, and pork, no corn or soy or GMOs. Farmers Market year around in St. Paul, Prior Lake. Linda (507) 789-6679, farmonwheels.net, farm_on_wheels@live.com.

MO

1984Farms.com - Regenerative farm in Atlanta, Missouri, providing pastured-raised/finished beef, lamb and pastured corn/soy-free pork. Shipping weekly nation-

wide. No synthetic or toxic chemicals used. Order online and read more information on our values and methods. Kerissa info@1984farms.com, (435) 224-4593

NC

Little Way Farm, Siler City, NC is a family-owned farm, practicing regenerative agriculture and operating on a human scale. We offer 100% grass-fed and grass-finished beef and lamb, woodland-raised pork, pasture-raised poultry and eggs, wild caught seafood, and 100% natural and raw honey. We follow intensive rotational grazing practices, with no hormones, antibiotics, GMOs, or pesticides. Shipping available nationwide, as well as home delivery and local pick-ups in central NC. Order online at littlewayfarmsilercity.com.

NY

Dutch Meadows brings you the finest in high-quality grass-fed meats and organic dairy products, raised in harmony with the land. Order online and choose from hundreds of farm products, **WE SHIP**. Convenient pick-up locations in NYC. (717) 442-9208 info@dutchmeadowsfarm.com - DutchMeadowsFarm.com.

Grass fed Farm Fresh food to help you achieve vibrant health by enjoying high quality, nutritious, 100% grass fed raw dairy from sheep and Jersey cows. 100% grass fed/finished beef and lamb, Soy Free pasture raised pork, turkey and chicken, and lots more. Order online and utilize our convenient home delivery or pick up locations. Shop farmmatch.com/pleasantpastures or call (717) 768-3437.

OH

COPIA FARM, Dan & Caitlin, Short drive from Columbus, Johnstown Ohio. Farm store open daily, 9 am-7 pm. Raw milk herdshares, grass-fed meats, pasture-raised eggs, organic produce, organic sourdough bread & more! Regenerative, GMO-free, organic, paleo. (614) 915-9269, CopiaOhio.com.

Sugartree Ridge Grassfed Herdshare/PMA, located 60 miles east of Cincinnati in Highland County. We deliver 100% grass-fed milk, optional A2-A2 milk and many other products to sixteen delivery sites in Cincinnati. Farm and contact address is: Scott Richardson, STRG Herdshare 6851 Fair Ridge Road, Hillsboro, OH 45133-9548.

OR

Grass-based biodynamic raw milk dairy offering Jersey Hi-creamline milk, cream, golden butter, cottage cheese and aged cheeses. Soy-free veal and pork seasonally. On farm sales and membership club. **Can ship**. Sherry and Walt (541) 267-0699.

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PA

Dutch Meadows brings you the finest in high-quality grass-fed meats and organic dairy products, raised in harmony with the land. Order online and choose from hundreds of farm products, **WE SHIP**. Visit our farm store. 694 Country Lane Paradise, PA. (717) 442-9208 info@dutchmeadowsfarm.com – DutchMeadowsFarm.com.

GAP VIEW FARM MARKET Raw milk, raw milk cheese, cream butter, eggs, including duck eggs and fresh vegetables from our chemical free farm. Call (484) 667-1382 or visit our farm market in the heart of Lancaster County, PA at 5230 Newport Rd, Gap, PA 17527.

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Raw milk cheese from our grass-fed Jerseys, made on our family farm with Celtic sea salt. Cows are fed no grains. Also grass-fed beef and pastured chickens, turkeys and eggs. All soy-free, no hormones or synthetics. On-farm sales, **will ship cheese**. Wil-Ar Farm, Newville, PA (717) 776-6552.

Visit our farm and choose from our selection of grassfed beef and lamb, and pastured soy-free pork, chicken and eggs. Hours: Wednesday and Saturday 9 am-11 am; Friday 3 pm-7 pm. **We ship**. Locust Grove Farm, 619 Locust Grove Road, Port Trevorton, Pennsylvania 17864.

Pastured duck and quail eggs, free of GMOs, soy and chemicals, at Quackin' Egg Hollow, New Holland, PA. Chicken egg intolerant? Quail eggs have anti-allergic, anti-inflammatory and anti-histamine properties! **We ship unwashed eggs**. Call or text: (717) 656-0423. beyondglutenfreecooking.com.

Enjoy eggs from ducks that are on better pastures. Safe nutrition, direct from the wilds of God's creation. Call or text Cleason Weaver at 717-706-5961 to order or visit: 501 Shippensburg Rd. Newville, PA 17241.

TN

Echo Valley Farm, Madisonville, Tennessee Organic grass fed, herd shares for raw milk, raw cream, raw butter, raw yogurt, raw kefir, beef and raw pastured free-range eggs. Our herd share owners have enjoyed a 100% safety record for over 15 years. (865) 399-8320 www.echovalleyfarms.net.

VA

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WY

Meadow Maid Foods, 100% grass-fed, grass-finished beef. On pasture year-round at the family ranch in Goshen County. Production practices detailed on our website. Custom beef, Cheyenne farmers markets and local delivery. (307) 534-2289, meadowmaidfoods.com!!

APPRENTICE/EMPLOYMENT

GARDENER/COOK Organic regenerative ranch near Olympia Washington seeking seasonal gardener/cook through end of harvest. Room, board, stipend, travel expenses. Email qualifications and interest to Lawren@wellaroo.com.

Internships: 300-acre family farm in Live Oak, Florida with 20 years of success and over a half million in gross sales wants to share their success secrets. We have on-farm housing to rent and classes in butchery, cow and goat milking, pastured poultry, pigs, permaculture, gardening, silvopasture and broad acre food forest, and more. We offer internships with hands-on experience for a weekend, week long, month or 6-months. Contact us for prices and bookings thisisdennis@startmail.com.

MILKER AND FARM HAND Organic regenerative ranch near Olympia, Washington seeking seasonal cow milker through end of fall. Room, board, stipend, travel expenses. Email qualifications and interests to Lawren@wellaroo.com.

Praire foods is seeking a marketer. We are a group of plain select farmers currently growing and shipping Dairy beef pork chicken and eggs. We are seeking a dedicated individual that is passionate about healthy food to create and manage a website for us (570) 855-3715.

Temple Wilton Community Farm in Wilton, NH is seeking aspiring or experienced vegetable farmer apprentices for the 2023 season. We are one of the country's two oldest CSA farms, offering organic vegetables, grass-fed dairy and cheese from our on-site creamery. Apprentices will be paid monthly

and offered housing, food, and dairy from April-November. Learn biodynamic, regenerative, and no-till farming methods mostly done by hand on our 4-acres of cultivated land. For more information, visit twcfarm.com or email blanknoriega@gmail.com with a brief resume and statement of interest. We look forward to growing with you!

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DVDS/ON-LINE VIDEOS/BOOKS

DVD "Nourishing Our Children" recently launched a DVD that may be used for one's self-education or to present to an audience. You will learn how to nourish rather than merely feed your family. nourishingourchildren.org/DVD-Wise.html **Free shipping!**

For sale: 67 Wise Traditions journals; 2001-2020 in good to excellent condition. Will sell all for \$400 including shipping (OBO). Missing W2003, Su2005, W2007, Su2009 and F2012. (540) 626-5287, ldt.pwp@gmail.com.

View all UK & Irish WAPF conference videos, many European speakers never seen in the USA, in our large and growing video library that will host and fund future events. Subscribe for just £2 a month. (about \$2.50). <https://westonaprice.london>.

FARMING VENTURE/LEASE

Grassroots Farmers (GRF) is leading a life changing Colorado movement cultivating local organic sustainable solutions through co-farming 41 acres in southern Colorado. We are looking for farming nonprofits and organizations to bring into the folds as we break ground on our 6 acre Fountain property as proof of concept as we expand into our 35 acre Las Animas property. We are starting with two 1,024 square feet structures to provide farmer lodging/housing, community bathrooms and showers in April weather dependent. Sign up for April Volunteer Sundays here: <https://www.grassrootsfarmers.org/april-build-volunteer-sign-up> We are a new birthing nonprofit farm, donations

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are graciously accepted! Here is our donation link: <https://www.grassrootsfarmers.org/donate> We are looking for a storage container(s) to start growing chicken fodder feed. If anyone has a connection/access/wanting to get rid of theirs we'd love to connect with you.

ISO organic/biodynamic/regenerative farm lease. We are a WAPF family of 5 seeking to manage/lease a working organic farm which includes animals. We have extensive experience in both Costa Rica and the Northeastern United States where we have owned large farms. Please contact us at crgreatescape@gmail.com if interested. THANK YOU!

HEALTHY FOOD/PRODUCTS

Beyond organic, regenerative family farm selling raw goat milk, yogurt, kefir and cheese locally in Lake County Florida, along with probiotic skincare using live cultured yogurt, extracts and herbs from our chemical-free farm. We ship our skincare products. www.farmercrafted.com farmercrafted@gmail.com.

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RESEARCH/OUTREACH

Do you have a child with a chronic health or developmental condition? The Documenting Hope FLIGHTTM Study is recruiting participants in Northern Virginia! Nutritious food, doctor/practitioner visits, supplements,

lab tests, etc. provided at no cost. To learn more: documentinghope.com/flight-study.

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Seeking adoption connection. We wish to welcome a baby into our family and rural Wisconsin homestead. We follow WAPF health practices and are looking for a birth mother or adoption agency with similar values. Please send responses or suggestions to Gabby at wiseadoption@gmail.com.

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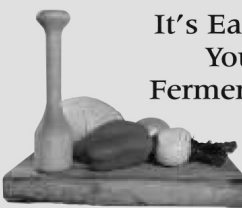


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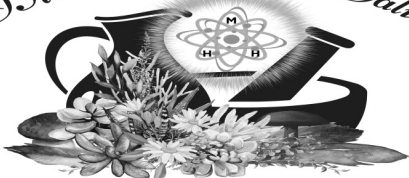
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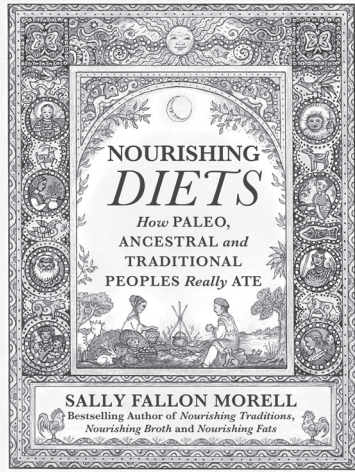


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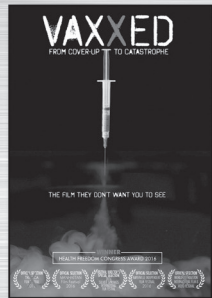
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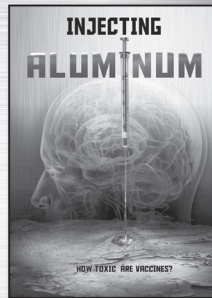
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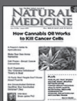
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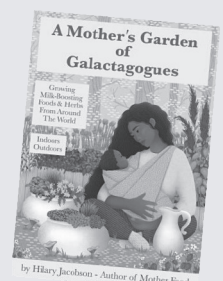
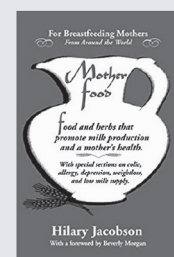
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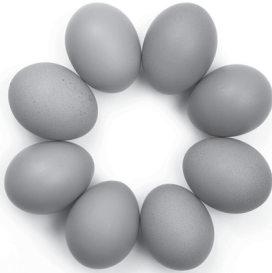
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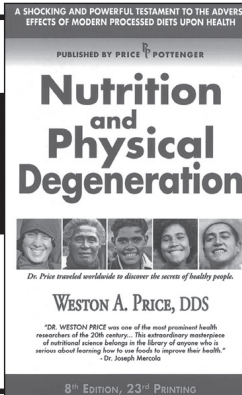
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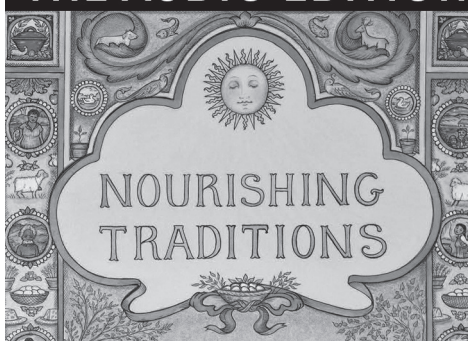


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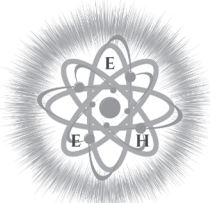
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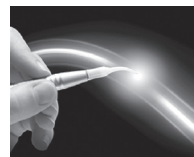


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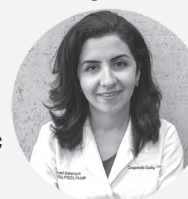
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