



Wise Traditions

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IN FOOD, FARMING AND THE HEALING ARTS

A PUBLICATION OF THE WESTON A. PRICE FOUNDATION®



Education ♦ Research ♦ Activism
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Volume 22 Number 4

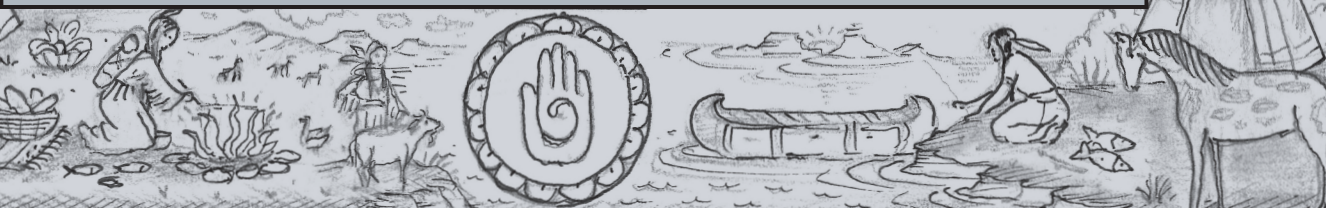
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Volume 22 Number 4

Winter 2021

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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.

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President's Message

The mood was upbeat at Wise Traditions 2021, with full lecture halls, fascinating speakers, delicious food and hugs all round. But the backdrop was somber as the Covid nightmare rolls on. As David Martin stated in an opening presentation, “We are about to launch the largest ritual sacrifice of children the world has ever known.” Indeed, parents are lining up to make sure their children get the jab—see the letter on page 5—an ineffective and highly dangerous injection.

Not all the speakers agreed with our stance that the illness called Covid is caused principally by exposure to electromagnetic frequencies (EMFs), especially EMFs from the newly deployed fifth-generation (5G) telecommunications systems and by Wi-Fi in houses and buildings—and not by a virus. Several speakers addressed the non-existence of the Covid “virus” (Andrew Kaufman, MD, and myself) and the dangers of non-native electromagnetic frequencies (Beverly Rubik, PhD, and Diana Jabour). Others still supported the virus narrative, but leaving these differences aside, all were agreed that measures taken to “stop the spread”—masking, social distancing and especially forced vaccinations—are highly dangerous and only make matters worse, especially as such measures negate all our liberties and have the potential to turn democratic nations into highly divided police states—indeed this has already happened in Australia, Lithuania, Germany, Austria and other European countries.

When these measures don’t work—indeed, they haven’t worked—the ongoing high rate of illness is blamed on new “scariants” for which additional vaccines and boosters are needed. But let’s pretend that public pressure puts an end to masks and vaccines, then what? Neither ongoing vaccine campaigns nor vaccine avoidance will end the pandemic, because they do not address the cause. Both the epidemiology and the biology point to microwave radiation, and until we learn to mitigate the effects and protect ourselves, the disease will continue.

The challenge is to change the public consciousness so that the public rejects the germ theory and recognizes the fact that disease has three causes: poisons (including EMF poison), nutritional deficiencies and injury. To that end, the Foundation has created a new flyer entitled, “Covid-19: Contagious Virus or 5G Microwave Technology.” (See page 38.) You can order these online or call the Foundation to request them—already our members are giving them out to friends, family and colleagues, or just leaving them in public places. Please join us in this educational campaign! 

Letters

HUGS

I never thought I was the huggy kissy kind, but the hugs I got and gave at the conference were simply the best part of the show. Worth a million bucks. I cannot tell you how joyful it was to hug hundreds of like-minded souls, smile, joke, swap horror stories of idiocy and eat good food. If you'd had no talks, no amazing speakers, no awesome topics, it would've still been worth every penny of the admission. I am reinvigorated and grateful.

Sushama Gokhale, Chapter Leader
Sonoma County, California

TESTS ARE USELESS

In a follow-up to my article "Questioning Covid" (Summer, 2021), I feel it necessary to comment on the uselessness of the tests used for "diagnosing" the illness. As I mentioned, I saw patients test negative multiple times who passed away in two or three days with

Covid symptoms (such as interstitial pneumonia), resistant to any therapy. Many other physicians have observed the same phenomena. For example, researchers in China looked at over one thousand cases and found that the chest CT, not the PCR test, was the most accurate tool for diagnosis of coronavirus disease Covid-19.¹ Other studies came to the same conclusion,^{2,3,4} finding many false negatives with the PCR test.

What is the PCR really testing? If someone is having an infection so severe as to die from it, how can multiple PCR tests be negative? Who checked how many so-called false negatives were found for the many people who passed away without being tested and still were considered Covid deaths? If we understand that Covid symptoms are due to EMF poisoning and the "viral" infection is in fact a surge of exosomes for overcoming the poisoning, then we realize that we might not

find them when the patient is not able to recover and his cells are not able to produce the healing exosomes.

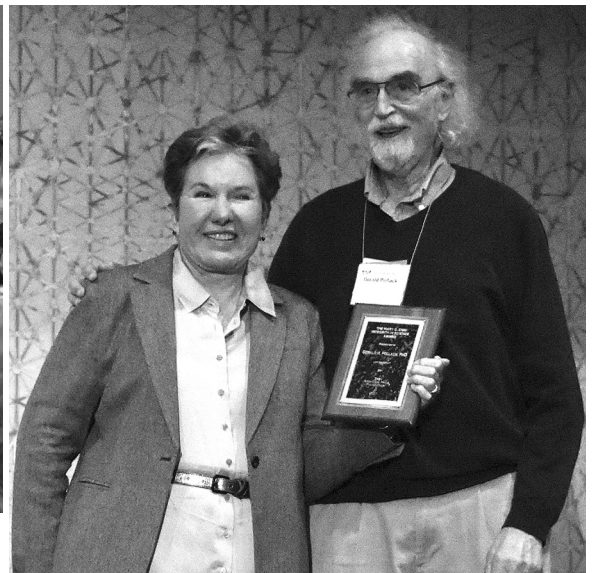
The antibody tests are also not so accurate, as this so-called virus is supposed to follow a new pattern. While viral infections are said to cause the appearance of IgM in the blood before the IgG, this so-called virus sometimes gives IgG before IgM. Can we really believe the immunology has been turned upside down by this doubtful so-called virus? I saw a patient whose IgM went up again eight months after his illness, without any new symptom since then, so he took a PCR test, which was negative, of course. So what was the IgM doing in his blood?

Physicians have noticed that positive IgM are found in healthy people with a negative PCR test, so many labs now only test IgG. Everything that does not make sense in this tale is either ignored or justified as an "exception"!

GERALD POLLACK, PHD, WINS THE 2021 MARY G. ENIG INTEGRITY IN SCIENCE AWARD



A packed house listens with rapt attention to Gerald Pollack as he explains the fourth state of water.





Letters



I have seen patients with Covid symptoms and a positive PCR test, but their blood test did not show any difference in white blood cell count (no rise, no decrease, just normal) throughout the whole course of the disease.

Despite the total absence of serological signs indicating viral infection, people still like to believe that there is a virus—not to mention the well-documented cases of patients with Covid who did not develop any antibodies, and the people who never got sick even though they had well-documented sky-high levels of antibodies. These anomalies are justified by saying that the antibodies do not last.

At this point I really feel there is nothing we can say to make people change their minds, even if the whole story is full of contradictions and goes against any biological law. They have decided that they believe in the virus theory no matter what, and if the tiny spiky ball could talk and scream, “I am not a virus,” they might think it was probably threatened to say so to hide its true nature!

Meanwhile, I continue to find connections between EMF exposure and Covid. One patient presented with sudden vomiting, diarrhea, fever, cough and extreme fatigue—all Covid symptoms—after her husband put a modem in their bedroom. Once it was moved out again, she recovered. She had suffered from an episode of adrenal insufficiency due to EMF exposure.

One couple came to me complaining that the wife had experienced a lack of her periods for a few months but was not pregnant, while the husband had problems sleeping and often woke

up with pain over the kidneys. I suggested turning off the modem at night but when he went home, he decided to move the modem outside the window (protected in a box). Since then the wife has had regular periods and his sleep greatly improved. EMF affecting the adrenal glands can also impact the reproductive organs, as steroid hormones are partially synthesized in the adrenal cortex.

The point is that we will never be able to help people until we recognize the cause of this disease: exposure to EMF and not a dangerous virus!

Ilana Nurpi, MD
Italy

1. <https://pubmed.ncbi.nlm.nih.gov/32101510/>
2. <https://www.ilsecoloxix.it/savona/2020/04/29/news/albenga-studentessa-di-17-anni-muore-di-polmonite-ma-e-giallo-il-tampone-ha-escluso-il-virus-1.38780260>
3. <https://www.ilgiornale.it/news/cronache/coronavirus-118-casi-covid-polmonite-e-tampone-negativo-1863644.html>
4. <https://pubmed.ncbi.nlm.nih.gov/32502334/>

OFF THE CHARTS

The telecommunications industry began installing 5G in Sioux Falls in early 2020, and continued the buildout throughout the year. Now, 5G transmitters are all over the downtown area. I decided to do some measurements of the 5G power density using a Latnex HF-B8G Triple Axis RF/High Frequency Meter.

Keep in mind that in the U.S., authorities have stated that elevated risk occurs with a prolonged exposure to 300 or more millivolts per meter. In Canada, the authorities consider prolonged exposure to 70 millivolts per meter as a health risk. Electro-

hypersensitive folks are at risk with exposures of 10 or fewer millivolts per meter.

Here are my findings:

1. School parking lot during peak traffic period, about one block away from a 5G tower: 4095 millivolts per meter.
2. Across the street from a hospital during average traffic levels: 1807.2 millivolts per meter.
3. Downtown in the restaurant area with outdoor seating, where 5G emitters mounted on light poles, about ten to twelve feet off the ground: 4590 millivolts per meter.

All three readings are much higher than the number the U.S. considers safe for prolonged exposure. Driving through town, the typical range was 450-2500, with higher values in areas with more traffic and more people (and more cell phones).

David Wetzel
Sioux Falls, South Dakota

CLARIFICATION

I enjoyed the excellent article, “Questioning Covid” by Ilana Nurpi, MD (Summer, 2021) and would like to offer a clarification that may be of help to readers regarding the term “5G” as used in the article.

When people speak of 5G with regard to cell phone towers and the latest “smart” phones, the term 5G relates to the fifth-generation cell-phone infrastructure. In this context 5G relates to the deployment of new (novel) frequencies, modulation schemes and beam-forming technologies being built on top



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of (in addition to) the current cell phone infrastructure. The 5G frequencies range from current 4G frequencies through 53 GHz.

When we speak of 5G with regard to Wi-Fi, it's something altogether different. Wi-Fi is a method of connecting one device to another device, not using cell phone infrastructure—for example, connecting your computer to an Internet router. The first generation of Wi-Fi operated at a frequency range around 2.4 gigahertz. A few years ago, Wi-Fi was made available on a new set of frequencies around 5 gigahertz. In order to differentiate between routers running legacy 2.4 gigahertz Wi-Fi and newer 5 gigahertz Wi-Fi, people began naming their new 5 gigahertz routers with names that included “5G”. So Bob's home router or his local cafe router might be named Bob 5G, Cafe 5G, on a list of available Wi-Fi routers. These frequencies overlap a portion of the fifth-generation cellular infrastructure and are regarded as microwave radiation.

In Dr. Nurpi's article on page 17 under the section labeled “The 5G Connection,” I believe she is conflating the two types of 5G discussed above. The article reads, “I watched a video by Dr. Thomas Cowan, in which he said that the pandemic was due to the electrification of the earth, especially the newly deployed 5G technology. I wondered how Wi-Fi could cause such a thing.” I believe Dr. Cowan was speaking of 5th-generation cell phone deployment, not Wi-Fi.

All cell phone generations, 1G through 5G, as well as all Wi-Fi implementations generate man-made

non-ionizing radiation which is known to affect single cell organisms, plants, insects, animals, and humans. 5G cellular with its extended frequency range and beam-forming ability may be even worse. Whether it was 5G or Wi-Fi that was turned on, microwave radiation should have no place in the nursing homes in Italy (or anywhere), with such elderly and vulnerable patients.

Keith Cutter

EMF and Remediation Consultant
EMF Remedy, emfremedy.com
Sagle, Idaho

MADNESS

It's madness around here. Every single one of my daughter's twelve-year-old friends has been taken to the vaccination center by their parents to get the Covid vaccine. The only ones that haven't got it yet are under twelve.

So it's not that school is rolling it out and parents feel obligated; they are getting a blue letter from National Health Service (addressed to the child not the parent) for a vaccination appointment, and they are obediently driving their child to the vaccine center for that appointment. I find that astounding.

One parent took her child to the vax center as part of her twelfth birthday celebration on the girl's birthday, ahead of getting the blue letter (I was speechless hearing that). The vaccine centre staff was more than obliging to inject the child without an appointment.

Some parents are actually aware that kids aren't at risk for Covid, but take them in anyway. I heard one mother say, “Even if it's a one in a million, I don't want my child to be that one in

a million.” Another said that although she knows kids aren't at risk, she's worried she'll catch Covid from her child because schools are so dirty—a friend in another town said the same. These are both fit healthy women in their late forties, with healthy children. Another said she encouraged her twelve-year-old child to get it in case she gave Covid to her frail eighty-year-old mother.

One parent said she can't wait to get her children, both under twelve, vaccinated so they're no longer at risk from Covid as a family. She was lamenting that her younger child is in lower primary school so it will be a while before the “paperwork comes through” for that age group—like it's just a matter of bureaucracy that government paper-pushers are preventing from happening.

Around the time my daughter was born, there was a massive uptick in the birthrate in the UK. Thirteen people I know were pregnant the year I was pregnant. Out of that, there isn't a single one who isn't vaccinating their twelve-to thirteen-year-olds. It's heartbreaking.

When the subject comes up, I tend not to say anything as people react so badly to it, and I do feel rather outnumbered. On top of which, my daughter is desperate to go incognito (worrying about bullying and so on). Most of these I hear when parents are speaking in a group, where I stay quiet.

I did speak to one of the mothers though, the one who said she didn't want her children to be one-in-a-million Covid deaths—these are children who are in athletic clubs, super fit and healthy and eat well. I know her a bit more than the other parents. I said to her, but what if the vaccine risk is higher



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for the child—children have miniscule Covid risk—isn't it about risk-benefit ratio? She didn't answer me and in that silence, I felt she was thinking, "They wouldn't do that. If the risk-benefit ratio is on the side of not taking the vax, media and doctors would be saying so. And anyway you told me not to give my kids HPV vaccine so you are clearly an antivaxxer." To give credit, unlike some friends and family, I have tried speaking to her about this, and she hasn't shunned me for my choices.

Now, the Joint Committee on Vaccination and Immunisation (JCVI), which had balked at approving the first dose for twelve- to fifteen-year-olds, has done a total turn-around and passed the second dose for this age group. I suspect the parents I know are still none the wiser, and will dutifully present their kids for the second shot, but it's after the second shot that the highest rates of myo- and pericarditis have been observed in this age group, not to mention the myriad other adverse events being reported daily. I worry for these children, that by the time their parents see reality for what it is, it will be too late for them.

Urara Donohoe, Chapter Leader
Scotland Central Belt Chapter

CRAVINGS

Even though my diet is really good, with raw milk, pastured eggs, sauerkraut and bone broth, I came down with Covid. I just kept drinking raw milk, and ate homemade chicken soup, but a half a bowl a day was all I could eat. What I was really craving was homemade ice cream. Finally I was able to clear a space in my kitchen to

make some. My mouth was just freezing as I ate it, but it tasted so good to me! Not only in its taste, but the way it made my body feel. I ate a serving of it every day until it was gone. I also craved juicy hamburgers!

Extreme fatigue and lack of energy were my worst symptoms, and that's why I had to clear a space in my kitchen, for I didn't have the energy to clean up after just heating a bowl of soup. The gamut of symptoms from person to person has been really interesting, and I appreciated the article "Questioning Covid" (Summer, 2021) by the Italian doctor who thought the symptoms one experienced had a lot to do with underlying conditions and what medications the patients were taking. Since I don't have any other underlying conditions, and don't take any medicines, I thought maybe that was why I only had the most basic symptoms and didn't have any headaches, chills (even though I had a fever), loss of taste and smell, vomiting and diarrhea, crushed glass-in-my-lungs feeling, Covid toes, or "fizzing." However, the fatigue was bad enough. I healed up fine, although it's taken some time to regain my strength and energy, but I'm almost back to my normal self.

So, if 5G has been this bad, I can't imagine what the launching of 6G is going to be like; and I understand they're close to launching it as well. I can't figure out where I was exposed to that much of those frequencies, for since cell phones don't work at my house, I rarely ever use one; I have really pitiful Internet service out here still, and the GPS typically doesn't find me either. I do work at a spa on the weekends, but it's not close to town, and cell service is

not very good inside the building there either, but it does have good Internet service. I haven't been in any airports, or even in other large gatherings, except my nephew's wedding, but that was back in May. However, I have been in different stores maybe once a week. The wellness center where I swim just recently kicked in with 24-hour service that involves technology, so maybe that had something to do with it. Anyway, I'm glad to be on the other side of that "dratted mess" as my mother called it.

Susan Ledbetter
Waverly, Alabama

It's hard to know when and where one is exposed to 5G, or even intense Wi-Fi inside of buildings. And remember that now 5G is being beamed from satellites.

HOMEOPATHICS FOR COVID

Each issue I wait for you to have information on treating Covid illnesses with homeopathic remedies. Regardless of cause, homeopathic remedies treat symptoms. Homeopathy was very successfully used to treat patients in the 1918 Spanish Flu pandemic. Non-homeopathic doctors were so jealous of the success and popularity of homeopathic doctors that they formed the AMA to drive them out of business and they almost did! I hope you'll provide this information in an article.

Annie Prevost
Bellingham, Washington

Your wish is our command! See the article on page 51.

AMAZON SIDEWALK

Amazon Sidewalk went live on

Letters

June 8. If you have not already done so, please turn this feature off today. There are many reasons to do so. Amazon Sidewalk will take a chunk of your bandwidth and give it to others. This will increase toxic electromog both indoors and outdoors. Wireless radiation brings health risks to you, your loved ones, your pets and your neighbors; choose cables and adapters instead and turn off the wireless antennas.

For those already electrically sensitive, they will become shut-ins with no safe public place to go; even a walk in their own neighborhoods will make them sick. Radiofrequency radiation is very harmful to our pollinators, plants, people and planet, too.

Angela Tsiang
St. Paul, Minnesota

A NATURAL BEAUTY

In honor of my mother's passing today (she was ninety-one and in hospice), I'm sharing this photo of her as a teenager. Look at those teeth! And her wide-set eyes.

Her mother grew up on a farm in Kansas and ate the animals they raised, as well as lots of raw milk and cream and eggs. My mother didn't have as good a diet, but her mother's diet certainly shows in her face. She was a beauty—never wore glasses, no hearing aid, no false teeth. She did develop dementia, though—too many flu shots!

Lynda Smith
San Francisco, California

THE PIONEER COOKBOOK

I read with interest your comments on the *Pioneer Cookbook* of the Australian Outback (Summer, 2021). I do

have one of these books and have used it quite a bit.

My father's family were pioneers who settled in Mirboo North in 1901 when my dad and his twin were two years old. This is a good rainfall area, among tall trees and good soil, in which as soon as the trees were cleared back enough, they made a vegetable garden and planted fruit trees. Monthly trips were made six miles into town to buy supplies and collect mail.

With no refrigeration, for a family



of ten children they killed older lambs (called two-tooths) weekly and in autumn when cool enough a yearling beef was meat for winter, using every part of the animal. Pigs were kept for using up the skim milk but I recall no mention of eating pork. Chickens were kept for eggs and meat but Dad said they were "too much work for too little to eat."

We milked thirty cows, with help from the children milking before and after school. They had on the table at

every meal two jugs each of fresh and sour milk, plus fresh and sour cream and lots of butter, fresh and cultured.

The family did not eat many sweet foods other than something with afternoon tea, and some jams and preserved jars of fruit. Cake was a birthday treat, and we had Christmas fruit cake, of course.

Everything that was grown was used, preserved or given away; nothing was ever wasted.

When making pudding or cake recipes, I always used half the amount of sugar called for.

I can see the early difficulty of feeding a family especially in the dry years—in Australia we have a wet season for around twenty years then dry for twenty years, which lasts much longer inland adding more dry years.

Bev Smith
Fish Creek, Australia

PRISON LAB RATS

I can only hope the citizens of this great country will hear my words: for the prisoner in the Illinois prison system has become the "lab rat." The study has been going on for eighteen years now. The results should send a bolt of fear through every parent who is middle class, or just surviving on the poverty line. For the institutionalized persons in the state nursing homes, the low-income kids who eat that free lunch at school, and the men and women in our county jails and state prisons are paying the cost.

I have spent the last twenty-eight years in the Illinois penal system. I have walked the walk and talked the talk. My record and expertise to speak

Letters

on this American experiment, can be verified by looking me up on the Illinois Department of Corrections website.

Until convicted felon Rod Blagojevich got into office as the governor of Illinois, we ate regular food—beef, pork, chicken, turkey, fish and any other animal that made its way into the prison kitchens. But slick Blago had the pay-to-play syndrome. So he made a deal with the biggest producer of soybeans, Archer Daniel Midland (ADM), located in Decatur, Illinois.

By January 2003, soy was being fed to all the men in the Menard maximum security prison in Chester, Illinois. It was at the Menard prison that the experiment started. All the real meat, except chicken, was removed from the prison diet. It was replaced with poultry scraps and the soybean sludge from ADM in Decatur. By 2005, the leftover bean, after ADM removed the oil, became the prison diet for all the men serving time in the Illinois penal facilities.

Notice that I say “men.” The women prisoners got the soy diet at first, but it made them all stop menstruating, so they reinstated a meat diet for them.

Many men started to get sick right away. Chronic constipation and digestive issues had the sick call lines overwhelming the Menard prison. The prison medical staff stated, “exercise more and drink more water.” So it was established within six months that there were drawbacks to the soy meat substitutes being made at the Illinois Prison Industries Plants.

It was the men serving long sentences, the men without money to supplement their diet from the prisoner

commissary, who experienced the long-term effects. It was around the ten-year mark that intestinal cancer cases began to show up; also thyroid disorders and thyroid cancer cases started to flare up.

I started to get sick in 2005. By 2008, I had proven that the soy diet was detrimental to my health. I was only able to do this with help from the Weston A. Price Foundation, discovered on the Internet by my family and friends. They matched my daily symptoms to the soy intake. I had developed Hashimoto’s thyroiditis disease and was prescribed a no-soy diet.

My medical no-soy diet was arbitrarily cancelled in April 2016. When I had to eat the soy meat substitute served—in order to survive—I got sick. Many men around me doing the long stretch were also getting sick. Cancer was rearing its ugly head a lot more by 2016.

In February 2020, I was transferred to the Illinois River Correctional Center. I reported to sick call immediately. For two years, from 2018, forward, I had been bleeding out of my bowels when I ate soy. But due to the Covid situation, I was denied treatment until

June 2021. Dr. Erin Bailey did a colonoscopy and found stage three colon cancer.

So since June 2021, I have been living in the infirmary off and on. In August, I became a resident of the infirmary. From here I have witnessed numerous men, serving long sentences like myself, getting colonoscopy procedures done. They are finding intestinal cancer! The results are not good. Thyroid cancer and thyroid disorders are also rampant in the men serving ten years or more.

These facts are easy to verify through the medical records of the prisoner population. I now face six months of chemotherapy after the surgery, to kill the cancer still in my intestines. The results are in. Soy as a meat substitute causes cancer. We are the lab rats who proved this. Learn from us.

Larry Harris
Canton, Illinois

GLYPHOSATE IN ORGANIC GRAINS

I would like to share with you something I learned while researching glyphosate in the food supply. If you go

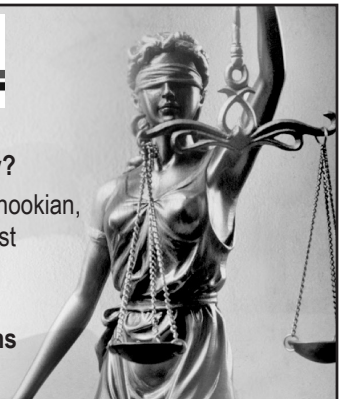
HEALTH FREEDOM

DEFENSE FUND

**Do you oppose forced medicine of any kind?
Do you believe you, and you alone, own your body?**

Health Freedom Defense Fund, founded by Leslie Manookian, producer of *The Greater Good* movie, is fighting against mask, test, and COVID vaccination mandates as well as immunity passports.

**Please support us in defending our health freedoms
at: healthfreedomdefense.org**



Letters

to healthytraditions.com and look under their Our Standards section, you will find that 80 percent of the food supply is contaminated, and there is not a single wheat or barley farm in this country that is glyphosate-free. The USDA allows farms to label their wheat and barley as organic if they did not spray their crops themselves, but because of over sprays and using the same processing facilities, organic wheat and barley can contain up to .06 percent glyphosate and still be considered organic. Healthy Traditions found a range between .03 percent and .06 percent glyphosate in organic wheat and barley, and the maximum allowed percentage in nonorganic is .07 percent! The website has a lot of eye-opening information that I think might interest you.

If we consider that we are what we eat, then imagine how toxic the meat, poultry and eggs are. The ones labeled organic are still eating large quantities of glyphosate in their feed. Since the body has a hard time getting rid of this toxin, it builds in these animals as DDT did in birds that ate poisoned insects. When we eat this meat, poultry and eggs, we are eating months of accumulated toxins. Of course, grass-fed animals are healthy but all poultry is fed large amounts of grain.

This was frustrating for me, to say the least, because I thought that I was giving my ducks organic grain. What

I do now is buy whole grains like barley, wheat and peas, and I sprout them before I feed my birds. This seems the most effective way of limiting the toxins that we are all eating. I also feed them tons of greens and vegetables from the garden.

Rachelle Garnitz
North San Juan, California

I LOVE LUCY TRIVIA

Thought you may enjoy this bit of trivia. I thought of WAPF principles when I watched this Season 2 Episode 21 of *I Love Lucy* with my daughter



some months back. What is captured in this scene is how average middle class Americans used to eat before all the propaganda against meat kicked in.

In the restaurant scene from the episode, Lucy keeps changing her mind about what she wants to eat for dinner. They all order meat dishes. Lucy cannot make up her mind and switches between the roast beef, lamb chops, and pork chops.

If you try to watch or purchase a

set of the episodes from Season 2, for example on Amazon, you will find that this episode is left out. There are others being censored as well.

Irina Hizgilov
Tenafly, New Jersey

A GROWING EXPERIENCE

When I first joined the Weston A. Price Foundation, I appreciated your wide range of views on a variety of topics, much of which seemed a bit controversial but most I already knew to be accurate. As the years have gone by, I find even the controversial to be true, and what I thought to be a bit radical is now timely and rational. It has been a good growing experience with you folks for me and I look forward to each new issue of the journal.

Tom Duke
Panama City,
Florida

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

ADVERSE EVENTS IN VAERS

As of October 2021, the numbers from the Vaccine Adverse Event Reporting System (VAERS) paint a dismal picture of Covid vaccine safety. The figures include over eight hundred thousand adverse events and over seventeen thousand deaths. VAERS representatives admit that fewer than 1 percent of adverse events are reported, which translates into over eighty million adverse events and close to two million deaths. (By comparison, the CDC reports about one million deaths per year for Covid, pneumonia and influenza combined.) Adverse events include disability, Bell's palsy, myocarditis, heart attacks and miscarriages (<https://openvaers.com/covid-data>). Sweden has suspended the Moderna shot indefinitely after many vaxxed patients, especially males, developed myocarditis, an inflammation of the heart muscle, and pericarditis, an inflammation of the sac around the heart. Finland, Iceland and Denmark have taken similar steps (westernjournal.com, October 21, 2021).

LOST BABIES

Regarding the side effect of miscarriage, a paper published in *The Lancet*, June 17, 2021 (pubmed.ncbi.nlm.nih.gov/33882218/) reveals that of one hundred twenty-seven women vaccinated in the first or second trimester, one hundred four had a spontaneous abortion, a rate of 82 percent. The authors hide these shocking numbers with a statistical sleight of hand, by including those vaccinated in the third trimester in their analysis, claiming the rate was only 12.6 percent. "Preliminary findings did not show obvious safety signals among pregnant persons who received mRNA Covid-19 vaccines," claim the authors. But if every pregnant American woman receives the Covid vaccines during the first twenty weeks of pregnancy, that would translate into the termination of over three million live births per year.

NOT WORKING

Not only are Covid vaccines not safe, they also don't work. For example, Ireland has the highest vaccination rate in Europe—with over 91 percent of the population over twelve years of age vaccinated—yet the country is seeing the highest number of patients in the hospital with Covid-19 since March. Notably Waterford City, with an adult population that is 99.7 percent vaccinated, has the highest rate of Covid-19

infection (*Irish News*, October 27, 2021). Other "vaccine-champion" countries with high vaccination rates, such as Gibraltar, Malta, Belgium, Singapore and the U.K., are seeing record mortality (globalresearch.com, October 22, 2021). In Taiwan, as of October 10, 2021, the deaths from Covid-19 vaccination exceeded deaths from Covid-19 for the first time (medicaltrend.org, October 10, 2021). About one hundred crew members on the HMS Queen Elizabeth, a Royal Navy aircraft carrier, contracted Covid-19, despite the whole crew receiving two vaccines (www.bbc.com/news/uk-57830617).

PLEASE DON'T LET THEM FLY

A U.S. Army doctor and specialist in aerospace medicine has asked Pentagon leaders to ground all pilots in all services who have received the Covid-19 vaccine. Lt. Col. Theresa Long has observed serious health problems develop in young, physically fit service members immediately following their vaccinations, including three pulmonary embolism events in flight crew members. "Use of mRNA vaccines in our fighting force presents a risk of undetermined magnitude," she argues (*American Military News*, September 29, 2021). Meanwhile, news is leaking out of pilots dying while flying commercial airliners. In mid-October, Dr. Jane Ruby claimed on the Stew Peters Show that a Delta Airlines pilot died in flight, shortly after the pilot had received a second dose of the Covid-19 vaccination. According to a Federal Aviation Administration (FAA) whistleblower, the Biden administration, the FAA and the airlines are covering up incidents such as this one to maintain the illusion that Covid-19 vaccines are safe and effective. According to him, two American Airline pilots in two weeks have perished in the cockpit, both within days of receiving their second dose of Covid vaccine, and he knows of at least twelve non-fatal incidents involving recently vaccinated pilots. "There is a systematic effort going on right now to prevent the public from knowing about pilots getting very ill or very dead in the air. The airlines don't want to lose money, and the administration doesn't want the public to know the true dangers of the vaccine" (adinakutnicki.com, November 1, 2021). The public doesn't know about these incidents, but airline personnel certainly do, which may explain the fierce resistance of employees at Southwest and American Airlines to getting vaccinated and the fact that these airlines are now allowing exemptions to the jab.

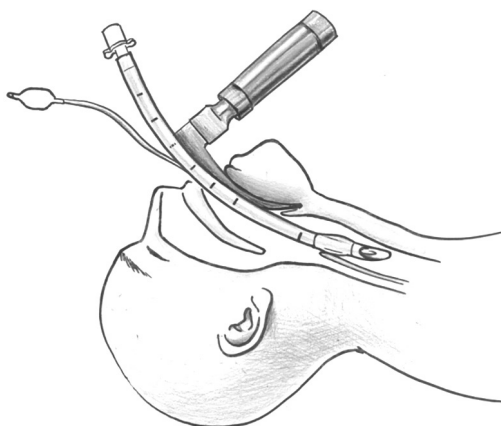
Caustic Commentary

HOSPITAL HORRORS

Many of us have heard of or experienced horrendous treatment of loved ones by hospital staff, but not many have heard of the Complete Lives System, developed by Dr. Ezekiel Emanuel, senior White House health policy advisor to Obama and advisor to Joe Biden about Covid-19. In a 2009 *Lancet* paper, Emanuel explained, “When implemented, the complete lives system produces a priority curve on which individuals aged between roughly 15 and 40 get the most substantial chance, whereas the youngest and oldest people get chances that are attenuated” (pubmed.ncbi.nlm.nih.gov/19186274/). “Attenuated” means rationed, restricted or denied medical care. It seems that most hospitals have adopted this triage-by-age system for Covid patients, resulting in restriction of fluids and nutrition, suppression of all visitation for Covid patients, coercion to use the toxic drug remdesivir and pressure on families to agree to put their loved ones on ventilators. We’re not kidding when we say that hospitals are best avoided.

REMDESIVIR KILLS

Regarding the “anti-viral” drug remdesivir, a whistleblower nurse, speaking anonymously on *The Stew Peters Show*, explains that everyone admitted to a hospital gets a PCR test and if the test comes back positive, they are put on the drug, even if they have no respiratory symptoms. Kidney problems and fluid in the lungs are well-known side effects of remdesivir. Many go on dialysis for the first time and if they are put on a ventilator, “the ventilator explodes. People are drowning essentially.” Those that do survive often return to their families needing constant care. The whistleblower also revealed that there is no test for the “Delta variant” we hear so much about on the news, and that most patients admitted to hospitals these days are suffering from vaccine-related injuries—blood clots, cardiac issues, neurological problems, balance issues, cognitive issues, aggressive behavior, encephalopathy—which the hospitals do not acknowledge as vaccine side effects (<https://tinyurl.com/drazdejn>). The main piece of advice from this brave nurse: stop watching the news!



Intubation (ventilator) procedure

BEAGLE-GATE OR ORPHAN-GATE?

Reports of cruel scientific experiments with beagles, apparently authorized by Anthony Fauci and the National Institute of Allergy and Infectious Diseases (NIAID), briefly appeared in the news, followed by damage control and claims that NIAID was not involved after all. Not so easy to debunk are the cruel and inhumane medical experiments that Fauci’s NIAID performed on presumably HIV-infected black and Hispanic children taken from drug-addicted mothers. As revealed in the 2004 documentary film, *Guinea Pig Kids*, researchers inflicted toxic drugs like AZT, Nevirapine, protease inhibitors and experimental AIDS vaccines on the children, which caused side effects like bone marrow death, organ failure, deformities, brain damage and death.

Health care workers were told to blame any complications and deaths on HIV infection, not the drugs and vaccines. Children who resisted were sedated and received surgically inserted tubes in their stomachs for the administration of the drugs. Eighty children died in these experiments and many others suffered severe side effects. “Fauci just brushed all those dead babies under the rug,” said survivor Vera Sharav, “They were collateral damage in his career ambitions”

(collapse.news, November 21, 2021). This is the same man now promoting vaccines for children as safe and effective. Parents! Please do not believe him!

A GREEN SOLUTION?

We’ve been hearing a lot about “cultivated” or “cell-based” meat and how much more environmentally friendly this Frankenfood would be compared to beef, chicken and fish. Journalist Flora Southey asks some interesting questions about this subject (foodnavigator.com, August 13, 2021). How many factories and at what capacity would be required to replace 10 percent of the meat market? How many bioreactors would the industry need and where would they build them? An industry-funded study suggests that to supply just 10 percent of the market for real meat, cultivated meat production would require about four thousand facilities, each with

Caustic Commentary

one hundred thirty bioreactor lines. Each factory would cost close to half a billion dollars to build, putting the total capital cost at almost two trillion dollars! The stainless steel reactors are difficult and time-consuming to clean, meaning that the factories can never operate at full capacity. One solution is “disposable bioreactors,” made of plastic, but the “disposable” part presents an environmental challenge—and hey, cell-based meat is supposed to be the green solution. And then there’s all the fetal bovine serum extracted from living fetal calves required to feed those rapidly dividing cells. It’s hard to see how this industry can ever compete with ground beef selling for five dollars a pound.

VILE VIALS

On November 20, the chief nurse at the University Medical Center, Ljubljana, Slovenia, quit her job to make a shocking revelation. The nurse had dealt with the administration of vaccine vials and injections. In front of TV cameras, she showed vaccine vials, each with a code number of 1, 2 or 3 and then explained their meaning. Number 1 is a saline placebo. Number 2 is the classic mRNA “vaccine.” Number 3 is an RNA stick containing the ONC gene, related to the adenovirus gene, which contributes to the development of cancer. She explained that those who receive the vial labeled Number 3 will develop soft tissue cancer within two years. She then stated that she had personally witnessed the vaccinations of all politicians and tycoons, and that they all received preparation Number 1, the harmless placebo. This is information that has to get out for people to understand what is really going on in the relentless push to get everyone “vaccinated” (haltturnerradioshow.com, November 23, 2021).

PULS SCORE AFTER VAX

The PULS score is a well-established measure of potential acute coronary syndrome (ACS) risk for five years into the future. A study published in the November 16, 2021 issue of *Circulation* indicates a dramatic post-vaccination increase of all the relevant risk markers across a group of over five hundred subjects whom researchers have been monitoring for eight years prior to the study, measuring their PULS scores on a regular basis. After Covid vaccination, the overall PULS score in the group increased from 11 percent ACS risk to 25 percent ACS risk. The results indicate damage to the heart muscle and the arteries, which may be autoimmune

in nature, possibly induced by the reaction of the immune system (including T-cell infiltration) to spike proteins, which are produced as a result of the mRNA injection. The changes persisted for at least two and one-half months after the second vaccine. Said the authors, “We conclude that the mRNA vaccinations dramatically increase inflammation on the endothelium and T cell infiltration of cardiac muscle and may account for the observations of increased thrombosis, cardiomyopathy, and other vascular events following vaccination.”

WHY VITAMIN D SUPPLEMENTS ARE NOT A GOOD IDEA

A study published in September 2020 entitled “Vitamin A in resistance to and recovery from infection: relevance to SARS-CoV2” (*British Journal of Nutrition* 2021, 126:1663-1372), addresses the roles that vitamin A plays in protecting the lungs. Vitamin A supports immunity and is key to protecting the respiratory tract, minimizing damaging inflammation, supporting repair of respiratory epithelium and preventing fibrosis. Taking a lot of vitamin D—some practitioners are recommending up to ten thousand international units per day—uses up vitamin A, since these two nutrients act as co-factors in a myriad of reactions. It is the lungs that are most affected in Covid—whether you believe that the disease is the result of a virus or over-exposure to EMF—so vitamin A is key to both protection and recovery. Best to take cod liver oil in which vitamins A and D are combined, than to become vitamin-A-deficient by overdosing on vitamin D. ☹☹☹

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.

When Money Intersects Public Health Policy

Keynote Presentation at Wise Traditions 2021

By Robert F. Kennedy, Jr.

I've been working on the intersection of money with public health policy for forty years, long before I got into the vaccine racket. I was suing Smithfield, Tyson, Bo Pilgrim, Frank Perdue and more big factory farms and factory farm companies than any attorney in the world. I spent a lot of time working with farmers unions in twenty states, traveling all around and eating good food. I've learned the connection, the links between the soil and democracy and good health, human dignity, and all the things we ought to be caring about.

I love the fact that the mantra of the Weston A. Price Foundation is about being wise about the traditions that connect us to the twenty thousand generations of human beings that were here before there were laptops. That wisdom ultimately connects us to God. The word "wisdom" means a knowledge of God's will. It means an instinctive knowledge about the difference between right and wrong.

When we separate ourselves from the soil, we ultimately lose our contact with those traditions and with the spiritual dimension of food. Ultimately, we'll lose touch with our humanity if we cannot reestablish that contact. The separation is not only wrecking our children's health, poisoning this whole poor generation of kids that we have destroyed through bad food and bad medicine; it has also led to the subversion of our democracy by these evil companies who care for nothing but profit. They're soulless and have no ambition other than to dominate humanity to commoditize the water, the landscapes, and our children, and they're doing that right now, transforming them into profits. We need to fight them with every fiber of our being.

THE VACCINE RACKET

I want to take a couple of minutes to talk about the vaccines, because we're about to do this truly evil thing of mandating the Covid vaccine for children. Even Andrew Pollard, who is the Paul Offit of England and the developer of the AstraZeneca vaccine, who spent a lifetime making, promoting and profiting from vaccines, who has been the most vocal proponent in Europe, has now resigned from SAGE [WHO Strategic Advisory Group of Experts]. He said he cannot morally (and I never even knew he knew that word) approve of administering these

vaccines to children while high-risk adult populations in developing countries remain completely unprotected.

I'll tell you why they are doing it, because you ought to understand what is driving them and why they keep doubling down when we know the vaccine doesn't prevent transmission. We know that it doesn't prevent you from getting sick. We know that kids do not die from Covid. The Makary study, by a Johns Hopkins researcher and published in *The Lancet*, tried to find one child in America who was healthy and died from Covid and there aren't any. I think they found three hundred deaths and all of them had debilitating comorbidities. They could not find a single healthy child who has died from Covid and we're going to give this vaccine to forty-nine million children?

This is an intervention that they don't need, that we know has the biggest risk profile of any vaccine that we've ever been subjected to in a mass vaccination program. The companies cannot give this vaccine to any American unless they have liability protection.

I sue pharmaceutical companies and other companies for a living. I was on the trial team during the Monsanto lawsuit. The first lawsuit we won was almost three hundred million dollars for Dewayne Johnson, a school groundskeeper who used glyphosate. In the second, we won eighty million dollars for Edwin Hardeman. In the third, we won over two billion dollars. Why did the jury give us over two billion? Because we were able to show that Monsanto knew it was going to harm people and lied about it.

What Pfizer has done makes Monsanto's conduct look like a Sunday school class. They know that they cannot afford to get in front of a jury and they should not give this vaccine to any human being in this country. There are other countries that don't have our legal system with jury trials. Almost nobody in the world has this downside risk for liability in front of a jury; that's really unique to our country. They can give this to

ACTIVIST AWARDS 2021



Robert F. Kennedy, Jr, chairman,
Children's Health Defense



Del Bigtree, creator and host of *The Highwire*

Europeans, but they cannot give it here, because they're going to get sued and it will bankrupt them. When a jury hears the story that I can tell about their conduct, they will bankrupt this company.

Before they got the emergency use authorization, Tony Fauci and others arranged for them to get immunity from liability for all emergency use products under the CARES Act and the PREP Act. So no matter how reckless their conduct, no matter how negligent, no matter how grievous your injury, you cannot sue that company.

Once they get the vaccine approved they don't have liability protection anymore. The shield disappears. That's why the FDA approved the Comirnaty vaccine, but they will not make it available. They wanted to approve it so that everybody in the country would think, "Oh, Pfizer got its vaccine approved." What they did was approve only the Comirnaty vaccine.

What's the difference between the Comirnaty vaccine and the BioNTech vaccine that doesn't have approval? The label. It's the exact same product with a different label. They only got the approval for the one with the different label so that they don't have to make it available in America. You cannot get it in this country,

Unfortunately, now the military and others are being ordered to take the vaccine, because it's now "approved," and the one that's approved, you can't get. They would probably shoot down an airplane rather than let one of those vials into this country, because if they let people take that vaccine and they get injured, they're going to have to answer in front of a jury. How do you get approval and a liability shield for a licensed vaccine? There's only one way to do it. You have to get it recommended for children. Once the CDC mandates it for children, it also has liability protection for adults. The only way to get a liability shield is by mandating and sacrificing these kids.

SAFETY TESTING

When the FDA approves a vaccine, they are legally required to look at relative risk, how it performs against another product or a placebo, absolute risk, and then the most important metric is called NNV: the number needed to

vaccinate to save one life. How many people do you have to give the vaccine to, to save one life? Once the FDA approved this vaccine, it was required to create a risk assessment and cost-benefit analysis. It did a cost-benefit analysis and looked only at relative risk. What they did is illegal, and we're going to sue them for it.

We don't know whether we can win this, because the judges are all terrified now. Under normal conditions, this would be an open-and-shut case. During the clinical trial, for the first time in history, a vaccine company did a pre-licensing, double-blind, placebo-controlled trial. That's a good thing because normally vaccines are the only medical products that do not have to be safety-tested in order to get approval. Not a single one of the sixty-nine doses of sixteen vaccines that are currently recommended for children has ever gone through a pre-licensing safety trial, a placebo-controlled trial. I've said that for a decade and Tony Fauci has always said, "He's lying about that, of course we did it," so we sued them in 2018. After a year and a half of litigation with ICAN and Del Bigtree, HHS (Department of Health and Human Services) said, "You're right, we have never done a placebo-controlled trial of any of the sixty-nine doses of the sixteen vaccines." Anybody who wants to see that response can go to our website.

So, it was a good thing that Pfizer said, "We're going to finally do one." Of course they had to do it, and here's how. They had twenty-two thousand people in the vaccine group who got their vaccine and twenty-two thousand people in the placebo group who got a placebo. It's the first time they've used a real placebo, instead of something horrendously toxic to make sure that the injury is evened out—that's called a "faux-cebo" or a "spike placebo." That's their gimmick.

This time they used a true, saline placebo. It was supposed to be a three-year trial, and you need these trials to be long, because many of the injuries from vaccines have long diagnostic horizons—you don't see them right away, they often have long incubation periods. You need to wait a while in order to understand the risk profile and whether the vaccine is going to avert more injuries and deaths than it causes.

So they planned for a three-year trial, but

Not a single one of the seventy-two doses of sixteen vaccines that are currently mandated for children has ever gone through a pre-licensing safety trial, a placebo-controlled trial.

ended the trial after six months, unblinded the study, and gave the vaccine to the entire placebo group. Why did they do that? They realized the vaccine basically stops working after six months. For an initial two weeks after the vaccine, it has some efficacy and will prevent a certain number of people from getting severe disease or death. But after six months, that advantage disappears, and what we're seeing now in England is actually a negative impact after six months. In England, they are seeing people who are over forty have a 139.2 percent greater chance of getting severe Covid than people who are unvaccinated. We don't know whether this is going to hold true across the globe. We don't know how reliable the British numbers are, but that's what they say today.

They knew at six months they had to end this study, because if they kept it going, those impacts would become visible and people would realize, "Why am I going to take the risk of this medical intervention when it only lasts for six months?" At the end of six months, the researchers tallied up all their wins and losses, injuries and deaths, and they handed those to Pfizer. One of the tables is the "death table" in that document. It's called an S4, which is reproduced in my new book, *The Real Anthony Fauci*.

If you look at the table and the footnotes (which show that they were even cheating on that table), what they found was that in the vaccine group twenty people out of twenty-two thousand died of all causes over that six-month period. In the placebo group, only fourteen people died of all causes. If you look at all-cause mortality and you want to make an assessment you would say, "If you take the vaccine, you have a 48 percent greater chance of dying over the next six months than if you don't." So why in the world would the FDA give them the license knowing that grim statistic?

In the vaccine group of twenty-two thousand, one person died of Covid. In the placebo group, two people died of Covid. They were able to thus make the claim that this vaccine is "100 percent effective", because two is 100 percent greater than one. That's what relative risk is and relative risk was the only data point they used to get the license.

The data point that you all thought they were using is called "absolute risk." You think when you hear "It's 100 percent effective" that if you take that vaccine you're 100 percent guaranteed you will not get Covid. That's not what it means. It means you have to give twenty-two thousand vaccines to save one life from Covid. If you have to give twenty-two thousand vaccines to save one life from Covid, you better make sure that nobody's going to die from the vaccine. If one person dies, you've canceled out all of the benefits from that product. What they found, of course, was that a lot of people died. And most of the excess deaths were from heart attacks. In the vaccine group, four people died of heart attacks and in the placebo group, one person died of a heart attack. That means, if you take the vaccine you have a 300 percent greater chance of dying from a heart attack over the next six months, than somebody who did not. It also means—looking at the math in a different way—for every one life they save from Covid, they are killing four people from heart attacks. That's the metric for adults.

When you start to look at the children, it's even worse. They gave

the vaccine to eleven hundred kids and roughly eleven hundred kids got a placebo. There was no clinical outcome observed, so there was no difference in either group in terms of who got Covid, who didn't, and what the severity was. What we know is that they were lying about stuff, because a very brave thirteen-year old girl named Maddie de Garay, who was part of that trial, came forward with her parents, and said that she got the vaccine, had seizures and is now in a wheelchair for the rest of her life eating from a feeding tube.

A clinical trial is supposed to tell you what the risks are for certain outcomes. And so the risk that trial predicts is one in thirteen hundred kids is going to be in a wheelchair for life. This is, in many estimations, literally a fate worse than death. Pfizer reported Maddie de Garay's injury as a stomachache. That's why I say that if I ever get them in front of a jury, I'm going to make this company pay for the entire lockdown, because they lied.

LEGAL LIABILITY

This is why Pfizer cannot afford to go in front of a jury, and that's without even doing discovery. Imagine, when we start doing discovery, what we're going to find out about them.

When I was on Brett Weinstein's podcast I said, "According to their study, the risk is one in thirteen hundred kids can be paralyzed for life. If you extrapolate that to the twenty-eight million children who are about to get this vaccine, it's thirty to thirty-five thousand kids who end up like that."

And he said, "Well, you can't really do that because that could have been an anomaly."

I said, "Yes, but that is Pfizer's choice. They're the ones who said we're only going to do thirteen hundred kids, and that's going to be sufficient, and we are willing to live with the results of that trial. We're going to save money because we are willing to live with this, by not doing all these extra kids, which would take us time and cost us money, we'll live with whatever the prediction is from those thirteen hundred." They weren't willing to live with it and had to lie about it. And now they should be stuck with that number.

And we know from real life that kids are

now dying all over the world from myocarditis, thrombosis and pericarditis. There was an article in the mainstream British papers that showed fatal heart attacks in Scotland have mysteriously increased by 25 percent since they introduced the vaccine. We're seeing these epidemics of heart attacks all over the world. It's a mystery how and why it's happening. All the mainstream press are saying it's a mystery. Why are people suddenly having heart attacks?

It's not that big of a mystery if you read Pfizer's clinical data, which of course none of them have read. These reporters have been obsessed for a year by telling us how dangerous Covid is based upon very, very little evidence. I'm not saying Covid isn't dangerous, it is. But the quality of evidence that they are basing projections on, projections you see day after day, is low-quality data. Now we have high-quality data, which are Pfizer's own data, which show the intervention is actually very dangerous, and nobody's reporting on it.

That is the problem with allowing pharmaceutical companies to advertise on television. We're only one of two countries in the world that allows the pharmaceutical companies to put over nine billion dollars into direct-to-consumer advertising every year. It gives them control of the media. Anderson Cooper has a twelve-million-dollar annual salary and probably ten million dollars of that is coming from Pfizer and the other vaccine makers. He's not working for the public, he's not even working for CNN. He is a pharmaceutical industry rep as is Sanjay Gupta and many others.

FAUCI RESPONSE

Those are things that we should know about the vaccine. I'm just going to talk a little bit about Dr. Fauci's response. The most dismaying thing from the beginning was the low quality of the data. If you are managing a pandemic, the key job that everybody needs you to do is to have really good quality control on your data and to figure out how to express those data clearly to the public. We started out with these absurd projections from Neil Ferguson in the U.K., which said that in the first year Covid would kill over two million Americans. These projections were all financed by Bill Gates, employing a guy who

is a known grifter, a con artist—all he does is exaggerate. That's what he is paid to do by the pharmaceutical industry.

From the beginning it was puzzling and bewildering. Most of the people in this room understand the control the pharmaceutical industry has and the agency capture and understand or at least suspect why there is so much confusion. We never got a good idea of the infection fatality rate or the case fatality rate and they were monkeying around with a PCR test at forty-five amplifications—when everybody knows that's going to give you 90 percent false positives. Then they rewrote how the coroners are supposed to do the certificates so that every death—even if you fell from a tree or got hit by a coconut or drowned or died in a motorcycle accident—it was put down as Covid, as long as you had ever tested [positive] for Covid. All of these things were designed to induce fear.

We never saw Tony Fauci behave like a doctor. He never had a Franklin Roosevelt conversation with the American people where he said to us, "The only thing you have to fear is fear itself." Fear is our enemy.

He didn't tell us to take vitamin D. We know that vitamin D is the enemy of coronaviruses. We know the coronavirus cannot replicate in the presence of zinc. How do you get zinc into your cells? With hydroxychloroquine and ivermectin and other remedies. He didn't tell us to lose weight, to get plenty of exercise, to stop eating crappy food, to stop consuming chemical residues, to stop drinking sugar drinks, to stay healthy and to keep our lives low-stress—to spend a lot of time with relatives and young loved ones. He wasn't telling us any of those things. He didn't tell us, if you get sick, here are some things that you should do and shouldn't do to divert this illness, so you never have to go to the hospital.

That's how we'll keep people out of hospitals, by treating them with zithromax and antibiotics and anti-inflammatories and steroids and zinc and vitamin D and hydroxychloroquine and ivermectin and the other things that doctors from the very beginning told us would work.

Well, what's the most important thing he didn't do? He has all these friendships with the Silicon Valley titans, these social media platforms. What did he use those friendships for? He used them to conspire with those guys to shut down dissent. To deplatform Sally and me and Larry and everybody else who's sitting at our table. If you are still on Facebook, you're doing something wrong.

How should he have used those close relationships with his cronies? Here's what he should have done. He should have told them on day one, "I need you to create a communications grid. I'll connect us with all eleven million frontline physicians everywhere in the world. And I want to hear from them what they're doing. what they think works. And I want to hear from Bangladesh, Tanzania, Greenland, Iceland and Argentina. I want to build a protocol that stops people from going to the hospital."

The Chinese did that, and they killed their pandemic, their pandemic was two months long. They probably did a lot of things that we wouldn't do in this country, that we wouldn't allow here but they did a lot of things that we would want to do. They published a protocol for early treatment by the beginning of April. And what was the leading drug on it? Chloroquine, the sister of hydroxychloroquine. That's what everybody was getting, not when you got sick but when you got a positive

PCR test. You got antibiotics and anti-inflammatory steroids. You got a whole constellation of Chinese herbs that contain vitamin A and all of the other products that Dr. Peter McCullough and Dr. Pierre Kory and all the frontline doctors who are actually doing their job and healing patients use. The same thing that they discovered the Chinese were doing from day one. We should have been doing that in our country. They ended the pandemic. What did we do?

The other thing that the Chinese did was to quarantine the sick. And they let the healthy out. If you were sick, they rounded you up and they put you in a quarantine hospital, and gave you early treatment right away. We did in this country the exact opposite of what every medical expert in the history of the world would tell you to do. Instead of quarantining the sick, we quarantined the whole population. We knew from the beginning, from Italy, that this disease spreads indoors. So we tell everybody to go indoors. We go to the surfers in Malibu—literally this happened—police were giving them one-thousand-dollar tickets for being out of their homes. These are people surfing out on a wave in the ocean. They're not hurting anybody else and not spreading disease and definitely not getting disease in the sunshine. And then they went and they corralled those people, and they locked them in their houses.

And then if you get sick, what do they tell you to do? Go home and contaminate all the other people in your house. And there's no such thing as early treatment. Instead, wait until you get so sick that you cannot breathe. And then come to the hospital. Every one of those hospital visits is a super-spreader event. Because that person is now at the height of viral shedding. And they're giving it to the Uber driver, to the ambulance driver, to the members of their families, to their helpers, to the people who run the hospital. It was like they intended it—it wasn't that they made a couple of mistakes. It was everything that you could do exactly the opposite of what you're supposed to do. That's what they were doing.

As Peter McCullough has pointed out, none of these guys dictating policy ever treated a Covid patient. Tony Fauci doesn't treat patients. Robert Redfield doesn't, Deborah Birx doesn't. They weren't consulting people who did, and they weren't making any effort to talk to doctors and say, "What is working for you?" and respecting, consulting, listening and sharing that information with the rest of the world and developing world-class protocols for treating this disease. They told us to go home, lock yourself up, wait till you have to go to the hospital.

And when you come to the hospital, we have a surprise for you, two things that are guaranteed to kill you—remdesivir and intubation. In November 2019, Fauci had remdesivir in a clinical trial in Africa, treating Ebola patients. Ebola kills half the people who get it so you're willing to take a big risk to escape that death sentence. The safety board in November stepped in and said you can no longer give this drug because it's killing more people than Ebola. It's killing 50 percent of the people that you give it to within twenty-eight days.

And how does it kill you? Exactly the same way Covid does. It causes kidney failure and pulmonary edema. And so doctors who are giving what Tony Fauci told them to give thought, well, this is a deadly disease because as soon as we give these people this life-saving treatment,

they're all dying of Covid. We have the highest confirmed deaths in the world. How does Tony Fauci have a job? We have the highest body count of any country in the world. We were the only country for a year using remdesivir. We have 4.2 percent of the (world) population in this country. We had 14 percent of the Covid deaths. How does he have a job?

Why don't we hire a health minister of Tanzania, based upon his track record, or anybody else in the African countries who were single-digit and double-digit per million deaths. We were up around eighteen hundred deaths per million. We had one thousand times more dead people per million than some countries.

BIOWEAPONS

What I show in my book is that this is consistent with an entire career of failing upward and of taking his agency and turning it into a sales force for pharmaceutical products. He does not measure his success, and nobody does at the National Institutes of Health (NIH) and Health and Human Services (HHS). They are not measuring success by how many healthy Americans there are—they measure success by how many vaccinations the children take and how many drugs the children take. He has a budget of 7.6 billion dollars. He has 6 billion from the U.S. taxpayer and 1.6 billion from the military.

Why does he have military money? Here's why. In 2001, we had an anthrax attack. So, Americans were told that Saddam Hussein had sent the anthrax. And they sent it only to senators who had voted against the Patriot Act. It turned out after we went to war with Iraq and the FBI completed its investigation, that the anthrax didn't come from Saddam Hussein. It came from one of three U.S. military laboratories.

At that time, there was already a huge movement to begin making bioweapons again. And the anthrax attack was the excuse that they used. Four months before that anthrax attack, there was a simulated pandemic, a smallpox pandemic, that came from a terror attack in Washington. And during the time the anthrax attack happened, the U.S. Senate Committee on Intelligence was meeting to talk about how to respond to an anthrax attack.

So all of these agencies that are linked to the intelligence agencies in the military-industrial complex were gearing up for this for a long time. The problem was they wanted to develop these weapons but we signed a treaty in 1972 saying you can't make bioweapons anymore. You can't handle them. You can't store them. And you clearly can't use them. So the Pentagon and the intelligence agencies wanted to make bioweapons, but there's a loophole. And the loophole says that as long as it's a "dual use" product—if you can make the argument you're not really developing a bioweapon, you're developing a vaccine—you can legally make it.

But the Pentagon did not want to do it that way, because they didn't think they could get away with telling such a whopper, and that everybody would see through them. So they began funneling the money to NIH. And they said, "We want you to develop the bioweapons, you're going to call it 'gain of function.'"

Tony Fauci began doing this—he got control of the \$1.6 billion—and he's got to spend it on something that has military applications. He gets \$1.6 billion a year. In order to reflect his new military responsibilities, they gave him a 68 percent raise. And every year that raise rolls over, and now he is the highest-paid official in the U.S. government. He makes four hundred thirty-four thousand dollars a year. President Biden makes four hundred thousand dollars—he's the second most highly paid. And the only reason Tony Fauci gets that money is because he's doing military work, which they call gain of function.

In 2014, when all the little bugs were escaping, Obama said, "You can't do it anymore. We're going to have a moratorium." Fauci began rerouting his gain of functions through the shady con artist Peter Daszak, who is tied in with the Chinese military. And they began growing these pandemic superbugs in that Chinese lab and teaching the Chinese scientists, scientists who are associated with the military. That lab is run by the Chinese military, the People's Liberation Army, and they're very open about it. We say, "oh no, this is gain of function", but the Chinese published a paper in 2015 and said, "We're making weapons, this is weapons research, and we can do great things with these weapons, it's

going to change the face of warfare, because we can freeze-dry them." The paper tells about the new delivery systems, how to dump these things on cities at night because if you do it when the sun is shining, it will kill the bugs. They were very open about it.

Meanwhile, Tony Fauci told the public that he was doing this to develop a vaccine. He was funding studies by Ralph Baric at the University of North Carolina, the major guy who was making these. Those studies are not just about doing gain of function and for engineering these superbugs. He developed, with our money, methodologies for hiding the tampering. They call this a "seamless ligation process." Ralph Baric calls them "no see 'em, gain-of-function bugs." He taught that trick.

The bat lady who works for the military in China taught them how to hide the tampering, to say, "We make these for the good of mankind, so we can develop a vaccine." And you may even be able to pass the straight-face test with that.

I don't see how there is any reason in the world that you can sell us on the idea that there was something good about teaching the Chinese how to hide the tampering. You would want to do the opposite. You would want to make the tamperings always visible, so nobody could release one of these things. That's not what they were doing.

EVENT 201

Here's something that you should know about Peter Daszak. Tony Fauci was giving millions to Peter to do these kinds of studies. The CIA was giving tens of millions to Daszak through USAID. And the Pentagon was also giving tens of millions. They gave one hundred million dollars, together, all three agencies. Tony Fauci was number three.

They were laundering the money through Peter Daszak thinking that they couldn't get caught because their fingerprints weren't on these funds. And so you ask yourself, is the CIA a health agency? No, it's not. It is not a health agency. There are a lot of good people who work for the CIA to protect our security. But then there's another group of people who are not good people. What they do is overthrow democracies. The count to date is more than seventy-two coup d'états that the CIA has engineered against one-third of the nations on earth.

How many of you know what Event 201 was? So almost all of you know about Event 201 in October 2019, and you can still look it up on YouTube. It was an odd meeting. It was a pandemic simulation. Curiously, we now know that the virus began circulating on September 12, 2019, almost certainly in Wuhan, China. And that night at midnight, they went into the lab and confiscated all twenty-two thousand coronavirus samples. They erased Tony Fauci's name from the public databases and hid all the NIH funding. Then the hospital parking lots, by the next day, were filling up with people, and there was a lot of other chatter at the intelligence agencies, September 12, the day when it happened.

Event 201 occurs a month later. Nobody knows except for the Chinese that this is already circulating. And who is at this meeting in New York when they're modeling a coronavirus pandemic that originated from a laboratory escape? Who was there? It's hosted by two people, Bill Gates and Avril Haines, the former deputy director of the CIA. She is now

the top spy in our country. She is Joe Biden's director of the National Security Agency. Also there is George Gao, the head of the Chinese CDC, who had just come from Wuhan. I don't know if he knows that it is circulating. It's hard to believe that he doesn't.

Also at the meeting is a high-level official from the biggest pharmaceutical company in the world, Johnson & Johnson; representatives from the social media companies and from the mainstream media; and some military people on the sidelines. They're modeling a pandemic, and what is curious about it, is there's no talk about healing. There's no talk about medicines. There's no talk about how you preserve constitutional rights during a pandemic. The only thing you're talking about is how to militarize the response and how to monetize it for pharmaceutical companies.

There were four seminars that day—and the fourth one is all about censorship. George Gao, the head of the Chinese CDC, and a lot of other people are saying, what do we do when people start chattering on the social media platforms saying that's a lab-generated virus? And they all agree, we have to pressure the social media companies to censor the public from talking about that.

They're talking about this in October 2019. It's very disconcerting. But in researching my book, what I found was that this was not a one-off. They have been doing these pandemic simulations almost every year since 2000. And all of them have one thing in common, a very, very heavy presence from the CIA.

Most or many of them involve Tony Fauci or other people from NIH, almost all involved the Population Center at Johns Hopkins, which is funded by Bill Gates. They involve not just a handful of big shots but they involve hundreds of thousands of people. The meetings are classified so they were secret events going on while none of us was paying attention. They were organizing firefighters, frontline workers, local police and cities all over our country, all over Canada, all over Europe simultaneously. They would do it all together. They were teaching people to walk in lockstep. That's what the group of simulations called Operation Lockstep was about. How do you get all the liberal democracies in the

world to pivot at once and engineer a coup d'état against constitutional rights and liberal democracy? How do you use pandemics? None of them talk about health. It's always, how do you use pandemics to clamp down totalitarian controls?

MAKING GERMS THE ENEMY

I have spent a lot of my adult life studying the CIA, but I didn't expect to stumble into them while I was writing my book on Fauci. My family has been in a sixty-year fistfight with the CIA which was all about challenging the emergence of the military-industrial complex.

When I was seven years old, Dwight Eisenhower made the most important speech in American history, warning the American people that our democracy was in jeopardy if we allowed the emergence of this new force, which was the military-industrial complex. He said it would consume our democracy. My uncle spent three years fighting the military-industrial complex, and formed a close friendship with Khrushchev.

I've written books and articles about their secret relationship. There's still a phone at my brother's house, which is where my uncle lived, which was the red phone. Wires are coming out of it now, but they used it to talk to each other without going through their agencies because they were both surrounded by warlocks. My uncle spent three years resisting the pleas that he go into Laos first and then to Vietnam. He never sent combat troops to Vietnam but as soon as he was killed, Johnson sent a quarter million U.S. troops and made it an American war.

My father runs against the military-industrial complex five years later, and he is killed in the process. And immediately after he's killed, Nixon sent five hundred thousand troops to Vietnam.

And then in 1989, something interesting happened, something unexpected. The Soviet Union collapses, the walls come down, and we are all promised a peace dividend of all that money that we were diverting to the military. Now the crisis is over. And the American people said that they were going to spend it on hospitals and jobs and quality of life and police and firefighters and infrastructure. We were going to make this country the City on the Hill, as it is supposed to be, the lamp to all the nations of the world.

But there were people in the military-industrial complex who heard about the peace dividend and were saying, "Wait a minute, that is coming out of our pockets. These people are trying to take our money." And in 1993, we had the first World Trade Center attack and all that money that was coming to us came screeching to a halt. And we started down that road to make America a national security state. And then, seven years later, we got 9/11. And then everybody was gearing up during that period, making Islamic terrorism the new Cold War demon.

Islamic terrorism was never a great target because it's really difficult to persuade the American people that we should divert a third of their GNP to combating a risk that kills fewer Americans annually than lightning strikes. But at that time—and I talked about this in detail in my book—the people within the military-industrial establishment are saying the new enemy and the permanent enemy—the long war—is going to be about germs. And germs are a much better enemy, because they can

get in every one of your houses and kill your families.

Humans have a natural terror of germs, it's part of the reptilian core of our brain. So, three weeks after 9/11, we have the anthrax attacks. And all of this money starts flowing. President Obama declared biosecurity the new spear tip of American foreign policy—that all of our foreign policy is about biosecurity—and then Gates and Fauci do their handshake in the year 2000 and say “we’re gonna have a decade of vaccines.” By 2020, they say, everybody, the entire population of the world, is going to be vaccinated. And they do these simulations.

I’ve brought all the old CIA manuals into my house and have read them. And during the 1950s, 1960s and 1970s, the CIA was figuring out ways to manipulate big populations as well as individuals. And it showed studies happening at one hundred fifty universities in the United States and Canada, where they were studying manipulation techniques and propaganda warfare. They were studying techniques including physical torture, like waterboarding and isolation, which was the most potent weapon they developed, a lot like the Stockholm Syndrome. You lock people up, and they become grateful to their captors. They become willing to be obedient and compliant if you can make them believe that only obedience to their captors will allow them to survive. They were using LSD and other psychotropic drugs, sensory deprivation chambers and a lot of other techniques.

THE MILGRAM EXPERIMENT

One of the studies from that period, which I include in my book, that almost certainly came from the CIA was a study at Yale, which is a favored university of the CIA. It was by social scientist and psychologist Stanley Milgram. Milgram recruited people from every walk of American life: construction workers, students, professors, Black people and White people. He brought them in and he put them in a room. The only other person in the room was a man who was wearing a white lab coat, who told them he was a doctor. They would sit at a table and turn a dial that would, they were told, administer shock to a man whom they couldn’t see who was tied to a chair in the neighboring room. The man

in the other room was actually an actor, and the subject could hear his screams, his pleading, his crying, his struggling. And the doctor would periodically tell them: “turn it up, turn it down, turn it up” and it would get higher and higher. At the top of the dial, it said 450 volts, potentially fatal.

Most of the subjects were begging the doctor not to make them do it. Many of them were crying. Yet 67 percent of them turned it up to a fatal shock, and they were people who knew better. But because a doctor told them to do it, they did it anyway. You can look up the Milgram experiment on Wikipedia. Don’t believe anything on Wikipedia, but you can believe this. The concluding line of that study is that a voice of authority, particularly medical authorities, will trump the core values and the conscience of 67 percent of the population.

I sometimes feel like we are all part of a massive Milgram experiment. We have a doctor up there who’s telling us to dismantle the Bill of Rights, to censor people, to tell on our neighbors, to inject children with things that are going to hurt them and to do things that we know are wrong—to close all the churches but keep the liquor stores open as “essential” business, to ban jury trials and the Seventh Amendment. The entire Bill of Rights has been dismantled. First Amendment, freedom of speech, and then freedom of religion—they closed all the churches for a year. Private property rights—they closed a million businesses with no due process, no just compensation, that’s all constitutional violation. They got rid of jury trials.

Every American is entitled to a trial before a jury of his peers in cases that are controversies exceeding twenty-five dollars. It’s simple. There’s



CONFERENCE REUNION

Monica Corrado, Luke Strikeleather and Sally Fallon Morell all attended the first Wise Traditions conference in 2000.

In one year,
Tony Fauci,
his cronies, his
intelligence
agencies, the
pharmaceutical
companies
and these
billionaires
from Silicon
Valley have
engineered a
shift of almost
four trillion
dollars from
the middle
class globally
to a handful of
robber barons.

no pandemic exception. It's all there. And all of those in one year have been obliterated. And we've done it, we've obliterated it because a doctor told us to do it, and lied to us again and again but it didn't matter, it was coming from a voice of authority.

THE GOOD NEWS

The good news is 33 percent of the people did not do it. Despite the fear, despite the seduction of that voice of authority, those 33 percent of Americans have retained their capacity for critical thought, and the courage to live by their convictions. The people who are in this room are the 33 percent. You are the people who are not going to do what you're told.

I'll close by saying this. This may seem cold to people, but there are a lot worse things than death, a lot worse. Luckily, in this country in 1776 we had an entire generation that believed that it would be better to be dead, to lose all your property, to lose everything you own, so that we could have a Bill of Rights, so that we could have freedom of speech.


That generation gave us something very precious. They gave us our country and in one year, Tony Fauci, his cronies, his intelligence agencies, the pharmaceutical companies and these billionaires from Silicon Valley have engineered a shift of almost four trillion dollars from the middle class globally to a handful of robber barons. They're the same guys who are deplatforming you if you question the policies that have enriched them. It's so obvious to anybody who looks at it critically, and yet 67 percent of our countrymen are blind because of the hypnosis, the mass hypnosis, that is a product of induced orchestrated panic. We need to wake our brothers and sisters up, even one at a time if we have to.

Here's the good news: There's a conversion taking place right now, where a lot of people are waking up, and they're going out into the street. That conversion always favors our side. Nobody goes from our side to their side. Everybody who converts comes to our side. I have never advised people to quit their job, make a spectacle of themselves. But, now I do. Because this is a hill that we need to die on.

A group of nurses told me they were all

about to lose their jobs. We were representing them in a lawsuit. I said, "Are you sure you want to do that?" And they said, "We've all agreed this is the hill we're going to die on." We need to follow that courage. Now's the time to fight, we have to go out and talk to our brethren.

I talked to a famous social psychologist. I said, "How do you reach somebody? You know what happens when you talk to these people, they get angry at you, they get ferocious. They are not going to hear it. It is a religious feature of orthodoxies and it's built into us. How do you reach somebody through the orthodoxy?" He said that it's formulaic. If you approach somebody who is part of that belief system by challenging their beliefs directly or showing them factual evidence, it will only fortify their entrenched belief. The way to confront or convert them is through the Socratic method of asking them questions. Then if they don't feel threatened from outside, the doubts begin from within and that shatters the fortification.

Let's go out, ask a lot of questions, commit a lot of civil disobedience, and let's all be ready to die with our boots on. When you're in a fist fight you don't land every blow, but you keep on swinging, and that's the only way to win. 

Robert F. Kennedy, Jr., is chairman of Children's Health Defense, whose mission is to end the epidemic of children's chronic health conditions by working aggressively to eliminate harmful exposures, hold those responsible accountable and establish safeguards so this never happens again. More than 54% percent of American children are suffering from one or more chronic illnesses. Mounting evidence indicates environmental toxins such as heavy metals, pesticides and herbicides are culprits, while studies link vaccines and toxic vaccine ingredients to a wide range of adverse health outcomes, including seizures, neurodevelopmental disorders and infant death. Mr. Kennedy believes that allowing environmental exposures to harm children's health and lives is unacceptable. He is working to change that. See page 69 for a review of his latest book, The Real Anthony Fauci.

Radiofrequency Radiation: A Significant Factor in Increasing Thyroid Cancer?

By Angela Tsiang

The incidence of thyroid cancer has nearly tripled over the last thirty years, both in the United States and around the world. In fact, thyroid cancer incidence has been rising so fast that it is expected to become the number four cancer worldwide by 2030.¹ In a 2017 study that showed a 3 percent annual increase in U.S. thyroid cancer incidence from 1974 to 2013, the authors concluded that their findings were “consistent with a true increase in the occurrence of thyroid cancer in the United States.”²

The study also showed that the rise in thyroid cancer is mainly due to increases in papillary thyroid cancer, a type of cancer that arises in the follicular cells that produce and store thyroid hormones.³ Roughly four in five thyroid cancers are papillary thyroid cancers.⁴ Figure 1 (next page) shows how the incidence of thyroid cancer overall and papillary thyroid cancers in the U.S. steadily increased from 1974 to 2013.

The increased incidence of thyroid cancer cannot be attributed to overdiagnosis but instead is likely due to environmental factors.

CELL PHONES AND THE THYROID

According to the authors of a 2013 study published in the *Journal of the American Medical Association*, the increased incidence of thyroid cancer cannot be attributed to overdiagnosis (that is, improved diagnostic methods or more screening) but instead is likely due to environmental factors.⁵ In particular, a growing body of scientific evidence from human and animal studies shows thyroid damage from the non-ionizing radiofrequency (RF) radiation produced by cell phones and Wi-Fi. Scandinavian researchers have pointed out that papillary thyroid cancers are particularly sensitive to radiation.⁶

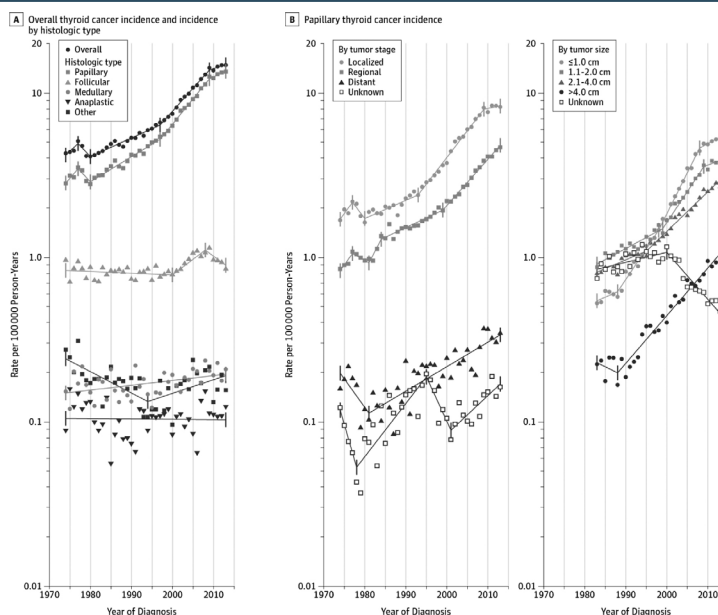
Nearly all American adults (97 percent) now own a cell phone.⁷ In 2019, Yale researchers reported elevated risks of thyroid cancer among heavier, long-term cell phone users.⁸ Individuals were at greater risk of thyroid cancer if they used a cell phone for more than fifteen years, for more than two hours per day or for a greater number of lifetime hours, and those who had made the most cell phone calls in their lifetime were also at increased risk. Men who had used cell phones for over fifteen years had more than twice the thyroid cancer risk as cell phone non-users; women who used cell phones more than two hours per day had a 52 percent greater risk of thyroid cancer compared to cell phone non-users.

In another study published by some of

the same Yale researchers in early 2020, the study team found that individuals with certain genetic variations had more than twice the risk of thyroid cancer from cell phone use as people without the genetic variation.⁹ After examining a total of one hundred seventy-six genes, the researchers identified ten variations (single nucleotide polymorphisms or SNPs) that appear to increase the risk of thyroid cancer among cell phone users to a statistically significant degree ($p < 0.01$).

In late 2018, the U.S. government's National Toxicology Program (NTP) published results of a two-year cell phone radiation study in rats and mice. The NTP designed the study to assess cancer risks and other potential health hazards resulting from exposure to 2G and 3G cell phone radiation.¹⁰ These earlier generations relied on network technology called GSM (Global System for Mobiles) or CDMA (Code Division Multiple Access). The NTP investigators measured a statistically significant increased incidence of C-cell hyperplasia (abnormal overgrowth of cells) in female rats exposed to GSM-modulated RF radiation, and also observed an increased incidence of C-cell hyperplasia (not reaching statistical significance) in male rats in the lowest exposure group (1.5W/kg). Many researchers consider C-cell hyperplasia in humans to be a precursor of a hereditary form of thyroid cancer called medullary thyroid carcinoma,¹¹ and some speculate that the hyperplasia may also precede

FIGURE 1. Overall and papillary thyroid cancer incidence, 1974–2013.²



other types of thyroid cancer.⁶

Examining the nearly half-century period from 1970–2017, Scandinavian researchers found a statistically significant increased incidence of thyroid cancer over time in both Swedish and Nordic women and men (Figures 2 and 3).⁶ Again confirming that this steep increase in thyroid cancer is not due to overdiagnosis, these researchers postulated that the increased incidence could be due to cell phones as well as DECT (Digital Enhanced Cordless Telecommunications) cordless phones.

For Swedish women, whereas the average annual percentage increase was 2.13 percent overall, the change from 2010 through 2017—an annual percentage increase of 9.65 percent—was especially pronounced. For Swedish men, the average annual percentage rose by 1.49 percent over the forty-seven year period, but the highest annual percentage increase (5.26 percent) was observed from 2001–2017. The results for 1970–2016 were similar for all Nordic countries, but again, the greatest increases were in the most recent decade examined: 5.83 percent in women (2006–2016) and 5.48 percent in men (2005–2016).⁶

Concluding that their results “do definitely indicate an etiologic impact of an exogenous cancer-causing factor with increasing exposure over time,” the researchers pointed to the timeline of wireless phones’ rollout in Nordic countries (beginning with the first mobile and

DECT phones in the 1980s), suggesting that the RF radiation from handheld phones should be a prime suspect.⁶ They noted that the phones’ antenna position “gives RF exposure to the thyroid gland”—one of the highest exposed organs other than the brain—and the phones, in addition, “give off RF radiation to the head and neck region.” Finally, observing the relatively short five-to-ten-year latency period for thyroid cancers induced by ionizing radiation (such as that produced by X-rays), the authors suggested that there could be a roughly comparable latency period (less than thirteen years) for thyroid cancers associated with the non-ionizing RF radiation from handheld phones.

WIRELESS TRENDS

The continuing steep rise in the incidence of thyroid cancer—with no plateau in sight—indicates that the environmental factor responsible for the cancers also has not plateaued. It is a fact that use of wireless technology has grown steadily since cell phone and cordless phone use began in the 1980s, to the point where nearly all adults and most children in the United States use cell phones and other wireless devices. Tablets and laptop computers have also proliferated, becoming ubiquitous after Wi-Fi was made available to consumers in 1997.

The continuous increase in cell phone subscribers requires a corresponding increase in cell phone towers to provide cell phone service.

The phones’ antenna position “gives RF exposure to the thyroid gland”—one of the highest exposed organs other than the brain.

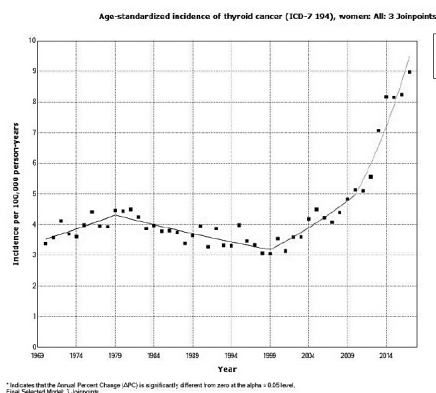


Figure 1. Jointpoint regression analysis of age-standardized incidence of thyroid cancer for women, all ages 1970–2017. Incidence per 100,000 inhabitants for ICD-7 code 194 according to the Swedish Cancer Register (https://sdb.socialstyrelsen.se/itf_can/val.aspx).

FIGURE 2. Thyroid cancer incidence in Swedish women, 1970–2017. Notice the increase beginning around 2004—the thyroid cancer incidence rate has more than doubled since that year.⁶

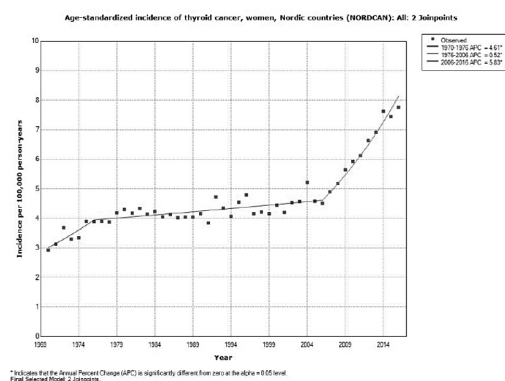


Figure 3. Jointpoint regression analysis of age-standardized incidence of thyroid cancer for women, all ages 1970–2016. Incidence per 100,000 inhabitants for ICD-10 code C73 in the Nordic countries according to NORDCAN (<https://www-dep.iarc.fr/NORDCAN/english/frame.asp>).

FIGURE 3. Thyroid cancer incidence in women, all Nordic countries, 1970–2016. The same pattern is apparent, with a sharp increase beginning around 2004.⁶

According to the 2020 annual survey conducted by the wireless industry trade group, CTIA, the number of U.S. cell towers more than tripled between 2001 and 2019, going from roughly one hundred twenty-seven thousand to over three hundred ninety-five thousand.¹²

In addition to the cell towers, the home environment has changed dramatically. Around 2014, for example, the practice of embedding public Wi-Fi hot spots into residential modem/routers began; there are now at least eighteen million Wi-Fi hot spots in U.S. homes and businesses.¹³ In addition, other wireless devices (such as baby monitors) have become commonplace, while “smart” wireless devices began proliferating with the introduction of the “smart” TV in 2008. We now see wireless doorbell and security systems, wireless personal assistants, “smart” meters, “smart” appliances and, inevitably, “smart” homes. On the road, radar on cars was introduced in the early 1990s and has now become a standard car feature. Wireless wearables have also become popular, including wireless watches, wireless fitness trackers and wireless medical monitors.

In 2019, we saw the introduction of 5G, which is intended to connect everything and everyone to the Internet of Things (with the Internet of Bodies soon to follow). 5G requires the addition of several times more antennas, called “small cells,” which are being placed on streetlights and utility poles within a few meters of residences and within a few feet of pedestrians. In many urban areas, the 5G rollout relies on the millimeter-wave portion of the spectrum (formerly allocated primarily to the military)—shorter wavelengths that do not travel far or penetrate buildings as well—while in rural areas, 5G uses lower frequency bands (600 and 700 MHz) not subject to those constraints. For both portions of the spectrum, the operating environment for 5G involves health-damaging pulsing and modulation of the carrier signal and the potential for wireless radiation to produce adverse effects synergistically with chemical and biological toxins.¹⁴ Moreover, 6G—where “biology meets Artificial Intelligence”—is on the way,¹⁵ along with other AI-related technologies such as RF chips implanted in the brain.¹⁶

In addition to RF EMFs, extremely low frequencies (ELF) from 3 to

3000 Hz are emitted by all wireless communications in the form of pulsing and modulation. There is significant evidence that some of the principal adverse effects on living organisms from wireless technologies are from the ELF pulsing and modulation.¹⁴

HUMAN AND ANIMAL STUDIES

As already mentioned, many human and animal studies show thyroid damage from cell phone and Wi-Fi radiation. In one study published in 2012, which followed participants for six years, the researchers found long-term effects on thyroid and other hormones from both cell phone use and residence within five hundred meters of a cell tower.¹⁷ Individuals with long-term exposure to these forms of RF radiation displayed statistically significant decreases ($p < 0.01$) in thyroid hormones T3 and T4, the adrenal gland hormones ACTH and cortisol, and sex hormones progesterone and testosterone compared to unexposed individuals.

In a study involving medical students in South India, researchers identified a statistically significant correlation between total cell phone radiation exposure and increased thyroid-stimulating hormone (TSH) ($p = 0.025$).¹⁸

A 2009 study with similar results found higher-than-normal TSH levels among university medical students who used cell phones versus normal TSH levels in students who did not use cell phones—a difference that, again, was statistically significant ($p < 0.05$).¹⁹

THYROID CANCER IN CHILDREN

In the U.S., as in many countries, cell phone use starts young.²⁵ Over half (53 percent) of U.S. children have a smartphone by age eleven, and 84 percent of American adolescents own one.²⁶ Noting that children are also exposed “involuntarily” to multiple types of non-ionizing radiation from electromagnetic fields (EMFs) in their daily life, one group of authors wrote about EMFs in 2015, “there are unignorable amount of studies indicating the increased risk of cancer, hematologic effects and cognitive impairment,” as well as “impacts on metabolism and endocrine function.”²⁷ Raising concerns about the “detrimental effects of EMFs on thyroid functions, adrenal hormones, glucose homeostasis and melatonin levels,” these authors pessimistically concluded, “there is growing evidence to distress us about the threats of EMF on children.”

It is perhaps unsurprising, then, that thyroid cancer is the fastest growing cancer in children. According to a 2018 presentation by Centers for Disease Control and Prevention (CDC) researchers, five different types of cancer displayed increased incidence in young people under age twenty from 2001 to 2014, but thyroid cancers were the standout.²⁸ Pediatric thyroid cancers increased on average 4.8 percent per year over that period, versus a 2.5 percent average annual increase for liver cancers, 1.2 percent for non-Hodgkin lymphomas, 0.6 percent for kidney tumors and 0.4 percent for central nervous system cancers. The average annual rate of increase over that period for pediatric cancers overall was 0.7 percent.

In 2015, Spanish researchers studied changes in thyroid gland morphology in rats following 2.45 GHz radiofrequency exposures of thirty minutes, assessing changes after just one exposure and also after ten repeated exposures over a two-week period.²⁰ 2.45 GHz is the carrier frequency commonly used in Wi-Fi. The exposures were below thermal levels and under the U.S. Federal Communications Commission's (FCC's) exposure limit, which is defined as a specific absorption rate (SAR) limit of 1.6 watts per kilogram (W/kg) averaged over one gram of tissue.

The changes affected the gene expression of heat shock protein 90 (HSP-90) in the thyroid gland. Cells make heat shock proteins as a protective mechanism when the cells are exposed to temperatures above their normal growth temperature or to other stressful conditions. HSP-90 plays a “modulatory role against thyroid cancer”; in the study, as RF exposures increased, the expression of HSP-90 decreased.²⁰

The study found statistically significant increases in the diameters of the follicular cells of exposed thyroid glands—at 0.076 ± 0.0041 W/kg SAR over one gram of thyroid tissue, which is well under the FCC's SAR limit of 1.6 W/kg—compared to unexposed thyroid cells. When compared to nonradiated animals, the rats subjected to single and repeated exposure displayed statistically significantly increased peripheral follicular diameters ($p = 0.008$ and $p = 0.043$, respectively) (Figure 4).²⁰

MULTIPLE FREQUENCIES

Earlier studies have produced similar findings. Turkish researchers found in 2010 that exposing rats to pulse-modulated 900 MHz cell phone radiation (at a SAR of 1.35 W/kg) for twenty minutes per day for three weeks caused pathological changes in the thyroid gland by altering the gland structure and inducing hypothyroidism, inhibiting thyroid hormone secretion.²¹ (Cell phones sold in the U.S. cannot exceed a SAR rating of 1.6 W/kg.) The RF-exposed rats had higher follicle diameters in their thyroid glands compared to sham-exposed and cage-control rats ($p < 0.001$) and higher colloid diameters ($p < 0.001$). The researchers hypothesized that reactive oxygen species (ROS) generation and overload of cellular calcium ions could be involved in altering thyroid morphology and inducing pathways in thyroid cells involving caspases (protease enzymes that play a major role in programmed cell death). In a 2006 study, Swedish and Serbian investigators found changes in thyroid tissue from exposure to ELF frequencies of 50 Hz (Figure 5).²²

INDISCRIMINATE USE

RF radiation in the environment has increased exponentially over the last thirty years. It will continue to do so as long as the majority of people remain unaware of its non-thermal health effects and continue to use wireless technologies indiscriminately. ☹️

Angela Tsiang is a chemical engineer who has worked in the manufacturing of pharmaceutical, dental and electronics products. She is the mother of two school-age children who developed microwave sickness from two cell phone towers next to their elementary school. In 2015, after learning about health effects from chronic exposure to low levels of radiofrequency signals that were presumed to be harmless, she began focusing her efforts on education around this issue in addition to taking care of her children.

To learn more about wireless radiation and the thyroid, visit the blog of Dr. Joel Moskowitz, PhD.²³ To learn more about wireless radiation's connection to head and neck tumors (thyroid, parotid and acoustic neuromas), visit the Physicians for Safe Technology website.²⁴

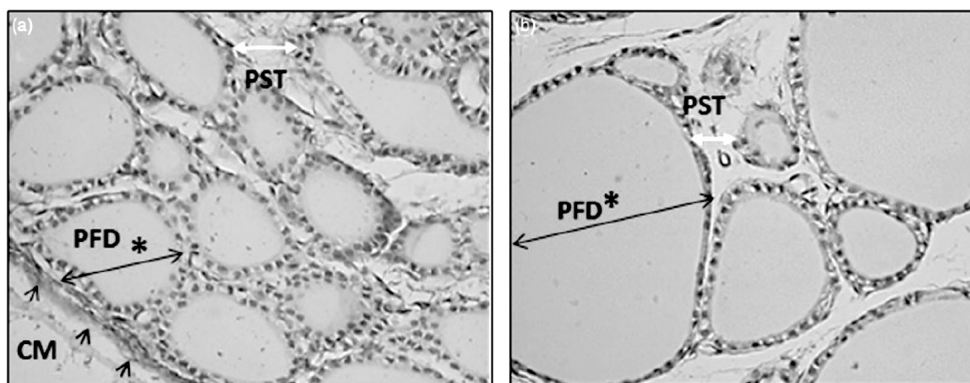


FIGURE 4. PFD=peripheral follicle diameter; CM=capsular membrane; PST=peripheral septa thickness. This figure (Figure 5 from Misa-Agustiño et al., 2015²⁰) shows peripheral follicles increasing in size ninety minutes after acute whole-body exposure with 3 W ($= 0.076 \pm 0.0041$ W/kg SAR over one gram of thyroid tissue, under FCC SAR limit). Note the larger PFD in the thyroid tissue of exposed rats (b, right) compared to the thyroid tissue in the control group (a, left). Magnification is 40X.

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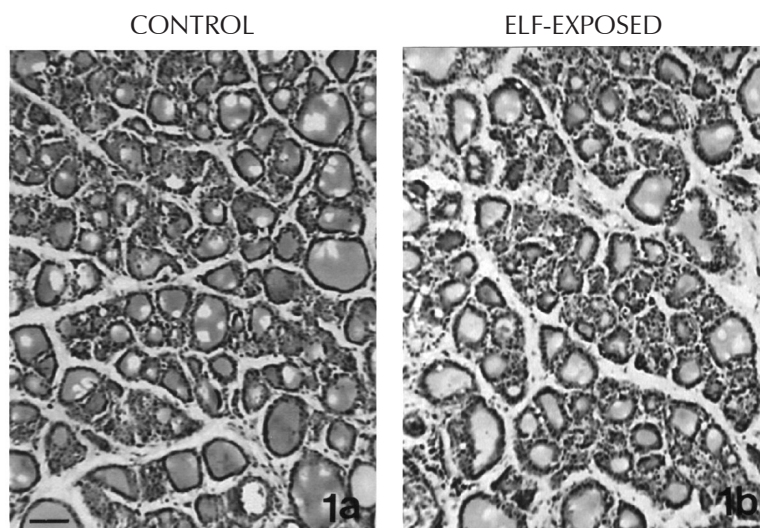


FIGURE 5. This figure (Figure 1 from Rajkovic et al., 2006²²) shows photographs of stained thyroid gland. In the thyroid cells exposed to 50 Hz (1b, right), each lobule is completely divided by connective tissue compared with the control (1a, left), with 32 percent higher interfollicular connective tissue volume density in the exposed cells compared with the control cells, a statistically significant increase ($p = 0.048$).

A Case of Covid: DIY Treatment Plan

By Sally Fallon Morell

It started as a dry cough. Because we had guests coming in for a long weekend, I just ignored it. But as the weekend wore on, I became more and more tired; worse, I was short of breath, with pain in my lungs. I also lost my sense of smell and let the bacon burn in the oven several times.

When the guests left, I fell into bed and slept for three days. Never had I felt such overwhelming fatigue. I used a fingertip pulse oximeter to measure my blood oxygen level—it was in the high eighties, when it should be ninety-five or above—and my pulse was uncharacteristically high. Breathing was painful. But the worst symptom was a kind of depression, like a black cloud hovering over me. A full recovery took about four weeks, getting only a little better every day.

Raw milk (or raw cultured milk) is not only highly digestible but also our best source of glutathione, Nature's most powerful detoxifying compound. Glutathione pills can't hold a candle to the benefits provided by raw milk.

This was not the flu; it was a case of Covid-19. With the flu, you are achy, stuffy and feverish; miserable for a day or two, followed by a quick recovery. Covid is a cold illness, slow to resolve, with none of the usual symptoms. I had a dry cough but no sore throat. At a gathering I attended after my recovery, half the people I talked to said they had been sick and described similar symptoms: dry cough, loss of sense of smell, painful breathing and extreme fatigue. Some also had nausea and other gastrointestinal symptoms; on the other hand, one friend of mine went through several weeks of just feeling very tired, with no other symptoms.

How do we contract Covid-19? In my case, I believe it was a trip taken the week before, with one-stop flights both going and coming—meaning lots of time in airports and a lot of exposure to highly saturated Wi-Fi, now installed in most airports, both large and small. Covid can happen after exposure to 5G emitters on the street (5G does not penetrate into your house) or exposure to 5G installed inside certain places of work, like warehouses and meat processing plants. People often get sick after “super-spreader” events—concerts or sports events with lots of people together, everyone with cell phones, and possibly 5G inside the building or outside (for outdoor events). Or it could just be overexposure to Wi-Fi in your own house—typically not 5G, but “on” at all times—or overuse of a cell phone. Remember, too, that 5G is now coming from space—which explains cases happening in rural areas.

Probably everyone will contract Covid at some point, and that may not be a bad thing. Ilana Nurpi, the Italian physician who wrote the article “Questioning Covid” (*Wise Traditions*, Summer, 2021)¹ believes that our bodies can adjust to a certain amount of microwave radiation—just like we have adjusted to radio waves—possibly by adding new receptors to our cells. This is likely a process that calls on a lot of nutrients and energy—hence the overwhelming fatigue that most people experience when they get Covid.

This doesn't mean that getting Covid once will protect you against getting it again, but a bout with the illness may provide some resistance in the future.

DIETARY STRATEGIES: RAW MILK

During the period of the worst fatigue, there was only one food I wanted to consume: raw milk. I drank about a half-gallon each day and ate nothing else. It's an excellent choice because raw milk (or raw cultured milk) is not only highly digestible but also our best source of glutathione, Nature's most powerful detoxifying compound. The milk needs to be raw—heating denatures this important compound.² Note that there's no glutathione in cheese because it's only found in the whey portion of milk.

Raw milk provides protection in a toxic world, so it's good to drink it every day—but it's especially important when you're sick with an illness like Covid. According to a 2020 paper, “The hypothesis that glutathione deficiency is the most plausible explanation for serious manifestation and death in COVID-19 patients was proposed on the basis of an exhaustive literature analysis and observations.”³ Many practitioners are treating Covid with glutathione pills, but these can't hold a candle to the benefits provided by raw milk.

GELATINOUS BONE BROTH

We make bone broth in large batches and keep it frozen in the freezer, so it was easy to add bone broth to my diet once I was feeling a little better. Bone broth contains glycine, which helps detoxify and also regulates dopamine levels for an optimistic mood.

COD LIVER OIL

Cod liver oil provides vitamins A and D—key fat-soluble vitamins for protection and recovery from disease. The Weston A. Price Foundation recommends only cod liver oil that contains its original natural content of vitamins A and D. (Most cod liver oil manufacturers employ a heat-intensive process called molecular distillation, which destroys the natural vitamins; what you read on the label are synthetic vitamins added back in.) For recommended brands, consult our Shopping Guide or visit our Cod Liver Oil Basics webpage.⁴

I take cod liver oil every morning, but during the illness, I took a second dose in the afternoon. I could actually feel that black cloud lift after taking it, although in the early days of

the illness, that effect was only temporary.

Exposure to any kind of toxin calls on our reserves of vitamin A. Vitamin A plays many roles in the body, one of which is the support of lung function. Vitamin A also supports the production of hormones for the sympathetic nervous system, which seem to be suppressed in Covid.¹ Thus, a good source of vitamin A is a must for recovery from Covid, and cod liver oil provides plenty.

VITAMIN K

It's important to balance vitamins A and D with vitamin K₂. Vitamins A and D tell the cells to make certain proteins, and vitamin K₂ activates these proteins after signaling by vitamins A and D. Dr. Weston Price found that giving cod liver oil worked much better if given along with a source of "Activator X," which we now know to be vitamin K₂. That's why we recommend taking cod liver oil with high-vitamin butter oil or Australian emu oil, both good sources of vitamin K₂. One-half teaspoon of either with one teaspoon cod liver oil will provide the nutrients you need to assimilate minerals, make hormones, generate energy in your cells and help you recover from illness, including the illness called Covid. Poultry liver (from chicken, duck, goose or turkey) provides a nice balance of A, D and K₂. Once my appetite returned, I enjoyed eating chicken liver paté.

B VITAMINS

One symptom of severe Covid is "Covid toes"—red, swollen and sometimes itchy toes (and fingers) very similar to "pellagra toes," caused by a lack of niacin (vitamin B₃). The logical conclusion is that Covid uses up niacin, so more is necessary when we are sick. Deficiency of vitamin B₁, called beriberi, may also predispose us to Covid-like illness, as a key symptom of B₁ deficiency is shortness of breath.⁵ As with vitamin D (see sidebar), taking one or two B vitamins in isolation can lead to imbalances of the other B vitamins, so the best protection will come with a good B vitamin complex. I routinely take one-half teaspoon B complex, a liquid formulation,⁶ and although I didn't have any problems with my toes or fingers, I doubled this amount while recuperating.

VITAMIN C

Vitamin C supports the healing process. Natural is always best, as synthetic ascorbic acid can deplete copper, among other nutrients. Amla-C, made from the ascorbate-rich fruit of the *amalaki* plant (commonly known as the Indian gooseberry) is a good choice. There are many brands—look for one that contains only dried amla, pressed into tablets, without other ingredients. The actual vitamin C dosage on the label may seem small, but I have learned from experience that just a few tablets of Amla-C are just as effective as a large dose of synthetic ascorbic acid. I take about six tablets daily and continued this dose during the illness. Another good source of vitamin C is desiccated rose hips.

ZINC

Another key nutrient for Covid recovery is zinc, as zinc is an important co-factor for vitamin A. Zinc helps reactivate the central nervous system, which is depressed by exposure to 5G and intense Wi-Fi. There are many zinc supplements on the market, but I prefer to get my zinc from food. Best sources are oysters and red meat. If you don't like oysters,

DANGERS OF VITAMIN D SUPPLEMENTATION

The Weston A. Price Foundation does not recommend vitamin D supplements—only vitamin D from food, such as cod liver oil, egg yolks, animal fats like lard and organ meats, where it is balanced by its co-factors vitamins A and K₂. Vitamin D taken on its own can rapidly deplete vitamins A and K₂. Taking large doses of vitamin D can also induce severe depletion of magnesium, as magnesium is essential to the metabolism of vitamin D.¹¹ Vitamin D enhances mineral absorption and can lead to hypercalcemia (dangerously high levels of calcium in the blood), and higher levels of vitamin D also have been linked to enhanced absorption of toxic elements such as aluminum, cadmium, cobalt and lead.¹² Unfortunately, during the Covid pandemic, many are taking very high doses of vitamin D from supplements, even up to 10,000 IU per day or more.

Symptoms of vitamin D overdose include vomiting, nausea, poor appetite, excessive thirst, excessive urine production, loss of weight, abdominal pain, dehydration, constipation, diarrhea, itchy skin, severe headache, irritability and nervousness. Heart rhythm irregularities, increased risk of heart disease and high blood pressure as well as renal failure are also symptoms of vitamin D overdose.

As noted by Chris Masterjohn, kidney stones are another danger of excess vitamin D.¹³ Lifeguards in Israel¹⁴ have twenty times the rate of kidney stones as the general population. According to Masterjohn, "Kidney stones may be the most sensitive indicator of vitamin D toxicity and are a symptom of vitamin A and K₂ deficiency."¹⁵

One teaspoon of cod liver oil can supply about 1000 IU vitamin D; that plus vitamin D ingested from other foods, such as egg yolks, lard, seafood and organ meats, is plenty. Vitamin D supplements are unnecessary and can put us at risk.

desiccated oyster capsules are a good choice. Red meat in the form of steak tartare (raw hamburger mixed with egg yolks, chopped onions and salt) is a great food for recovery from any illness—especially an illness like Covid-19, which responds well to zinc supplementation in many cases. Oysters and red meat are also good sources of selenium, another nutrient that can be helpful in recovery from Covid.

SATURATED FAT

Saturated fat supports hormone production, kidney function and especially lung function—the lungs cannot work without adequate saturated fat. Most importantly, saturated fats help build strong, robust cell membranes, which provide a hydrophilic surface for the water in our cells, which forms a structured exclusion zone (EZ) against these cell membranes. The EZ has a negative charge and fundamentally acts as a wire to carry electric charge.

Having smooth, robust cell membranes is like having well-insulated wiring throughout our body, providing good resistance to EMF insults like 5G. A diet high in polyunsaturates (also known as industrial seed oils or vegetable oils) will result in cell membranes that are “leaky” and “floppy” and make us more vulnerable to the invisible assaults of electromagnetic frequencies. Saturated fats like butter, lard, tallow and coconut oil should form the basis of any diet, especially a diet for recovery from Covid.

LIVER AND EGG YOLKS

Our best sources of choline—liver and egg yolks—can help counteract the cholinesterase-inhibiting effects of 5G. As soon as the appetite returns, include scrambled eggs or egg yolk smoothies and liver or pâté in your diet.

LONG-TERM PROTECTION

It would be foolish to think that once we have had Covid, we are

immune from ever getting it again. We might be more resistant but never completely immune. So, it makes sense to take steps to protect ourselves. A nutrient-dense diet plus the supplements listed above constitute a first line defense, of course, but there are other strategies we should all implement.

Eat organic as much as possible, and especially organic grains, to lessen your exposure to glyphosate. More importantly, avoid biodiesel fumes from buses and other public transportation vehicles. As explained by Stephanie Seneff,⁹ biodiesel fumes contain glyphosate, which can suppress certain lung surfactants and compromise lung function.

Since 5G suppresses the sympathetic nervous system and inhibits cholinesterase,¹⁰ it makes sense to avoid pesticides that act as cholinesterase inhibitors. The number-one offender is non-organic citrus fruit and fruit juices (especially commercial orange juice), since citrus is heavily sprayed with cholinesterase-inhibiting pesticides. To protect ourselves, we should eat foods containing plenty of choline, such as egg yolks and liver.

In her “Questioning Covid” article, Ilana Nurpi notes that those on inhibitory drugs seem to be most vulnerable to Covid—drugs such as antipsychotics and cholesterol-lowering medications (statins), benzodiazepines, opioids, barbiturates, proton pump inhibitors, ACE inhibitors

IVERMECTIN

There’s been a lot in the news about ivermectin, a drug used to treat heartworm in animals and parasite infestations in humans. Since using the drug to treat Covid is strongly opposed by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA), many have concluded that it must be okay!

But does it make sense to take a drug to treat parasites for an illness like Covid—which has no relationship with parasitic diseases—and especially a drug that has many side effects? Like hydroxychloroquine, ivermectin seems to interact with cholinesterase,¹⁶ but it also depresses the central nervous system.¹⁷

The package insert for Stromectol,¹⁸ a version of ivermectin, lists a host of negative effects including fatigue, abdominal pain, anorexia, constipation, diarrhea, nausea, vomiting, dizziness, somnolence, vertigo, tremor, rash, hives, leukopenia and anemia. One study described abnormal sensation in the eyes, eyelid edema, anterior uveitis, conjunctivitis, limbitis, keratitis, and chorioretinitis or choroiditis—all bad things for the eyes.

Also of concern is a study from Nigeria showing that males treated with ivermectin for onchocerciasis (river blindness, attributed to the parasitic worm *Onchocerca volvulus*) displayed significant reduction in sperm counts and sperm motility, with a significant increase in the number of abnormal sperm cells. This took the forms of sperm with two heads or double tails, white (albino) sperm and sperm with extraordinarily large heads.¹⁹

It makes sense to avoid ivermectin therapy—not because the CDC opposes it and not because alternative groups endorse it, but because it is a dangerous toxic drug with side effects that outweigh possible benefits for the Covid sufferer.

COVID KIT

In addition to the above dietary strategies, I found the following remedies helpful as part of my “Covid Kit.” Items like quinine water, Lugol’s solution, turpentine, Vicks VapoRub and homeopathics are inexpensive and easily available. It makes sense to have these on hand in case Covid strikes!

TINCTURE OF QUININE: We’ve all heard about successful treatment with hydroxychloroquine, but the original, natural remedy is quinine. It turns out that chinchona bark extract (quinine) helps reactivate cholinesterase,⁷ which is inhibited by 5G. Many natural brands of quinine tincture are available on the Internet. Be careful not to overdo—concentrated quinine in pill form does have side effects. I took two dropperfuls in sparkling water twice daily during the illness and now take my “quinine cocktail” with just one dropperful of tincture once daily for maintenance.

LUGOL’S SOLUTION: Called “the magic bullet for fighting the COVID-19 pandemic, in both a curative and preventive way,”⁸ iodine should be a part of any treatment for Covid-19. The safest way to take iodine is a small patch on the skin—the body will slowly absorb what it needs. I did a small patch every other day.

TURPENTINE: Breathing fumes of turpentine is an old folk remedy for the lungs, and I found that turpentine fumes gave relief to lung pain and made breathing easier. But do be careful, as too much turpentine can also be harmful to the lungs. Bring one quart of water, plus a few whole cloves, to a boil. Remove from heat and add just five drops of turpentine. Put a towel over your head and breathe in the fumes for several minutes.

VICKS VAPORUB: The 1899 Merck Manual listed turpentine as a cure and preferred treatment for a variety of diseases, and many medicinal products contained turpentine—primarily topical ointments for the treatment of rheumatic disorders and muscle pain. A gum derived from turpentine was used in traditional Chinese medicine for toothache. Today, only one medicinal product contains turpentine: Vicks VapoRub. I used this as a back and chest rub and found that it gave significant, although temporary, relief for lung pain.

HOMEOPATHIC ADRENAL: After about three weeks, my energy and sense of smell returned. The lung pain was better but not completely gone—I felt a mild but chronic ache in the middle of my chest. At the suggestion of Dr. Nurpi in Italy, I started to take homeopathic adrenal (Glandula Suprarenalis 6X), ten pellets in the morning and five in the evening. Within two days, the pain was gone, and I could take a deep breath and even walk up a hill without getting winded.

FINGER PULSE METER: An important device to have on hand is a finger pulse oximeter. A recent invention, easy to use and inexpensive, the pulse oximeter fits on a finger and measures both pulse and percentage of dissolved oxygen in the blood. Normal dissolved blood oxygen levels are 95 percent or above. An oxygen level below 88 percent for any length of time can be dangerous. If your oxygen level is below 85 percent, get thee to a practitioner who can give you oxygen, or even (as a last resort) to a hospital. An oxygen level of 80 percent and lower puts your vital organs in danger. What I found interesting is that as my fatigue abated, the levels of dissolved oxygen rose. When I got to 95 percent, I was feeling fine, and now a reading of 97-98 percent is typical. My pulse rate also gradually went down, from over 100 to my normal 72.


and other drugs to lower blood pressure.¹ These drugs depress the central nervous system, as does microwave radiation; the combination of both makes for a poor outcome. You can come off statins cold turkey, but the other drugs, including blood pressure medications, require a gradual weaning. Inhibitory recreational drugs like marijuana and opium also make users vulnerable to the effects of microwave radiation and other types of EMF.

Above all, make your home environment

as free from electromagnetic radiation as possible. That means using a computer rather than a tablet or cell phone. Have the computer wired in, and turn off the router. Your mouse, keyboard and printer should also be wired. An EMF meter held up to your computer should show a green light, indicating that it is safe to use.

Minimize use of cell phones and even cordless phones—use an old-fashioned corded landline—and never put a cell phone or cordless phone up to your ear. Don’t keep a cell phone in your bedroom while you sleep.

Increase your supplements before and after traveling, and do your best to avoid crowds where many people will have cell phones. Until the public learns about the dangers of microwave radiation and takes steps

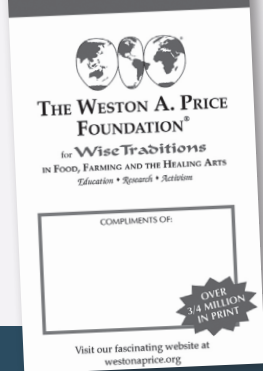
to minimize EMF in theaters, stadiums, airports and other public places, it's the prudent thing to do. 

Sally Fallon Morell is founder and president of WAPF, editor of Wise Traditions, owner of New Trends Publishing and author of many books. Her most recent (co-authored with Tom Cowan) is The Contagion Myth: Why Viruses (including "Coronavirus") Are Not the Cause of Disease.

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WAPF Chapter Leaders' Health During Covid: A Survey

By Joyce Campbell

As Covid-19 emerged and developed into a world-wide pandemic, it soon became apparent that underlying health issues in the general population were contributing significantly to the problem. Elderly people with comorbidities—particularly obesity and diabetes along with heart and/or lung disease—were experiencing more frequent and more serious illness, and were significantly more likely to die from their illness. As those familiar with the Wise Traditions diet know, obesity, diabetes and heart disease are all strongly associated with the modern diet of processed, industrialized food.

The Weston A. Price Foundation (WAPF) decided to conduct a survey of our chapter leaders to understand better how people who eat in accordance with WAPF principles have fared during the pandemic.

More than
97 percent of
chapter
leaders
described
their health
as “excellent”
or “good.”

Why chapter leaders? Chapter leaders are a very important part of the Foundation, forming a personal link among the Foundation, WAPF members and the general public. Chapter leaders provide information and advice on many aspects of nutrient-dense food, such as where to find raw milk and grass-fed meats, and how to ferment certain foods, soak or sprout others and make homemade broths and breads. Many chapter leaders hold meetings and other events that help bring traditional nutrition to life. Thus, chapter leaders constitute a large group of people who are likely to be regularly consuming the nutrient-dense foods recommended by WAPF.

The completely confidential survey covered five topics: background information, personal health during 2020-2021, personal dietary details, electromagnetic frequency (EMF) exposure and vaccinations.

What follows is an overview of what we found out about this group of dedicated and energetic individuals willing to share their experiences. As this was not intended to be a clinical scientific study, I am not presenting columns of statistics but instead focus on what the responses tell us about how consumption of a Wise Traditions diet might influence human health, whether in an emergency or in any other situation.

BACKGROUND INFORMATION

WAPF has three hundred forty-nine chapters. Two hundred eighty-two of those serve the District of Columbia and every state in the U.S. except Arkansas, Delaware, Mississippi and West Virginia. Another sixty-seven chapters serve thirty-two other countries around the world.

Of the three hundred forty-nine chapters, one hundred seventy chapter leaders responded to our survey (49 percent). Nearly half had been members of WAPF for more than ten years. About two-thirds were between the ages of forty and sixty-five, with others ranging in age from twenty to over sixty-five. The vast majority of respondents were female, with less than 15 percent male. (Note: These characteristics do not represent all chapter leaders, only those who responded to the survey.)

We asked where the chapter leaders lived, and here the response was interesting: more than two-thirds live in a suburban or rural area, while less than half live in a small town or in a large urban area. This could have implications that we'll return to later.

PERSONAL HEALTH DURING THE PANDEMIC YEAR

When asked about the presence of pre-existing conditions or comorbidities, these chapter leaders confirmed the results of a healthy diet: over 80 percent reported *no* pre-existing comorbidities, and more than 97 percent described their health as “excellent” or “good.”

Fewer than 10 percent claimed to have experienced Covid-19; another 25 percent were uncertain but had symptoms that may have indicated Covid-19. In coming to their conclusions about their illness, some respondents took a PCR test (known to be unreliable) and one consulted a physician, while others used alternative methods such as muscle testing or simply relied on symptoms. All but three rated their illness as “mild” or “moderate.” The majority were aware of a particular situation that likely had led to their illness. The most frequently cited reasons were eating poorly, getting inadequate sleep or “experiencing extra stress due to unusual circumstances.”

We also asked respondents if they had experienced any increased exposure to EMFs prior to their illness. Approximately two-thirds said no, with one-third responding yes. We will return to this subject in the summary.

INDIVIDUAL DIETARY DETAILS

And now we come to the fun part: food! How do our chapter leaders eat? The answer, not unexpected, is that they eat really well. For example, fully 98 percent eat whole, unprocessed foods. Between 80 to 97 percent eat the following:

- Beef, lamb, game, organ meats, poultry and eggs
- Full-fat milk products from pasture-fed animals (raw or fermented)
- Animal fats such as lard, tallow, butter,

cream, ghee and egg yolks

- Fresh fruits and vegetables, preferably organic
- Traditional oils such as olive oil

Many chapter leaders also enjoy fermented vegetables, fruits, and beverages; properly prepared whole grains, nuts and seeds; wild fish and fish eggs; and homemade broths.

Only one thing surprised me in this list; just 45 percent of chapter leaders said that they consumed cod liver oil regularly. Cod liver oil is recommended as part of a Wise Traditions diet as a source of balanced vitamin A and D, both of which (in combination with vitamin K₂) are very supportive of good health and particularly respiratory health. I wonder why more chapter leaders are not taking it—is it because they do not consider it valuable or they cannot afford it, or is there some other reason?

EXPOSURE TO ELECTROMAGNETIC FIELDS

This section asked various questions about EMF exposure both inside and outside the home. Sadly but not surprisingly, it seems we are all exposed to a significant amount of EMFs. The survey indicated that the largest source of EMFs inside the home comes from twenty-four-hour-a-day Wi-Fi and cell phones; outside the house, the prominent sources of exposure are power lines and cell phone towers.

The vast majority of respondents characterized their exposure as “moderate,” but it is unclear what that means. It may mean, “Well, my exposure seems similar to that of everyone else I know,” but does that mean it’s a moderate level in terms of safety? More likely, it means that everyone is exposed to way too much EMF, with as-yet-uncertain consequences.

VACCINATIONS (“THE JAB”)

Although many WAPF members are doubtful about the virus theory of Covid-19 and fully understand that the “shots” are not vaccines and do not fit the legal definition of a vaccine, I have chosen to use the terms “vaccine” and “vaccination” because they are terms that all of our readers will be used to seeing.

In this section, we get a sense of chapter

leaders’ responses to the sometimes difficult decision of whether to get “the jab.” Here again, most chapter leaders have defied mainstream advice by declining to get inoculated with the Covid vaccines. Ninety-three percent (155 respondents) said they are not vaccinated. Just three chapter leaders reported being fully vaccinated with either the Pfizer or the Moderna version, while eight respondents chose to try homeoprophylaxis (an approach that uses homeopathic “nosodes” to prevent disease).

It is important to keep in mind that it might be hard for any of our chapter leaders to admit to being vaccinated, as they likely assume that most of their colleagues are not. We do not look down on anyone’s decision; it has been an extremely difficult choice for many, and pressures from within and without the individual can only be dealt with by that person alone. For example, two of the vaccinated respondents said their decision was voluntary, but one said it was not. The survey asked about side effects from the vaccines, providing a list of the most common ones. Interestingly, all vaccinated individuals bypassed the common side effects and chose “other.”

SUMMARY

What do our chapter leaders have to tell us? The first thing might be “question authority.” When it comes to food, this is something that WAPF has been doing since its inception, as did the Foundation’s inspirational predecessor, Dr. Price, who questioned the direction industrialized food was taking in his own time. And our chapter leaders do, too: their responses show a clear rejection of mainstream dietary advice.

The personal health questions revealed that chapter leaders are a very healthy group of people, with few to no instances of the chronic diseases that plague our wider society, including individuals who follow mainstream advice. That is not an accident.

The Wise Traditions diet is replete with many of the nutrients that scientists, and even the mainstream media, have recommended as helpful in preventing Covid-19. Take, for just one example, vitamin D. First up is cod liver oil, a powerhouse of nutrients. One or two tea-

What do our chapter leaders have to tell us? The first thing might be “question authority.” When it comes to food, this is something that WAPF has been doing since its inception, as did Dr. Price, who questioned the direction industrialized food was taking in his own time.

spoons a day provide the daily dose of vitamin D. That vitamin D is balanced by the appropriate level of vitamin A, a crucial factor ignored by those who tell us to take a vitamin D supplement (which usually does not contain an appropriate balance of vitamin A). Vitamin A is well known to help with respiratory illness. The Wise Traditions diet also includes foods containing vitamin K₂ such as hard aged cheeses, chicken, duck or goose liver, butter and egg yolks from pastured animals, difficult to find in most conventional diets, and the recommendation to take K₂-rich butter oil or emu oil in tandem with cod liver oil. Other foods recommended in a Wise Traditions diet that also provide vitamins D and A are egg yolks from pastured chickens, fish eggs, and raw milk, cheese and butter.

Zinc is another “supplement” being recommended for Covid prevention, which our diet provides via red meat and wild-caught shellfish. Vitamin C is also plentiful in many Wise Traditions foods such as fermented vegetables, sauerkraut, raw milk and others.

Our chapter leaders’ responses show that they have also questioned the mainstream advice to get vaccinated with the experimental Covid-19 injections. Knowing some of the chapter leaders via email, I am quite certain that our chapter leaders did their own often considerable research on the vaccines before making a personal decision, rather than simply trusting the “experts.”

On a different topic touched upon in this survey, the responses do not provide us with a clear picture of the influence of EMFs on chapter leaders’ health. Certainly, chapter leaders are exposed to many sources of EMFs, and twenty-two of those who experienced possible Covid symptoms reported an increase in EMF exposure prior to their illness; however, thirty-three did not. In order to make more sense of the influence of EMFs on this group of chapter leaders, more detailed information would be required.

Similarly, it would be interesting to explore in more depth the possible impact of geographic location on Covid-19. Given that two-thirds

of the chapter leaders who responded to this survey live in rural or suburban areas—places with less population and lower population density—how might this affect disease numbers and intensity of illness compared to individuals living in large urban areas?

Overall, our survey provides a picture of a large group of adults who regularly eat a Wise Traditions diet enjoying very good health during this past year’s international health crisis. Many thanks to the chapter leaders who participated in the survey, and who continue to provide life-saving information to people around the world! ☯☯

Joyce Campbell has been a member of the Weston A. Price Foundation since the year 2000. At that time, she was an overwhelmed, overweight, exhausted ballet teacher at Kutztown University, Pennsylvania. Switching to a Wise Traditions diet quickly restored her health and energy, brought her weight back to normal and inspired her to dig deeper into the wisdom of nutrient-dense food. She is currently a WAPF chapter leader for the Ithaca, NY area. She loves watching what happens when people get their first taste of raw milk, homemade bone broth, traditional sauerkraut and other WAPF specialties. She continues to teach ballet, studies the Scottish Gaelic language, plants herbs and enjoys life in an intentional community with her husband and four cats.

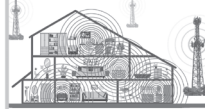
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The Low-FODMAP Diet: A Proven Gut Therapy

By Dr. Michael Ruscio, DNM, DC

FODMAPs are short-chain carbohydrates that some people have difficulty digesting. Research shows that a low-FODMAP elimination diet can be an effective diet for treating gastrointestinal symptoms associated with irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD).^{1,2} The low-FODMAP diet also has been shown to reduce pain associated with fibromyalgia³ and increase quality of life for patients with chronic digestive conditions.¹

Because of its effectiveness, the low-FODMAP diet is one of the most common diets we recommend at my clinic, the Ruscio Institute for Functional Medicine.

While the low-FODMAP diet can be a powerful therapy, it's not intended to be a long-term solution. Rather, individuals can use the diet as a temporary tool to improve gut health and bacterial balance.

It's important to note, however, that while the low-FODMAP diet can be a powerful therapy, it's not intended to be a long-term solution. Rather, individuals can use the diet as a temporary tool to improve gut health and bacterial balance, after which point they can begin to reintroduce nutritious foods that were previously eliminated.

In this article, I'll discuss the basics of the low-FODMAP diet, who can benefit from it and how to implement it simply and effectively. I'll also provide guidance on what to do when transitioning off of the low-FODMAP diet and how to reintroduce healthy fermentable carbohydrates.

WHAT IS A FODMAP?

FODMAP stands for "fermentable oligosaccharides, disaccharides, monosaccharides and polyols." In a nutshell, foods that fall into these categories are fermentable carbohydrates that can feed unhealthy bacteria in the gut. FODMAPs include fructose (in many fruits and vegetables), lactose (dairy products), fructans (in grains like wheat), galactans (in legumes) and sugar alcohols like xylitol and sorbitol.

For those whose gut ecology may have imbalances or overgrowths, high-FODMAP foods can escalate gut problems, triggering more inflammation and worsening symptoms. The low-FODMAP diet is an elimination diet meant to help individuals identify foods that trigger symptoms. By temporarily restricting

consumption of high-FODMAP foods and then going through a gradual process of reintroduction, the individual can more clearly understand which specific foods are problematic and which can be safely consumed.

Essentially, the elimination period provides an opportunity for the gut to heal and for bacterial overgrowths or imbalances to be corrected.

While some people are highly sensitive to all types of FODMAPs and may need to stay on the full diet plan, most will be able to customize the diet to their needs. Simply lowering the overall consumption of FODMAP foods can help reduce the burden of symptoms. Knowing one's unique trigger foods provides a sense of control over food reactions.

It is interesting to note that two of the foods most commonly connected with food reactions—gluten-containing grains and dairy foods—are both high-FODMAP foods. Researchers suggest that FODMAP sensitivity may be a factor in many cases of non-celiac gluten sensitivity.^{4,5}

A GUT-HEALING DIET

The majority of research into the low-FODMAP diet has focused on patients with IBS and IBD. Research shows significant benefits for patients with both conditions.^{2,6,7,8}

It's likely that the low-FODMAP diet is also beneficial for a wider range of gut conditions. That's because with gastrointestinal disorders, labels can be tricky, and there is considerable

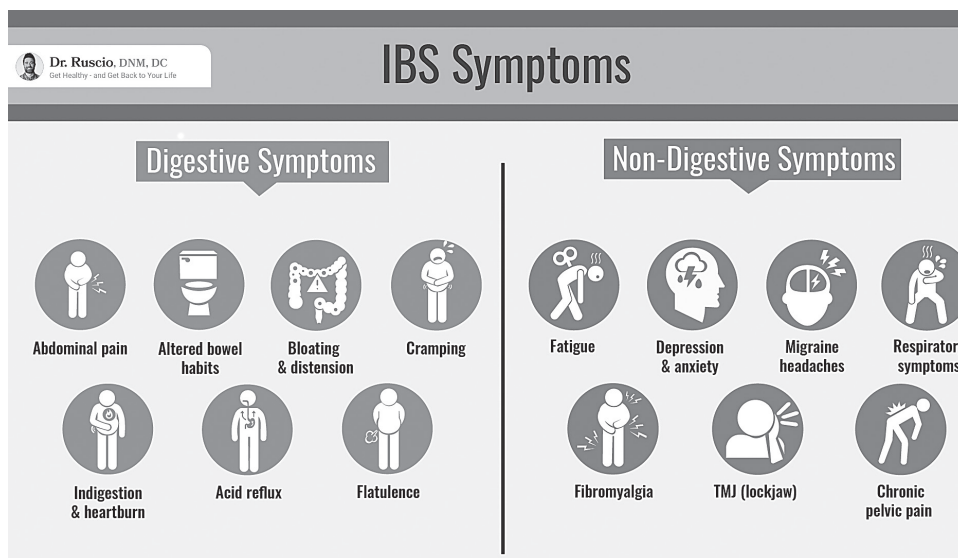


FIGURE 1. Digestive and non-digestive symptoms.

overlap among conditions. For example:

- IBS and IBD may occur in the same patients.⁹
- Across fifty studies, more than one-third of IBS patients tested positive for small intestinal bacterial overgrowth (SIBO).¹⁰
- Some researchers categorize celiac disease, non-celiac gluten sensitivity and lactose intolerance among the umbrella category of IBS-like conditions.¹¹
- IBS and IBD patients are more likely to have leaky gut (intestinal permeability).¹²

Furthermore, patients with IBS, IBD and other gut disorders share a surprising list of non-digestive symptoms, such as fatigue, headaches, anxiety, depression, joint pain, fibromyalgia and more (see Figure 1, previous page). Many of these “mystery symptoms” are the result of chronic inflammation, autoimmunity and even altered function of the central nervous system, which have their origin in poor gut health.^{13,14}

For those with gut-related conditions and symptoms, the low-FODMAP diet is a proven option that individuals can safely explore without need for a formal diagnosis or medical supervision. We recommend a two- to three-week trial of the full diet to see whether FODMAP restriction results in symptom improvement.

An underlying factor behind most gut conditions and symptoms is gut dysbiosis—an imbalance between healthy and unhealthy microorganisms in the intestinal tract. Practitioners

often compare an unhealthy gut ecosystem to a garden overgrown with weeds. Consuming high-FODMAP foods is much like adding fertilizer to a weed patch.

A low-FODMAP diet can result in significant improvements in the gut ecosystem, including reduction of bacterial overgrowths; less inflammation; healing of the gut lining; calming of overzealous immune responses; and better absorption of nutrients from food.

WHAT THE RESEARCH SHOWS

Two comprehensive meta-analyses (highest quality research evidence) determined that the low-FODMAP diet reduced overall digestive symptoms and abdominal pain, and increased the quality of life for patients with gastrointestinal disorders.¹²

Other research has shown that the low-FODMAP diet improved diarrhea in IBS-D;¹⁵ reduced digestive symptoms such as bloating, abdominal pain and gas;^{6,7,8,16,17,18} reduced leaky gut and gut inflammation;^{16,17} had a positive impact on gut endocrine cells, which can normalize bowel function;^{19,20,21} significantly improved histamine levels²² (although this finding has recently been challenged); and reduced pain for fibromyalgia patients.³

Another study indicated that the low-FODMAP diet works better than standard dietary advice.¹⁵ Research also suggests that the low-FODMAP diet may increase the amount of serotonin-producing cells in the intestines. Serotonin helps with reducing pain and with healthy motility (the movement of waste through the digestive tract).²¹ Finally, a randomized controlled trial found that the daily intake of most micronutrients for the low-FODMAP diet was stable and met the Recommended Dietary Allowances.²³

THE LOW-FODMAP DIET IN PRACTICE

For most people, implementing a new dietary approach of any kind can feel overwhelming. My recommendation is to keep the diet as simple and basic as possible as one begins. Prior to starting, it is also important to have a good understanding of the foods to focus on and those to eliminate temporarily.

TIPS FOR SUCCESS ON THE LOW-FODMAP DIET

KEEP IT SIMPLE. Making a dietary change can be overwhelming, but it doesn't have to be. When beginning, choose a few staple foods and recipes. It's okay to repeat meals when first starting. It will be easier to expand menu options and try new recipes once your food triggers have been identified.

PLAN AHEAD. Remove the high-FODMAP “foods to avoid” from the home and especially those that may be tempting to you. Stock the pantry and refrigerator with the foods you want to focus on eating. Create a simple low-FODMAP menu plan and use that to develop a standard grocery list. Batch-cook at the beginning of the week and store extra meals in the freezer.

BE AS STRICT AS POSSIBLE FOR TWO TO THREE WEEKS. During this time, follow the low-FODMAP diet as closely as possible. If the dietary changes are helpful, symptoms should improve during this time. Once symptoms have improved, you can slowly reintroduce one food at a time to identify your personal food triggers.

DON'T FEAR YOUR FOOD. As the digestive tract heals, the foods you can eat may change. You may find that you are able to eat moderate amounts of a food that previously caused a reaction. Don't fall into the trap of thinking you will never be able to eat your trigger foods again. Aim for the fewest dietary restrictions as possible and develop a healthy, non-fear-based relationship with food.

TABLE 1. The Low-FODMAP Diet: Safe Foods, Foods to Eat with Caution and Foods to Avoid

	SAFE	EAT WITH CAUTION	FOODS TO AVOID
VEGETABLES	Alfalfa, bean sprouts, bell peppers, carrots, cherry tomatoes, chives, cucumbers, eggplant, ginger, green beans, kale, lettuce, olives, parsnips, spinach, spring onion, tomatoes, zucchini	Avocado, beetroot, broccoli, brussels sprouts, butternut squash, cauliflower, celery, green peas, mushrooms, sauerkraut	Artichoke, asparagus, cabbage, garlic, leeks, onions, shallots, snow peas, sugar snap peas, radicchio, tomato sauces and paste
FRUITS	Banana (unripe), blueberries, cantaloupe, honeydew, kiwi, lemons, limes, mandarins, oranges, passion fruit, pineapple, raspberries, rhubarb, strawberries	Grapefruit, grapes	Apples, apricots, banana (ripe), blackberries, cherries, dried fruit, fruit juices, grapes, mango, nectarines, peaches, pears, persimmons, plums, watermelon
STARCHES	White potatoes, plantains, turnips, rutabaga, taro	Sweet potatoes	—
DAIRY & DAIRY ALTERNATIVES	Butter, cream, ghee	Aged cheese, almond milk, coconut milk	Fresh cheese, milk, yogurt
PROTEIN	Meat, poultry, fish and seafood, eggs	—	Anything breaded, gravies, stocks, broth, sauces or marinades prepared with unsafe ingredients
FATS	Coconut oil, lard, olive oil, macadamia oil, homemade mayonnaise	Avocado, guacamole	Salad dressings, sauces or marinades prepared with unsafe ingredients
NUTS	—	Cashews, macadamia, pecans, pine nuts, walnuts, pumpkin seeds, sesame seeds, sunflower seeds	Pistachios, almonds, hazelnuts
GRAINS	White rice, quinoa, millet, oats	—	Wheat, rye
TREATS	—	Dried coconut, maple syrup, coconut flour	High-fructose corn syrup, agave syrup, honey, sugar-free treats, artificial sweeteners
SEASONINGS/OTHER	Salt and pepper, fresh herbs, dried herbs, ginger, garlic-infused oils, lemon/lime juice, apple cider vinegar, nutritional yeast	Balsamic vinegar	Chicory, fructo-oligosaccharides, inulin, prebiotics, onion and garlic powder, gums, carrageenan, thickeners, sugar-alcohols
DRINKS/ALCOHOL	Water, tea, homemade bone broth	Teas with unsafe fruits, dry wines, coffee, kombucha	Sweet wines, beer, fruit juices, sodas

Table 1 summarizes the information I share with my patients when they prepare to start a low-FODMAP diet. The foods listed in the “safe” category are considered low-FODMAP and should constitute the bulk of what a person eats. Those listed under “caution” should be eaten sparingly and in small amounts. Those listed under “foods to avoid” should be eliminated as much as possible. Comprehensive FODMAP food lists can be found online and can be good resources to help get started.

At first glance, the low-FODMAP diet may seem counterintuitive because it eliminates a number of foods that are demonstrably nutritious. This is why it’s important to understand that a low-FODMAP diet is designed to be short-term. The foods one avoids on a low-FODMAP diet are not necessarily “bad”; they’re simply presenting a temporary challenge for the digestive system.

COMBINING THE LOW-FODMAP DIET WITH TRADITIONAL FOOD PRINCIPLES

The low-FODMAP diet temporarily restricts certain foods that are staples of a Wise Traditions diet. For someone who has been following the Weston A. Price Foundation’s dietary guidelines, this might be confusing. However, when followed properly, a low-FODMAP protocol—an elimination period followed by reintroduction and maintenance phases—can actually set a person up to do even better with a Wise Traditions diet and traditional eating principles.

Remember, the purpose of a low-FODMAP diet is to improve digestive health. Once the low-FODMAP tool has helped someone to accomplish that goal, he or she will likely have an easier time digesting some of the more challenging (but nutritious) traditional foods like milk, meat and grains.

LOW-FODMAP DIET TRIAL

There are three main phases of the diet: the elimination phase, the reintroduction phase and the maintenance phase. It may be helpful to track reactions or symptoms using a food journal.

The best way to know whether a low-FODMAP diet will work is to give it a two- to three-week trial. During this period, the desired outcome is a reduction in digestive symptoms and possibly non-digestive symptoms such as fatigue, headache and brain fog. Even minor symptom improvement should be considered an indicator of success. As a person continues with the diet, there will likely be more improvement as gut bacteria are rebalanced, inflammation subsides and the gut wall heals. If an individual does not experience any symptom improvement during the trial period, it’s likely the low-FODMAP diet does not work for that person. In this case, it is time to stop the diet and try something else.

ELIMINATION PHASE

During the elimination phase, the goal is to restrict consumption of high-FODMAP foods as much as possible. While doing the best one can, it’s important not to stress out about perfection.

After starting the elimination phase with a two- to three-week trial period, it’s time to assess whether there has been *any* symptom improve-

ment. If there have been improvements, that is an indication to continue with the elimination phase. One can expect to see more symptom improvement as one continues with the elimination phase.

REINTRODUCTION PHASE

Once a person has hit a plateau of symptom improvement, he or she can start the reintroduction phase. The goal of this phase is to identify which FODMAP foods aggravate symptoms.

At this point, it’s helpful to be methodical in the reintroduction approach, starting by testing one serving of a high-FODMAP food (starting with the foods one misses most). After reintroduction, monitor for any type of reaction, waiting twenty-four to forty-eight hours because reactions to high-FODMAP foods may not be immediate.

Common reactions include gas, bloating, diarrhea or constipation. Reactions can also include non-digestive symptoms such as joint pain, brain fog, depression or anxiety. If a reaction occurs, continue to avoid that food. Allow a few days for the gut and immune system to calm down before reintroducing another food. If no reaction occurs, add that food back into the diet and move onto the next food.

MAINTENANCE PHASE

The final phase of the low-FODMAP diet is the maintenance phase. During this phase, the goal is to continue to broaden one’s diet while maintaining symptom remission. This phase is all about personalizing and customizing the low-FODMAP diet according to the results of the reintroduction phase.

Over time, individuals can continue to experiment with foods and refine what works best for them. It’s not uncommon for a high-FODMAP food to cause a reaction early on but be well tolerated months later as the digestive system heals. Focusing on listening to one’s body will help pinpoint the long-term dietary approach that works best.

I encourage patients to eat as broadly as possible while managing symptoms. I see many people who needlessly follow overly restricted diets and develop a fear of food. This is counterproductive and creates stress. It’s important

to enjoy one's food as much as possible and let it be part of the healing journey.

ENHANCING DIGESTIBILITY


During the reintroduction and maintenance phases, the goal is to broaden the diet as much as possible without triggering symptoms. This means increasing the intake of healthy, higher-FODMAP foods.

There are a number of things one can do to enhance the digestibility of food and increase tolerance during these phases, including continuing to choose foods that are whole, unprocessed and nutritious; choosing whole raw milk from pasture-fed cows, or fermented milk products like kefir; and consuming whole grains that have been soaked, sprouted or soured.

PROBIOTIC SUPPORT

High-quality probiotic supplements are another safe, accessible and proven treatment that can make a significant difference in a healthy gut ecology. As with dietary changes, I recommend a two- to three-week trial; however, don't do more than one trial at a time. It's possible to start a trial of probiotics either before or after the low-FODMAP trial, monitoring symptoms. If any symptoms improve while taking probiotics, continue to take the probiotic supplement.

WORTH A TRY

For individuals experiencing gastrointestinal symptoms or struggling daily with a diagnosed condition like IBS or IBD, a temporary low-FODMAP diet can be a valuable tool. The low-FODMAP diet can help to manage symptoms, rebalance the gut ecology over time and improve quality of life. In combination, a low-FODMAP diet and quality probiotic supplements are effective, research-backed therapies that are safe and accessible to try at home. Although the diet and the probiotics should be trialed separately, together they can form the basis of a long-term strategy for better gut health. 

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clinical and research team, both via clinical experimentation and published research. His primary focus areas are digestive health and the impact of digestive health on other facets of health including energy, sleep, mood, thyroid function and optimization. His work has been published in peer-reviewed medical journals, and he speaks at integrative medical conferences across the globe. He also runs an influential website and podcast at DrRuscio.com and sees patients in his clinic.

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Reading Between the Lines

By Merinda Teller

Fake Meat and Other Fake Foods: Synthetic Biology Wolves in “Sustainable” Sheep’s Clothing

Over the past two years, the “Covid” narrative has provided an all-too-effective cover story for a worldwide takeover by central bankers and technocrats, one that is leaving no sector of society untouched.¹ Although it is still difficult for many members of the public to grasp the financial and governance implications of this globally imposed “reset,”² some have taken notice of ominous developments in the areas of food and farming.

With restrictive Covid policies reshaping everything from farmland ownership³ to meat processing⁴ to restaurant eating⁵ to food costs and availability,⁶ it is clear that critical battle lines are being redrawn. And one of the most disturbing new battlefronts has to do with the most age-old of rights, one that Maine voters just took the precaution of enshrining in their Constitution: the “natural, inherent, and unalienable right to food, including. . . the right to grow, raise, harvest, produce and consume the food of [one’s] own choosing.”⁷

Although food freedom has been under attack for a long time (as Weston A. Price Foundation members⁸ and regenerative farmers like Joel Salatin know only too well⁹), it is becoming increasingly evident that the perpetrators include a wider range of players than just the regulatory bullies at the U.S. Department of Agriculture (USDA) and U.S. Food and Drug Administration (FDA). Consider the bizarre tweet put forth by the Federal Reserve Bank of St. Louis just before Thanksgiving, which encouraged Americans to eat a “soybean-based dinner” instead of turkey.¹⁰ The Federal Reserve blog post that prompted the tweet helpfully explained, “A tofurkey (soybean) dinner serving with the same amount of calories [as a serving of turkey] costs \$0.66 [versus \$1.42] and provides almost twice as much protein. Keep in mind that this plant-based meal would be almost three times larger by weight than the poultry-based

meal and may either keep you at the dinner table longer or provide you with more leftovers.”¹¹

If it seems odd that central bankers are meddling with Americans’ holiday food choices, it’s time to recognize their promotion of a new zeitgeist¹²—a “post-Covid” synthetic-biology promised land. “Synbio’s” proponents describe this new scientific frontier as the leveraging and manipulation of the “script of life” to make “useful materials.”¹³ With the help of tools such as CRISPR gene editing,¹⁴ scientists insert synthesized pieces of DNA into an organism’s genome, “exponentially accelerating gene evolution.”¹⁵ As the National Institutes of Health (NIH) blandly tell us, these inserted pieces “could be genes that are found in other organisms or they could be entirely novel.”¹⁵

Spearheading the synthetic biology coup is a host of players: big ag,¹⁶ big tech,¹⁷ medicine/pharma,¹⁸ the military,¹⁹ Wall Street¹³ and others.²⁰ Illustrating some of these strange-bedfellow relationships, a 2018 MIT seminar series brought together creepy Harvard synthetic biology guru and Nebula Genomics founder George Church—who aspires to “build human (and other) genomes from scratch”—with representatives from Moderna, Novartis and Impossible Foods.²¹ Synthetic biology has even had its own annual conference, SynBioBeta, since 2012, launched by a former NASA synthetic biologist and described by cheery investors as having “an irreverent, counterculture vibe to it.”¹⁷

While these modern-day Dr. Frankensteins solemnly proclaim that the purpose of synthetic biology is to “solve problems in medicine, manufacturing and agriculture,”¹⁵ the financial tea leaves tell a different story. The *sub-rosa* intent of synbio technologies like programmable cell-based biosensors²² has less to do with “solving problems” and more to do with the creation of “a surveillance-driven totalitarian system that uses new technologies to centralize economic

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In late 2017, there were an estimated one hundred sixty synthetic biology companies; today, there are something like six hundred.

flows—including controlling the ability to transact”—and eat—at the individual level.”²⁰

THE SYNTHETIC BIOLOGY “OPPORTUNITY”

Breathlessly billing “synbio” as “hot,”²³ “disruptive,” “transformative,”¹² “revolutionary”²⁴ and a twenty-first century “gold rush,”²³ investment research firms are pitching synthetic biology as one of the biggest opportunities going, telling those who recognize its “incredible potential” that they “stand to make fortunes.”²⁵ One investment advisor enthuses:

Synthetic biology involves reconfiguring the DNA of an organism to create something entirely new. It allows scientists to design living things with attributes and characteristics we desire. In short, it allows you to ‘program’ biology just like you would a computer! It’s a way to create

just about any product in the world. This is HUGE [emphasis in original].²⁵

In late 2017, an innovation-focused website described synthetic biology as “one of the fastest growing fields in terms of both information and *capital generation*” [emphasis added], with a “compound annual growth rate [of the synthetic biology market] of 24%.”²⁶ At the time, there were an estimated one hundred sixty synthetic biology companies; today, there are something like six hundred.²⁵

The funds driving this “boom” come from two main sources: private capital and the Department of Defense (DOD)—primarily via the Defense Advanced Research Projects Agency (DARPA).²⁶ And tech billionaires dominate the list of private capital players (see Table 1). Bryan Johnson (current CEO of Kernel, “a groundbreaking company building technology to measure brain activity,” and past CEO of

TABLE 1. Leading Synthetic Biology Investors^{25,52}

INVESTOR	VENTURE CAPITAL FIRM	SELECTED SYNBIO INVESTMENTS
Marc Andreessen (Netscape)	Andreessen Horowitz	Benchling
Jeff Bezos (Amazon)	Bezos Expeditions	Nature’s Fynd
Richard Branson (Virgin)	Virgin Group	Upside Foods/Memphis Meats
Bill Gates (Microsoft)	Breakthrough Energy Ventures	Beyond Meat, Eat Just, Ginkgo Bioworks, Impossible Foods, Nature’s Fynd, Pivot Bio, Upside Foods/Memphis Meats
Bryan Johnson (Braintree/Venmo, Kernel)	OS Fund	Arzeda, Catalog, GRO Biosciences, Ginkgo Bioworks, HelixNano, Lygos, Pivot Bio, Synthego, Synthetic Genomics
Vinod Khosla (Sun Microsystems/Java)	Khosla Ventures	Eat Just, Impossible Foods, Opentrons, Ukko
Max Levchin (PayPal, Affirm Holdings)	SciFi VC (mission: “to bring science fiction to reality”)	Bolt Threads
Kimbal “real food for everyone” Musk (Kitchen Restaurant Group, Tesla Board)		Upside Foods/Memphis Meats
Eric Schmidt (Google)	Google Ventures, Innovation Endeavors	Bolt Threads, GRO Biosciences, Impossible Foods, Ukko, Zymergen
Peter Thiel (PayPal, Palantir)	Founders Fund	Bolt Threads, Eat Just, Emerald Cloud Lab, Synthego
Jerry Yang (Yahoo!)	AME Cloud Ventures	Catalog, Eat Just

Note: Synbio companies describe their activities as “bioproduction”; “biofacturing”; “custom-built microbes”; “microbial engineering”; design of programmable and CRISPR-engineered cells; design of proteins “never before seen in nature”; digital DNA engineering; DNA-based digital data storage and computation; protein therapeutics; protein engineering for food allergies; mRNA “improvements”; production of lab-grown and plant-based “meat” and “eggs”; “sustainable agriculture”; synthetic nitrogen production; use of pipetting and science robots; and “biocrafted” fabrics.

Braintree and Venmo) has a hand in at least nine different synthetic biology companies. Johnson has stated, “Synthetic biology is like playing with LEGO blocks. You can build pretty much whatever you can imagine.” He rhapsodizes that whereas “the previous era was built on silicon, the future will be built on atoms, molecules, organisms and complex systems.”²⁷

Johnson’s venture capital synbio portfolio runs the gamut from mRNA therapeutics to agricultural applications such as those made by Pivot Bio, “a scalable proprietary tech platform that enables microbes to reliably produce nitrogen for cereal crops”; early grants from the Gates Foundation helped launch Pivot Bio.²⁸

THE “SUSTAINABILITY” MARKETING GIMMICK

Many synbio proponents are making a “straightforward economic argument for using synthetic biology,” claiming that “Bio-based raw materials can make a product more efficient, higher performance, and most often cheaper than the legacy products they’re displacing.”¹³ Such claims are somewhat disingenuous, however, eliding the fact that synthetic biology organisms essentially represent “the next generation of GMOs.”²⁹

In fact, NPR announced back in 2014 that GMOs are “old hat,” stating that “synthetically modified food is the new frontier.”³⁰ However, whereas “old hat” GMOs merely swapped genes from one species to another, synbio techniques make it possible “to create entirely new

life forms, as well as genetically ‘reprogram’ existing organisms to produce a new type of life that behaves in new ways or that produces substances that it wouldn’t produce naturally.”³¹

Aware that synthetic-biology ingredients are likely to give the GMO-leery public “the heebie-jeebies,”³² corporate players have a ready response: synbio innovations, we are told, are solutions to “climate change.” For example, citing climate change as a threat to the coffee bean, a Finnish research group has developed lab-grown coffee and suggests its product “could . . . do the planet a huge favor” by allowing coffee drinkers to consume a beverage “that smells and tastes almost the same as conventional coffee” but “without the environmental guilt” (and never mind the potential “loss of livelihood for the 20 million rural poor and smallholders who rely on coffee growing”).³³

In the current environment where consumers are only too eager to virtue-signal their support of “sustainability,” the hope is that passing off synbio as “green” and “virtuous” will short-circuit at least some members of the public from asking deeper questions about unforeseeable genie-out-of-the-bottle consequences, ethical considerations or other risks. What are those risks? Although many are similar to those posed by first-generation GMOs, synbio techniques, critics note, are “more powerful, faster, and present a broader array of potential consequences.”³¹ These include the dangers of environmental contamination, increased demand for unsustainable feedstocks (such as

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SYNBIO—FAR FROM “GREEN”

Synthetic biology vanillin, developed by the Swiss company Evolva in partnership with International Flavors & Fragrances, is made with a synthetic genetic code inserted into yeast. In 2013, the organization Friends of the Earth warned consumers about the impending, unlabeled arrival of synthetic biology vanillin—“coming to an ice-cream cone near you”—and emphasized, “Production of synthetic biology vanillin is not environmentally sustainable at the industrial scale.”⁴³

Among the problems with claiming that synbio vanillin is “green,” Friends of the Earth highlighted the following:

- Efficient vanillin synthesis requires an “immense amount of sugar.”
- This “encourages monocultures of fast-growing sugars instead of the rich biodiversity of the tropical ecosystems which are host to the vanilla orchid.”
- Sugar plantations often contribute to environmental degradation, and many are infamous for poor working conditions.
- There are no data on whether synthetic biology vanillin is safe to eat.

Of greatest concern, the environmental organization stated, “Synthetic organisms threaten biological diversity if they escape into the environment—either intentionally or unintentionally from a lab. Once ‘living self-replicating organisms’ are released, there is no way to remove them. They could become a new class of invasive species or pollutant and disrupt ecosystems.”

Even with
“meat prices
on the rise, it
appears many
Americans
would rather
pay extra
for animal
protein or
do without it
rather than
try Beyond
Meat’s
synthetic
plant-based
protein
products.”

the commercial sugar used in synbio fermentation), problems of seed contamination, unknown effects on health and potentially devastating impacts on the small and genuinely sustainable farmers who produce the artisan products (vanilla, saffron, cacao, coconut, shea butter, stevia—and coffee) that synthetic biologists seem to be targeting.³¹ Scientists admit that synbio organisms “will inevitably escape into the environment,” where they have the potential to self-replicate.

Related to the verbiage about sustainability are the déjà vu claims that synthetic biology is the answer to global hunger—the very same claim once made about GMOs! Arguing in favor of synthetic biology “innovations” to address hunger, German researchers stated in 2020, “Global food production needs to be increased by 70% to meet demands by 2050. Current agricultural practices cannot cope with this pace and furthermore are not ecologically sustainable.”²⁴

LET THEM EAT SYNTHETIC BEEF

As indicated by Bill Gates’ extensive investments focused on agricultural “transformation” and fake meat (including Beyond Meat, Eat Just, Impossible Foods, and Upside Foods/Memphis Meats), Gates is one of the leading front men in charge of shifting public attitudes about next-generation Frankenfoods. In October 2021, the billionaire made headlines with his advice that residents of rich countries switch to 100 percent synthetic beef as a key climate action step.³⁴ Gates is well aware of the marketing challenges, however, admitting that to tell people “You can’t have cows anymore”

is “politically unpopular.”³⁵ (For a topical case study, read the Fall, 2021 *Wise Traditions* article about the de facto banning of beef in Karnataka, India.³⁶) Also acknowledging the handicap posed by labeling legislation (which would, in Gates’ view, require fake beef “to be called. . . lab garbage”), Gates has coyly suggested that if consumers don’t fall for the notion of a “green premium,” then “regulation” could be used to “totally shift the demand.”³⁵

Unfortunately for Beyond Meat’s gung-ho investors, Gates’ October 2021 media tour to tout the wonders of synthetic beef seems to have fallen flat. On October 25, Beyond Meat experienced a 14 percent one-day decline in its stock price³⁷ amid reports that the company’s share value was down 60 percent over its January peak.³⁸ One news outlet noted that even with “meat prices on the rise, it appears many Americans would rather pay extra for animal protein or do without it rather than try Beyond Meat’s synthetic plant-based protein products.”³⁷ To redeem the company’s reputation, analysts are suggesting that Beyond Meat might have a brighter future in “easier-to-replicate” synthetic poultry and pork, rather than beef, and that “the way forward” might involve wholesale partnerships that make it possible to sneak fake meat products into school lunches and fast-food offerings.³⁸

Beyond Meat’s setback may not mean much for the fake meat industry as a whole, however, due to the startups’ many powerful backers and “full steam ahead” momentum. The *Corey’s Digs* website has outlined, for example, how lab-grown meat produced by the Israeli firm

REINVENTING RESTAURANTS: QR CODES AND NANOPARTICLES

In the U.S., draconian lockdowns and occupancy limits took out one hundred ten thousand restaurants and two and a half million jobs in 2020—one in four of total jobs lost—making it “the worst year for the restaurant industry in its history.”²⁴⁴ The majority of closed restaurants had been in operation for at least sixteen years, employing an average of thirty-two people.⁵ As trade magazine *QSR* put it, “The pandemic did not simply sweep brands on the brink off the cliff. . . . It plucked legacy operations and communities [sic] fixtures off the map.” The demise of many small and immigrant-owned restaurants also gave larger chain restaurants an opportunity “to expand and obtain prime real estate [sic] left behind. . . potentially locking in a permanent and inequality-widening change in the [restaurant] sector.”²⁵

Many restaurants are attempting to survive by adopting a more “tech-centric” business model. In fact, *Food Safety News* rosily predicts a “post-COVID restaurant environment [that] will look entirely different from before”; instead of mom-and-pop restaurants with candles and checkered tablecloths, the eating establishments of the near future will be characterized by QR-code-based menus, apps for reservations and ordering, “ghost kitchens” (carry-out and delivery only) and robotic “cashiers, cleaners and even cooks.”²⁴⁵ This space-age vision also includes “metallic nanoparticle coatings to sterilize and disinfect kitchen equipment”—and, no doubt, brave new synthetic biology ingredients.

Future Meat Technologies is gearing up to hit the U.S. market in a big way in 2022.³⁹ With tools like a “Smarter Food Safety Blueprint” and food traceability apps, the FDA and USDA are helping to get everything lined up for the lab-grown meat stampede. In addition to Future Meat Technologies and the two U.S. government agencies, other key players in the global “full scale agenda to remove the meat industry entirely” include NASA; various universities; Bill Gates; Beyond Meat, Impossible Foods (which already has products stationed in Burger King and Starbucks), Eat Just (plant-based alternatives to eggs) and Upside Foods (formerly Memphis Meats); Tyson Foods; Amazon; and the World Economic Forum, among others.³⁹

THE BIGGER PICTURE

It does not take too much digging to connect the dots between the various interventions rolled out by global technocrats in 2020 and 2021. As Corey Lynn of *Corey's Digs* explains:

The SAME companies and individuals that are involved with the 2030 agenda ‘Great Reset,’ that are rolling out the digital identities to get everyone onto the blockchain in order to control humanity, are also invested in the lab grown meat industry. Why? Because in order to control the masses, you have to also control the food, and meat is a good place to start. If anyone believes this is about climate change or sustainability, they’ve lost site [*sic*] of reality.³⁹

Lynn, who further notes that “Many of these same people are also involved with the Covid jabs,” has taken pains to document in a four-part series, the wider implications of digital identities and vaccine passports. In her analysis, digital identities are the spearpoint of “a coordinated attack against humanity” to “plug every human being into the smart grid, inside their smart cities, where a virtual and augmented reality awaits, all data is mined and surveilled, people become a labor force synced with robots, and everybody’s actions, access, and spending is controlled by a social and climate scoring system.”⁴⁰

Certainly, these wider trends are driving food fights in unprecedented science-fiction directions, almost making one long for old-fashioned regulatory bullying. To push back against those who would move humanity onto a *Soylent Green* diet, commit to WAPF’s “50-50 pledge” to spend at least 50 percent of your food dollars supporting local farmers and artisans,⁴¹ and consider working on food freedom bills such as Maine’s and those passed in several other states.⁴² More broadly, do whatever you can to help rebuild vibrant local economies and communities, while rejecting global tyrants’ dystopian vision of centralized control over your every move, every purchase, every thought—and every bite. ☺☺

To push back against those who would move humanity onto a *Soylent Green* diet, commit to WAPF’s “50-50 pledge” to spend at least 50 percent of your food dollars supporting local farmers and artisans.

PROFILE OF A SYNTHETIC MEAT VENTURE CAPITALIST

Greg Bohlen, a North Carolina-based venture capitalist, has a 1 percent ownership stake in Beyond Meat⁴⁶ and served on the company’s board until late 2019, having initially invested in Beyond Meat in a 2012 funding round.⁴⁷ Although Bohlen grew up on a cattle farm and is an “avowed meat eater,” publicly he supports Bill Gates’ proposition that meat substitutes “can help feed the world cheaply, easily and more efficiently than cattle farms.”⁴⁸ As of July 2019, Bohlen’s 1.6 million Beyond Meat shares (purchased for eight million dollars) were valued at over one hundred forty-four million dollars, with an August 2019 sale of tens of thousands of shares netting the investor nearly twelve million dollars.⁴⁹

These fake meat proceeds appear to be helping the venture capitalist, who is also an amateur vintner, with real estate acquisitions and genome-altering agricultural pursuits. Bohlen has been amassing hundreds of acres in the Chapel Hill area, with his most recent purchase being two hundred seventy-nine acres taken off the hands of a long-time local dairy farm.⁵⁰ Bohlen bills his vineyard as “regenerative” and “eco-friendly” while employing a genomics specialist and others to help him produce a genetically altered seedless muscadine grape intended for mass production. Interestingly, gene tinkerers have sought to produce a seedless muscadine since the late 1980s; more honest back then, they admitted at the time that such a grape would be so different from the ordinary muscadine that they “wouldn’t call it a grape” but would “have to come up with a new name.”⁵¹ Concerns expressed in the late 1980s about the opening of a Pandora’s box of genetic mutants are still relevant three decades later.

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Homeopathy Journal

HOMEOPATHY FOR COVID AND INFLUENZA-LIKE ILLNESS

By Anke Zimmermann, BSc, FCAH

All air-breathing animals are susceptible to upper and lower respiratory tract infections, usually associated with various viral, bacterial or fungal organisms. These include the common cold and different types of influenza (“flu”), usually thought of as associated with “viral” infections, including symptoms currently attributed to Covid-19.

Flu symptoms generally include fever, cough, body pains, headaches and, to a lesser extent, nausea, vomiting, diarrhea and nasal congestion. Most cases of the flu resolve naturally and without complications; however, there is a small chance of more serious outcomes in immunocompromised individuals, including outcomes like bronchitis, pneumonia, asthma flare-ups, heart problems and acute respiratory distress syndrome.¹ For older adults and people with chronic illnesses, these complications can sometimes be deadly.

Homeopathy has a long history of use in influenza as well as for complications such as pneumonia and respiratory distress. This article will discuss a number of very useful and important remedies that everyone would be well-advised to have on hand—as I was reminded of myself just recently. Freshly invigorated on all levels by attending the absolutely amazing Wise Traditions Conference 2021 in Allen, Texas, in early November, I was promptly felled by a bout of influenza (maybe Covid-19 if you believe the “positive” PCR test result) upon return to my dear homeland of Canada.

DAYS TWO AND THREE

Two days after returning home, I developed a mild headache and cough, which quickly morphed into a rather severe, splitting headache—and a persistent, dry, hard, bone-shaking, spasmodic, tearing and tickling cough—plus fever over the next twenty-four hours. I was

surprised how quickly my symptoms accelerated. I had not had a cough in over twenty years at that point, so this was definitely unusual for me. I just wanted to lie still in bed and not move, which was hard to do with the intense coughing. I had also lost all interest in my usual three to five cups a day of herbal tea and only wanted sips of cold drinks with ice.

Fortunately, every good homeopath would recognize the remedy *Bryonia alba* here, one of the most commonly used homeopathic remedies in many acute conditions. I took a dose of 30C and experienced almost instant relief of the coughing. What a blessing!

Bryonia alba as well as its cousin, *Bryonia dioica* (both are used in homeopathy with the same indications), have an affinity for all serous and mucous membranes, the pleura, the meninges, the gastrointestinal tract, the lining of the joints and membranes around the muscles. Once we understand this affinity, its usefulness as a medicinal substance becomes obvious, as pretty much everything in our bodies is wrapped in or covered by serous and mucous membranes. Historically, the plant was used in herbal form (and still is to this day) before Samuel Hahnemann—the founder of homeopathy—decided to make it into a homeopathic preparation on account of its inherent toxicity.

Most of the *Bryonia* patient’s symptoms are aggravated by movement, including talking, coughing, turning over in bed, being jarred and so forth. Dryness is also a prominent feature for *Bryonia*; throughout my flu episode, I found my mouth to be extremely dry, almost as if covered in dust on waking.

Bryonia can also be a useful remedy for injuries and trauma such as intensely painful sprains and fractures, which are worse from the slightest movement. It is also one of homeopathy’s main migraine and headache remedies. The *Bryonia* patient is often irritable but does not necessarily want to be left completely alone. Think of a bear hibernating in winter; he or she does not want to be disturbed but wants to just lie quietly and sleep until springtime, maybe then giving birth to a litter of cubs. “*Bryonia* = bear” is a good mnemonic.

Considering this incredibly wide range of action, it makes sense that *Bryonia alba* would be a top remedy for influenza, and it has been very successfully employed by many different practitioners around the world in the current coronavirus situation.²⁻⁵ I had to take the remedy very frequently for it to be effective, about every thirty to sixty minutes. At first, the 30C potency was helpful, but soon I needed 200C. With such intense symptoms, I could have used 1M and 10M, but I did not have these potencies available. I recommend that everyone have *Bryonia alba* on hand in all of these potencies in case of influenza-like illness.

THE HOME MEDICINE CHEST: A DOZEN HOMEOPATHIC REMEDIES FOR INFLUENZA-LIKE ILLNESS

ACONITUM NAPELLUS: One of the most useful remedies for the sudden and intense onset of acute symptoms, often related to shock, fright or exposure to cold and wind. Rapid inflammation of almost any organ system. A good, early-stage remedy, best given in high potency (at least 200C). One of the main remedies for early stages of croup.

ALLIUM CEPA: Homeopathic onion. Like the effects of cutting an onion, the vapors of which irritate the mucous membranes of the nose and eyes, this remedy can be helpful if someone suffers from fluid coryza with much sneezing,

ARNICA MONTANA: Though not usually thought of as a remedy for influenza, it nonetheless is most useful when the person feels sore as if beaten all over. The bed may feel too hard. Traditionally used in malaria and even typhoid fever.

ARSENICUM ALBUM: Homeopathic arsenic; one of the top acute remedies. Chilly and restless; has trouble warming up. General aggravation at midnight or from midnight to 1:00 or 2:00 a.m. Pains tend to be burning in nature. *Arsenicum album* was widely used as a prophylactic remedy in the early stages of the coronavirus situation in India.

BELLADONNA: Another top acute remedy, mostly used when conditions come on suddenly, often with high fever and great intensity of symptoms. Red/hot face, often throbbing pain; there can be hallucinations with fever. Common remedy in children with acute colds, flus or coughs. For pneumonia with *Belladonna* symptoms. Worse around 3:00 (p.m. or a.m.).

BRYONIA ALBA: As described, a most useful acute remedy. Always give based on the overall state of the patient, who is worse from any movement, is often irritable and may have high and prolonged fevers, dry mucous membranes and body pains. Indicated in bronchitis and pneumonia if the overall state fits.

CAMPHORA: Think of camphor rubs like Vicks VapoRub, which cools the skin and relieves coughs. The patient in the *Camphora* state is close to or in a state of collapse with icy coldness, yet does not like to be covered up and may even crave cold baths. Can be very depleted with a barely perceptible pulse; face may be cold and blue. Homeopathic *Camphora* has been successfully used in cholera epidemics. Has also been used extensively around the world to help in collapsed states of Covid-19 symptoms. I recommend people have this one on hand in at least a 1M potency.

EUPATORIUM PERFOLIATUM: Famous for its use in influenza. Keynote is tremendous bone pain. High fever, worse around 7:00 to 9:00 a.m., pain worse from motion. Terrible headaches where movement of eyes aggravates the pain.

GELSEMIUM SEMPERVIRENS: Influenza with weakness, heaviness, can barely lift the head. Eyelids heavy and drooping; may be trembling with weakness and feel faint on sitting. Can be a good remedy for congestive heart failure and potentially for heart symptoms related to influenza or Covid (and maybe the vaccines). Generally not thirsty. Often a remedy in children.

LYCOPodium: May be a good remedy in later stages of influenza, including Covid-19. Person craves air but is chilled by it. Short, rattling breathing, worse lying on back. Dry, tickling, teasing cough. Salty greenish-yellow, lumpy or foul expectoration. Unresolved pneumonia. Difficult respiration due to hydrothorax (water on the lungs) and/or hydropericardium (water around the heart), with flapping of wings of the nose. Feeling of tightness in chest with burning. *Lycopodium* is also complementary to *Bryonia*. Worse on right side, slow onset, physically weak, worse around 4:00 to 8:00 p.m.

OSCILLOCOCCINUM: My favorite first-stage remedy for acute cold and flu symptoms. Made in France from (what else?) duck liver! Taken in the first stages of sore throats, fevers and flu symptoms, can often greatly reduce symptom intensity. Take 5-10 grains every hour for a few hours (rather than following package instructions of taking a whole vial once a day).

OZONE: Homeopathic remedy made from ozone. Dark, pungent and toxic ozone (O₃) is opposite to colorless, odorless, life-supporting oxygen (O₂). Homeopathic ozone has been used in the collapsed and “unable to breathe” states of Covid-19 patients in advanced stages of illness. Exhaustion is common, sometimes with a sensation of a terrific heaviness “as if from a lead apron.” Interestingly, the remedy is associated with being able to understand higher levels of truth.⁷ Some practitioners are also using medical-grade ozone to help treat Covid -19.⁸ Italian researchers reported: “Systemic ozone therapy seems useful in controlling inflammation, stimulating immunity and as antiviral activity and providing protection from acute coronary syndromes and ischaemia reperfusion damage. . . . Systemic ozone therapy in combination with antivirals in COVID-19-positive patients may be justified, helpful and synergic.”⁹

PHOSPHOROUS: Another potentially very helpful remedy in complications of flu, including pneumonia. Lingering, tickling cough, worse with cold air, worse talking and laughing, worse lying on left side. Left-sided pneumonia with oppression of the chest and a painful, burning cough. May cough up blood.

DAY FOUR

On day four of the illness, my headache grew to immense proportions; even just moving my eyeballs hurt! Another famous flu remedy, *Eupatorium perfoliatum*, comes with precisely the indication of splitting headaches aggravated by movement of the eyes.

Eupatorium can be a marvelous remedy for flu with fever and horrible aching “as if the bones are broken,” especially backache. The patient may even feel like a CT or MRI scan is needed because the pain in his back and joints is so intense. *Eupatorium* can also be useful for malaria, which is quite similar to the flu in many ways.

DAYS FIVE AND SIX

After a few days of fever and coughing, I developed an annoying nausea and aversion to most foods, while being hungry at the same time. It was an awful feeling, and I tried a number of remedies to no avail. In retrospect, I probably just needed a higher dose of *Bryonia*, which also has indications for some of these symptoms. Finally, however, *Sepia officinalis*—a remedy often useful for morning sickness in pregnancy—provided complete relief.

Then I developed an intense burning sensation in my left nostril on inhaling, which went right up to the sinuses. Two doses of *Arsenicum album* (homeopathic arsenic)—famous for burning sensations⁶—put that symptom to rest.

Meanwhile, I also developed a feeling of faintness from being up for any length of time and actually passed out one night after going to the bathroom. Coming to, I found myself face down on the floor with a big scratch on my nose, and I crawled carefully back to bed on all fours. Interestingly, *Bryonia* is also a great remedy for vertigo, so in all likelihood, it again would have been more helpful in a higher potency. Ah, healer, heal thyself!

DAY SEVEN AND BEYOND

After a week of fever, coughing and mostly sleeping, my nose started to run like a tap, and I was sneezing a lot. A couple of doses of *Allium cepa*, a remedy made from onions, corrected this little phase.

I’m happy to report that as of this writing I

have almost fully recovered from my bout with the flu (Covid?), which took about ten days. I certainly learned a few lessons in the process, including the fact that this is not a trifle of an illness for anyone who is weak or immunocompromised. Without the aid of homeopathy, the level of coughing alone could certainly cause death—with the person unable to catch his or her breath—or the illness could move toward pneumonia, which of course influenza-like illness does every year around the world. For both Covid-19 and various types of influenza, respiratory distress syndrome and cytokine storms with sudden collapse can also occur as complications.

Homeopathy was definitely the most useful intervention for my own healing, but in addition I used high doses of vitamins D, A and K₂ as well as zinc, quercetin and echinacea, along with many liters of chicken broth. I also took some ivermectin and each time I took it, the ivermectin provided some relief from the coughing within about thirty minutes.

DON’T BE CAUGHT SHORT

There are a handful of remedies that everyone should have on hand in case of influenza (see sidebar). Keep in mind that you may need several different remedies as your symptoms change. Again, I strongly recommend that you have some higher potencies of these remedies on hand. The more intense the symptoms, the better a higher potency works. Also keep in mind that remedies may need to be given frequently—even every few minutes. Ideally, you should have a professional homeopath on speed dial if you’re trying to help weak, elderly or immunocompromised family members or friends. ☯☯

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Technology as Servant

BIOFUELS: THE UNHOLY MARRIAGE OF BIG AG AND ENERGY

By James Kirkpatrick

Between 2005 and 2010, massive biofuels programs enacted by the main OECD nations incentivized the blending of ethanol into gasoline/petrol and biodiesel into petroleum diesel.

On December 18, 2010, a twenty-six-year-old street produce vendor in Ben Arous, Tunisia named Mohamed Bouazizi, set himself on fire in the public square as an act of protest and terminal frustration over his personal situation. The straw that broke his back was an ordinary shakedown by Tunisian police for two hundred dollars and his lack of an administrative permit. Bouazizi's act of protest served as the ignition spark felt across the Mediterranean that led to what is generally known as the Arab Spring.

Popular uprisings and protests across the region resulted in three civil wars and an ousting of entrenched rulers from the western Sahara to Iran. The commonly ascribed root causes of the Arab Spring are autocratic and punitive rulers, lack of populist democratic norms, endemic state corruption, a ballooning population of young citizens and permanent unemployment or low prospects for social and financial fulfillment. Underneath these visible social factors, however, another less publicized factor played a key role in lighting the fuse: rapidly escalating prices for staple foods.

Despite the developed world being stuck in a global recession and the general collapse in commodity prices that occurred as fallout of the subprime-mortgage-induced financial col-

lapse of 2008, by 2010, global food prices—as measured by the United Nations Food and Agriculture Organization's (FAO's) Food Price Index (FPI)—had recovered and exceeded core food price levels during the commodities super cycle that occurred between 2000 and 2008 (Figure 1).

If the rest of the global economy was in a period of economic stagnation, why had international food prices become so elevated? The headline answer assigned at the time was climate change or weather-related food supply disruptions. These disruptions had occurred in Russia (forest fires), Australia (floods), Argentina (drought) and the Middle East (yellow dust/depleted aquifers) across 2010—an early example of “climate change” being blamed as the underlying cause of . . . everything.

BIOFUELS & THE GLOBAL FOOD SUPPLY

The less publicized and larger reason was that the global food supply-and-demand balance had fundamentally changed between 2005 and 2010. Massive biofuels programs enacted by the main OECD (Organisation for Economic Co-operation and Development) nations incentivized the blending of ethanol into gasoline/petrol and biodiesel into petroleum diesel. Ethanol is primarily produced from the

FIGURE 1:
Nominal means dollars of the day; real means inflation-adjusted. Empirical analysis suggests that when the FAO FPI or equivalent measure rises above 200, societal instability erupts in calorie-deficient regions.



fermentation of staple carbohydrate crops such as corn, sugar cane, wheat, barley and cassava/tapioca, while biodiesel is primarily produced through the esterification or trans-esterification of vegetable oil from soybeans, palm, rapeseed/canola, sunflowers and used or virgin cooking and frying oil.

Implementation of these programs began during the mid-2000s due to a complicated amalgam of reasons including rising crude oil and energy prices, questionable environmental and greenhouse gas (GHG) benefits, and farm region votes and financial subsidies.

Since 2000, the global supply of biofuels, produced for internal combustion engine usage, had grown from less than 200,000 bpd (barrels per day) to 1.7 million bpd, a roughly eightfold increase. (Note: This is on an Oil Equivalent Basis; the physical volumetric biofuel production is closer to 2.5 million bpd, but ethanol has only 70 percent the volumetric energy density of petroleum gasoline, requiring a conversion to compare on an equivalent basis.) Biofuels today comprise around 1.5 to 2 percent of the supply of refined products delivered globally. Production is concentrated in the U.S., Argentina and Brazil, Indonesia and Malaysia, and the European Union. The U.S. alone accounts for about 55 percent of global biofuel supply and demand, where 10 percent of just about every gallon of gasoline sold in the U.S. is ethanol (see Figure 2).

On a macroeconomic level, the corresponding impact on the food and energy markets is orders of magnitude apart: small for the energy markets at 1-2 percent of global refined product supply and quite large for the food side of the equation at greater than 10 percent of total

potential food supply. Biofuels programs upset the global food balance, inflaming regions that have the highest food import burden—namely, the countries of the Middle East, North Africa, sub-Saharan Africa and Northeast Asia (see map, next page).

To put things in context, global production of corn stands at approximately 1.1 billion metric tonnes, of which the U.S. produces a third (three hundred fifty million metric tonnes); a full third of the U.S. corn grown is designated for fuel ethanol and by-product production. What this means is that 10 percent of the global corn supply ends up being converted for fuel in U.S. gas tanks. In caloric or food supply terms, this number is even more alarming. Corn converted into fuel ethanol contains enough calories to feed 5 percent of the global population each year, or the entire population of the U.S. (three hundred fifty million people).

The UN currently estimates that seven hundred million people globally live in food scarcity or are chronically hungry. Let that sink in: slightly under 10 percent of the world's population is undernourished and calorie-deficient, even though world food production is enough to provide all of them with twenty-five hundred calories a day. Yet the global biofuels industry and politicians have successfully enacted legislation and policies that convert that equivalent volume of calories into fuel for internal combustion engines. Legislation that transforms edible food into a gasoline substitute when food scarcity is still prevalent is grossly immoral.

EMPTY CLAIMS

Biofuel advocates pushed most of the large-scale biofuel programs on the basis of three hypothesized benefits: increased energy independence (read this as reduced foreign imports of energy); reduced greenhouse gas emissions (burning biofuels instead of petroleum fuels); and the murky and ill-defined benefit of farm crop price support. Of these three purported benefits, only the last one has proven to have any legitimacy.

Since 2005, U.S. energy security or independence has increased substantially in that U.S. production of crude oil has grown from roughly 5 million bpd to 12 million bpd, with a subsequent drop in crude oil imports of 4-5 million bpd. However, the growth in domestic production has nothing to do with biofuels and everything to do with the application of new technology in the form of hydraulic fracturing in the oil patch.

If anything, a better argument can be made that biofuels programs increase energy insecurity. In the U.S., the biofuels program reduced

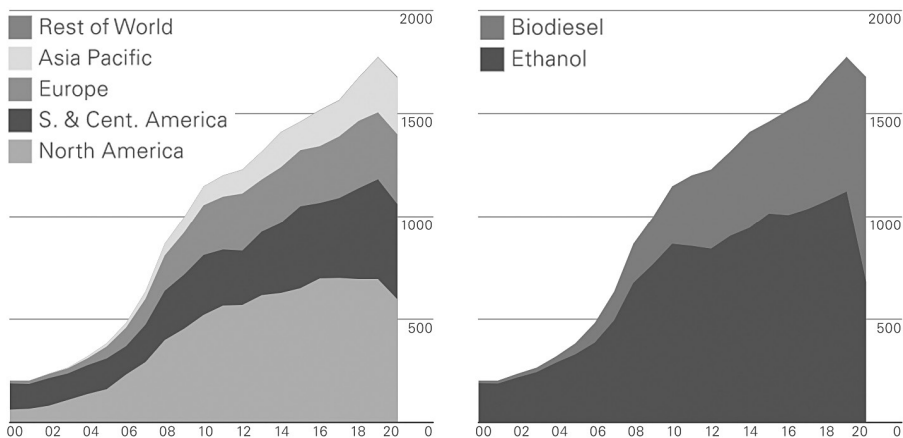


FIGURE 2:
Global biofuels production
(thousand barrels per day)

petroleum gasoline demand by 10 percent, affecting the refining balance in the U.S., where refineries are designed to disproportionately produce gasoline. Since 2008, eight refineries have closed down on the East Coast, leaving the region more dependent on gasoline imports and gasoline pipeline deliveries from the Gulf Coast. Both are prone to single-point supply disruptions.

The reported environmental benefits of biofuels were either oversold or outright fictitious. The central espoused environmental benefit of biofuels is the self-contained carbon dioxide cycle inherent in all plants, in which the crops absorb carbon dioxide through photosynthesis during the growing phase, only to rerelease the same amount of carbon dioxide through thermal combustion. It is true that on average a gallon of ethanol has a lower GHG emissions footprint than a gallon of petroleum gasoline (on a well-to-wheel basis which incorporates the GHG emissions with production, transportation, transformation and combustion) by about 20 percent.

This 20 percent GHG reduction holds true only when existing cropland (as of 2008) is used to grow the biofuel raw materials. If natural lands (such as prairies, forests, bogs, and other fallow areas) are converted into cropland to grow the biofuels, this “land-use change” in most cases releases more carbon dioxide into the atmosphere than is removed through the combustion of biofuels versus fossil fuels. This Titanic-sized loophole has the effect of making biofuels legislation net-negative GHG on paper, but often net-positive in real world application.

This is the big “if” behind the biofuels story and is even codified in the U.S. biofuels regulation.

Since 2005, almost ten million hectares of arboreal peat tropical rainforest in Indonesia and Malaysia have been cleared and converted into palm oil plantations, releasing an enormous amount of carbon in the process. The expected destination for most of this palm oil is—and was—conversion into biodiesel and export for consumption in Europe and the U.S. Ranges vary widely, but it is estimated that since 2015, land use change in those two countries is responsible for 2.5 percent of carbon emissions globally. This is more than the state of Cali-

fornia or the entire global commercial aviation industry. Similar clearing has occurred in Brazil, Argentina and the U.S.

One of the underlying premises of the U.S. biofuels program was an inherent expectation of GHG reductions through no change in existing land use-

age. This was to be reviewed and studied by the Environmental Protection Agency (EPA) and Congress every two years. However, since the passing of the U.S. Renewable Fuel Standard in 2008, no subsequent study has been commis-



MORE CONCERNS ABOUT BIOFUELS

Another concern about the use of biofuels centers on air pollution. As detailed in her article “Air Pollution, Biodiesel, Glyphosate and Covid-19” (Summer, 2020), Stephanie Seneff notes that one reason for the significant differences in Covid-19 susceptibility around the world may be the underlying toxicity burden of the population in each region. For example, studies have found a striking correlation between exposure to particulate air pollution and the likelihood of dying from Covid-19.

All of the Covid-19 hot spots share a common thread of a high rate of adoption of fuels derived from biomass, nearly all of which can be predicted to be heavily contaminated with glyphosate. Glyphosate could be released along various stages of biodiesel fuel production and use.

Animal studies comparing biodiesel fuel with standard diesel for their potential toxic effects indicate that biodiesel may be significantly more toxic.

Glycerin is a major waste product of biodiesel production, and both glycerin and its byproduct propylene glycol are e-cigarette additives. Symptoms seen in vaping illness match closely with symptoms of Covid-19.

Multiple mechanisms of glyphosate toxicity can plausibly explain the acute reaction to Covid-19 seen in patients who end up in the ICU. Inhaled glyphosate may substitute for glycine in important lung surfactants, compromising lung function. It is plausible that the rapid rollout of 5G may work synergistically with glyphosate to enhance effects seen in those with Covid-19.

EDISON VERSUS TESLA

In my last article, “The Electrification Revolution” (Fall, 2021), I erred in stating that “Edison’s alternating current system would become the chosen form for producing energy.” Actually, it was Tesla who advocated the alternating current (AC) system, which eventually prevailed over Edison’s direct current (DC) system.

The fathers of the electric revolution were three men of great modern renown, and bitter rivals, Thomas Alva Edison, George Westinghouse (the businessman) and his scientific partner Nikola Tesla. All three men contributed greatly to scientific progress and invention, but in the end the AC system of Westinghouse-Tesla would become the chosen form for producing mass electricity due to its inherent advantage, namely power transmission over long distances with lower transmission losses. This system persevered despite an aggressive propaganda campaign by Edison to demonize the safety of AC through the public electrocution of circus animals and convicted murderers.

After Edison solved the puzzle of the incandescent filament light bulb, he turned his attention to spreading the gospel of electricity and direct current. On January 12, 1882, Edison’s Electric Light Company began operation of the world’s first power plant in London. The coal fired power plant was known as Holburn-Viaduct Power Station. When operating, the Power Plant produced about 95 kW of electrical power (125 HP) and had the capacity to illuminate over seven thousand lamps across London. This first power plant produced Edison’s direct current electricity and the plant operated for only four years before closing, following significant financial losses. Edison’s second adventure into power generation started operation the same year (September, 1882) at the Pearl Street Station in New York City and had a similar troubled operating history.

The first major Westinghouse-Tesla foray in electrical power generation occurred in upstate New York at Niagara Falls, where a 5,000 HP alternating current hydroelectric power station was constructed between 1893 and 1896. The first operation transmitted electrical power to the City of Buffalo about thirty kilometers away. The harnessing of the Niagara River continues to this day with capacity of the rebuilt (several times) and modernized hydroelectric plant currently standing at 2,500 MW (3.4 million HP). This success, coupled with the positive publicity of the Westinghouse-Tesla exhibit at the 1893 World Fair in Chicago, ended the “War of the Currents” in favor of the Westinghouse-Tesla alternating current system and provided a new blueprint for humanity to harness the power of combustion and electrification.

sioned. The U.S. Department of Agriculture’s (USDA’s) online published data show that acreage planted for corn and soybeans has increased by 10 percent over that time.

FUELING INDUSTRIAL CROPS

Biofuels programs create artificial demand for the world’s major factory-farmed industrial crops. These types of crops are grown and developed mostly by corporate farm conglomerates or big corporations. These entities have been the ultimate beneficiaries of the U.S. and global biofuels programs, largely to the detriment of food supply, energy security and the environment. These programs should be called out for what they are—Big Ag corporate welfare, at the expense of everything else.

The main U.S. biofuels legislation is set to expire and/or come up for debate and renewal in 2022. Given the high costs to the global food supply and minimal-to-negative benefits on energy security and the environment, my position is that it should not be renewed. Given

the role of entrenched corporate and political interests in our legislative process, I suspect that this Frankenstein monster will be revived if not supercharged with more convoluted legislation—legislation that primarily serves the interest of Big Ag.

For you as an individual reader, a logical approach to forming your own opinion regarding the U.S. Biofuels Program is to make a personal list of winners and losers (or for-and-against camps) if the U.S. biofuels legislation were to be extended and renewed in its current form. My personal list would look something like the following:

Winners: corporate agriculture, farm state politicians, lawyers, consultants, lobbyists, traders and other supply chain intermediaries.

Losers: oil companies, beef producers, grocery retailers, environmentalists, malnourished populations worldwide, food importing regions, global ecosystem, food price inflation, and U.S. citizens. ☯☯☯

James Kirkpatrick is a mechanical engineer and energy analyst serving as president of JKF Associates.

The Wise Traditions Pantry

RECIPES FROM WISE TRADITIONS 2021

By Maureen Diaz

What a pleasure it was to work with the chefs and kitchen staff at the Marriott Dallas Allen Hotel and Convention Center. Here are some of the hit dishes served during Wise Traditions 2021.

PORK LIVER PÂTÉ

Serves 12 as an appetizer, 6-8 as an entrée

1 pound pork belly, ground
1 pound veal or pork, ground
1/2 pound pork liver,
soaked in lemon juice and rinsed
1/4 pound good quality bacon, separated
with half the bacon minced
1 clove garlic, minced
6 black peppercorns, crushed
8 juniper berries, crushed
2 teaspoons salt
1/2 teaspoon ground mace
1/4 cup dry white wine
2 tablespoons brandy

Thoroughly blend the meats (minus four whole slices of bacon) and liver, grinding together if possible. Add the seasonings wine and brandy, combine well and, if possible, let stand for 1 hour for the flavors to penetrate the meat. Turn into a 1-quart terrine or heavy loaf pan. Cut the remaining bacon into thin strips and arrange it across the top of the loaf.

Place in a baking pan filled with hot water (a bain-marie) and bake at 320° for about 1 1/4 hours. The loaf should come away from the sides of the pan when done; be careful not to overcook!

Remove from the water bath, being careful not to lose any of the fat. Cover with a piece of parchment paper and weigh this down with something heavy, if possible (not absolutely necessary, but helpful). Allow to cool and serve cold, or at room temperature.

The pâté may be kept for up to a week refrigerated, well wrapped and sealed with fat.



Sausage, chicken soup, sauerkraut, sourdough bread and plenty of butter, a nourishing conference lunch.



Maple flan, ready to go!

CHICKEN LIVER PÂTÉ

Makes about 1 pint

Recipe by Chef Hector Diaz

*1/2 cup rendered chicken fat,
or part raw butter or lard if necessary*
2 bay leaves
1/4 teaspoon freshly ground black pepper
1/2 teaspoon dry thyme
1 large onion, chopped
*1 1/2 pounds chicken liver,
soaked in lemon juice, rinsed, drained*
1 teaspoon salt
1/4 cup dry white wine

In a large skillet melt the fat(s) over medium heat. Add spices and onion (but not salt), cook for 5 minutes.

Add the livers and cook, stirring, until lightly browned, still slightly pink. Add the salt and wine, remove from heat and stir. The heat from within will complete the cooking of the livers, while the wine cools it down enough to not to overcook.

Cool the mixture, discard bay leaves.

Grind the mixture twice or finely mix in food processor, using the finest knife of a food grinder. Pack into containers, cover and chill overnight.

TEXAS ORGAN MEAT CHILI

Serves 10

1/4 cup olive oil or lard
2 pounds ground beef and pork
*1 pound organ meat (heart, kidney, liver, etc.), soaked in lemon juice,
rinsed, drained and ground*
1 large onion, chopped
4 cloves garlic, minced
1 cup beef broth
2 cups beer (lager or ale)
1 cup tomato purée
1/4 cup chili powder
1 tablespoon oregano
1 tablespoon cumin
2 teaspoons salt
1/2 teaspoon black pepper, ground
1/2 teaspoon cayenne pepper, ground

Sauté the onions, garlic and meats in the oil or fat until meat is browned. Add all other ingredients and simmer on medium low for 1 1/2 to 2 hours. Serve with sour cream, grated cheddar or jack cheese, chopped scallions and tortilla chips.

APPLE KRAUT

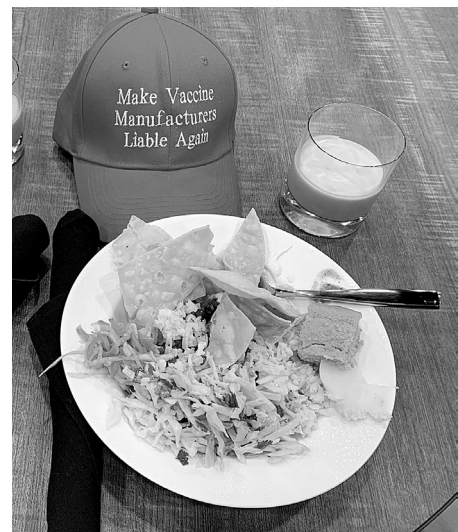
Makes about 1 quart

Recipe by Maureen Diaz

1 medium-sized head of red cabbage
1 pound Granny Smith apples
1-2 tablespoons salt



Seven hundred servings of vanilla panna cotta, awaiting the awards banquet.



A hat with a message, "Make Vaccine Manufacturers Liable Again," removed for lunch!

Shred the cabbage and grate the apples into a large bowl. Add 1 tablespoon salt, work together with your hands, squishing and squeezing to bring out juices. Taste the brine to test for saltiness, add up to a second tablespoon salt if needed. Pack into a quart-sized jar or crock, pressing down to release air pockets. Add a little filtered or spring water if needed, to provide about 1 inch of brine to top off. Cover with a lid loosely, or a fermentation air lock. Let sit at room temperature for 5-7 days, then refrigerate.

DILLY KRAUT

Makes about 1 quart

Recipe by Maureen Diaz

1 medium-sized head of cabbage
1 bunch fresh dill
1-2 cloves of fresh garlic, smashed
1-2 tablespoons salt

Shred the cabbage into a large bowl. Chop the aerial parts of dill and add this, along with the garlic and 1 tablespoon salt, to the bowl. Mix well, squishing and squeezing to produce brine. Taste and add another tablespoon of salt if needed. Pack into a quart-sized jar or crock, pressing down to release air pockets. Add a little filtered or spring water if needed, to provide about 1 inch of brine to top off.

Cover with a lid loosely, or a fermentation air lock. Let sit at room temperature for 5-7 days, then refrigerate.

THREE-BEET HONEY DIJON SALAD DRESSING

Makes about 1/2 pint

Recipe by Maureen Diaz

1/4 cup Dijon mustard
1/4 cup olive oil
1/4 cup apple cider vinegar
2 tablespoons honey
1 tablespoon Doctor Cowan's Garden Three-Beet Powder
1 clove garlic, minced
1 teaspoon salt

Place all ingredients in a pint jar, mix well with a fork or shake until well mixed.

COCONUT-LEMONGRASS PANNA COTTA

Serves 8

Recipe by Rosie Ueng

2 teaspoons gelatin
1/4 cup cold water
2 cups full-fat coconut milk
1/3 cup coconut sugar or sweetener of choice
2 stalks lemongrass, smashed with a rolling pin
grated zest & juice of 1 lemon

In a heavy sauce pan sprinkle the gelatin evenly across the surface of the water and allow it to sit, cold, for 5 minutes to “bloom.” Add the other ingredients and simmer slowly until the gelatin is dissolved. Pour into individual serv-



WONDERFUL SPEAKERS AT WISE TRADITIONS 2021

LEFT: David Martin gets the conference off to a rousing start.

RIGHT: Andrew Kaufman presents the case for the nonexistence of the coronavirus.



ing dishes, or a 3- to 4-cup glass or stoneware container. Cover with plastic wrap and chill for at least an hour, until set.

VANILLA PANNA COTTA WITH BERRY COULIS

Serves 6-8

Recipe by Maureen Diaz

4 teaspoons gelatin softened in 1/4 cup water
2 egg yolks, beaten
4 cups cream, preferably raw
1/4 cup maple syrup
1 tablespoon vanilla extract

After softening the gelatin in the water, add the cream, egg yolks and maple syrup. Gently simmer until the gelatin is fully dissolved; add the vanilla off heat. Pour into 6-8 individual serving dishes, cover and chill for at least 1 hour, until set. Place about 3 tablespoons berry coulis (recipe below) on top of each serving and chill.

BERRY COULIS

Makes about 1 1/2 cups

Recipe by Maureen Diaz

2 cups mixed berries (can be frozen)
1/2 cup port wine
1/4 cup coconut sugar
1/4 tsp salt
1 tsp vanilla extract

Simmer berries, port wine, coconut sugar and salt together in a sturdy sauce pan until the liquid is reduced by half. Purée with an immersion blender, or in a stand-up blender; strain if desired to remove seeds. Add vanilla and allow to cool.


MAPLE FLAN

Serves 12

Recipe by Maureen Diaz

1 3/4 cups dark maple syrup
3 large eggs
5 large egg yolks
2 1/2 cups cream
1/2 teaspoon salt

Bring 1 cup of the maple syrup to a boil in a heavy pan over medium heat, turn down and reduce to 2/3 cup. Cool until the foam is reduced, and pour into an 8-inch round pan or 8 individual ramekins to coat the bottom.

Gently whisk the remaining ingredients so as not to stir up foam. Pour into the baking dish or ramekins and gently place in a bain-marie in the center of a pre-warmed 325° oven for about 50-60 minutes, until the edges are set but the center is still wobbly. Carefully remove from the water and cool, then refrigerate for at least 4 hours. Turn over onto a dessert plate or plates to serve. 



WONDERFUL SPEAKERS AT WISE TRADITIONS 2021

LEFT: Larry Palevsky
talks about vaccine
dangers.

RIGHT: Greg Nigh
on challenges to
sulfur metabolism.



Wise Traditions Podcast Interviews

INTERVIEW WITH CHRISTINE MASSEY

COVID: NO RECORD FOUND OF SARS-CoV-2



Hilda Labrada Gore is the producer and host of our Wise Traditions podcast and a Washington, DC, co-chapter leader. An enthusiastic communicator, Hilda is passionate about wellness on every level, which is why she is known as “Holistic Hilda.” She is a speaker, podcast consultant and the co-author of *Podcasting Made Simple*. Hilda lives in Washington, DC, with her husband, children, dog and cat. Subscribe to her blog through her website (holistichilda.com) and follow her on Instagram: [@holistichilda](https://www.instagram.com/holistichilda).

HILDA LABRADA GORE: Curiosity has led a biostatistician down an unusual path. Intrigued by the concept that the SARS-CoV-2 virus has not ever been isolated, Christine Massey began inquiring of health departments around the world: “Do you have evidence of an isolated virus?” To date, over one hundred institutions from all over the globe have responded. . . and there has been no evidence in sight of SARS-CoV-2. Massey, a former cancer biostatistician and a passionate advocate for safe drinking water, discusses her research on the concept of viruses (and this “virus” in particular) and what she’s learned through hundreds of Freedom of Information (FOI) requests from health departments all over the world. She goes over how the cultures or samples used to “isolate” a virus actually interfere with the process, and she exposes the flaws in this methodology and the problems with PCR testing. She also explains why talk of “variants” is essentially nonsense. Christine, we’re so intrigued by this topic of the virus and its isolation. Tell us about the Freedom of Information requests that you submitted to the Centers for Disease Control and Prevention (CDC) and what their response was.

CHRISTINE MASSEY: We have five responses from the CDC. I have one done by my colleague in New Zealand, Michael, and this is the March 1, 2021 response to his request. Michael used the same wording that I used in my other requests. He was asking for any record describing “isolation” (in other words, “purification”) of this alleged virus from a patient sample without mixing in anything genetic. I’m not talking about culturing something, PCR tests or sequencing something. I’m talking about purifying this alleged virus. He had some back-and-forth with them. On page two, there are some interesting comments. I’ll read a quote from the bottom of page three: “The definition of isolation provided in the group request is outside of what

is possible in virology, as viruses need cells to replicate, and cells require liquid food. However, the SARS-CoV-2 virus may be isolated from a human clinical specimen by culturing in cell culture, which is the definition of isolation used in microbiology.”

HG: Help us understand that.

CM: Michael had asked for records where they describe separating this alleged virus from everything else in a patient sample. The CDC is saying that’s never done in virology. They’re not saying that they don’t have records for SARS-CoV-2—which is the name of the alleged Covid-19 virus—but they’re telling us in black and white: that is never, ever done in virology.

We had learned that already. We had heard this from Drs. Tom Cowan and Andy Kaufman, other people and from any alleged virus isolation paper that we had ever seen. We had it from the CDC saying that viruses do not get purified. It does not happen. What a virologist means by “isolating” something is to culture a specimen. That’s the patient sample. Dr. Cowan would say “snot” or something along those lines, but something from the patient, taking snot of the patient and culturing it in cell culture.

Your readers have probably heard about this a few times. It’s so strange what the virologists do. For the people who are new to this, it’s almost unbelievable. They take a patient sample, and then they put it in a cell line. With Covid-19, what they typically use is Vero cells—that’s a name for kidney cells from an African green monkey. They’ve got cells from a monkey, and the rationale that they give is that they need to give the alleged virus (or imaginary virus) a chance to replicate in cells.

According to virus theory, viruses have to have cells to grow. They don’t grow on their own. They need cells. For whatever reason, the virologists use monkey cells. They don’t use hu-

man cells, which would at least be a more logical thing to do. You still wouldn't be purifying anything, but at least you'd be doing something a little more logical.

The monkey cells need a source of nutrition, so they also add fetal bovine serum—serum from a baby cow. They add that, and then they also add some toxic drugs, antibiotics and antifungals. The reason is that they don't want these other things—bacteria and fungi—growing in the mixture and making things more complicated.

HG: They're putting together a strange concoction, and then they're trying to say, "This one ingredient in here is making us sick." How can they possibly distinguish that one ingredient? It's near impossible.

CM: What's even more ridiculous is they haven't identified any specific thing. They've done the exact opposite of what you would need to do. If you suspect that there's a new tiny little thing in humans, your first step should be to try to find it. That would be what a logical person would want to do. You'd want to find that thing.

HG: It seems they're muddying the waters instead of making them clearer.



WISE TRADITIONS PODCAST APP IS LIVE!

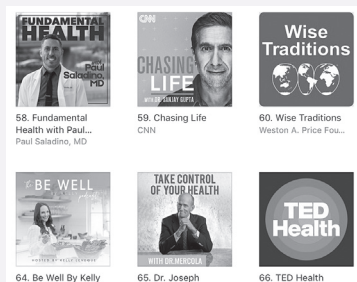
That's right, we have a podcast app now! Basically, this means that anyone can access our Wise Traditions podcast directly, anytime, without any middleman or censorship. The entire archive of shows is right at your fingertips through the app. And downloading it is as easy as 1, 2, 3.

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We're excited to make our information even more accessible through the podcast app.

If you don't have a smartphone, that's great—just listen from all of the familiar places—including our westonaprice.org podcast page.

A BIG thank you to chapter leader Beth Oehlhof who volunteered to fill out numerous applications and connected with tech and pod people to help make this app a reality!



HOW IT'S GOING

The Wise Traditions podcast, launched in 2016, has been a wonderful tool for furthering our mission of education. It is regularly featured in the top 200 of alternative health podcasts on Apple Podcasts.

In October 2021, we reached the milestone of 6 million downloads and we are now at nearly 7 million downloads. This is exponential, exciting growth! It indicates that the content is resonating with our audience—people are listening, enjoying and sharing the podcast frequently.

FROM THE HORSE'S MOUTH

Don't just take our word for it. Here are examples of the impact the podcast is having.

Feel free to leave us a review yourself on Apple Podcasts. It helps us get the word out about the show and the work of WAPE.

Can't stop listening. ★★★★★

by SLH1985 – Jun 15, 2021

I look forward to each episode and often forward the link to episodes to friends and family! Thank you for all you do and spreading the info you do!

Always uplifting! ★★★★★

by Tigerboii – Jun 13, 2021

I've been subscribed for the last year and have felt absolutely nurtured by this podcast. In a time of growth & perseverance I am in awe of how well-balanced and supportive this podcast is. Go somewhere else if you want to be told what to do- this podcast encourages you to make changes while enabling you with excellent information straight from the source of knowledge and experience.

Karen Downey ★★★★★

by KarenAnn1968 – Jun 9, 2021

I am obsessed with this podcast! I am an ER nurse and I have struggled during the last year in the culture of illness that has been created. I feel like the medical community is doing more harm than good sometimes and it's so hard to be a part of that when I really want to help my patients release fear, breathe and embrace their innate ability to heal. It's refreshing to hear words of wisdom about health and nutrition and I have been implementing various things into my life and sharing episodes with others. It also helps me to take care of myself so I can better serve my patients and share bits of advice with them. I also just ordered from ancestral supplements! Can't wait to get started! God bless you all-Karen Downey

CM: Instead of identifying something in the sample, they contaminate the sample with all sorts of other things.

HG: I've looked over a lot of the materials on your website, and you have requested from at least one hundred five institutions this very simple information: "Can you show me proof that you have isolated or purified this virus?" You've requested this from the CDC and from some departments of health in Canada and Australia. And you've come up empty.

CM: It's not just myself. There are a lot of other people who've been submitting these requests. Usually, I'm getting at least one or two new ones every week. People around the world are sending them in. They put up a new one from Lithuania. There are lots of people helping at this point. If any of your readers would like to help, there's a template on my website (fluoridefreepeel.ca) where they can use the same wording that I use. I give some tips on how to go about doing it. Anybody can submit a Freedom of Information request in the U.S., and at least with the requests to the CDC, there's no cost. In Canada, we have fees for submitting the request, but there's no cost for the CDC. You can do it through email. That's how I do it. We're up to one hundred twenty-one different institutions that we have responses from. I believe we're at twenty-five individual countries that they're coming from. Plus, we also have institutions that cover more than one country. For example, there are many institutions from the UK, and then we have the European Centre for Disease Prevention and Control for the European Union nations.

HG: Why did you start to look into all of this in the first place?

CM: What happened in 2020 was that I was not buying into the official story because it wasn't making any sense. I also have a history of opposing water fluoridation, which is another public health issue. I knew from my years of experience doing that, you can't take anything that the public health community says at face value. I knew it would be a big mistake to take something for granted.

Like a lot of other people, I was trying to get a better understanding, and then I heard that PCR tests were being used. Over the years, I had heard from investigative reporter Jon Rappoport that those tests are very problematic. While I was looking for that information, I eventually came across Dr. Andrew Kaufman, who was so helpful. He was my main inspiration for starting the requests because he did this one presentation that was so brilliantly clear. He was explaining that this alleged virus had never been isolated, and he had a section where he talked about how if it did actually exist, a methodology exists that would allow virologists to isolate (or "purify") it. I watched that section over and over again when I was working on my first request to make sure I understood what was going on. I also looked at some of the so-called "isolation papers" that



Dr. Will and Elizabeth Schlinsog display Australian emu oil at their Walkabout exhibit.



Leah Marchand of Cereset Plano explains the use of their brain technology for health.

have been published.

Later, I discovered Dr. Tom Cowan. There are quite a few professionals speaking out. They were saying these things, but if you're on social media—discussing this or sharing their videos—you get all sorts of pushback. People tell you you're crazy and say these men are crazy. They have said all kinds of things about Dr. Kaufman and Dr. Cowan.

Then I thought about how I had done Freedom of Information requests in the past on the fluoride issue. I had done requests to find out whether the institutions that promote water fluoridation—and tell us it's safe and effective for everyone—had any studies to show that fluoride exposure is safe during pregnancy with respect to children's IQ and ADHD symptoms. And I found out they didn't have any studies to show that fluoride is safe.

There's all this arguing going on over whether Dr. Kaufman and Dr. Cowan and others are telling the truth, but the average person does not have the time or energy to sort it out. They're not going to go looking for all the published papers and try to read them for themselves. So, I thought, "I'll do a Freedom of Information request to Health Canada. If they don't have any records,

then that will be some evidence to show that these gentlemen are telling us the truth, and they're correct. If it turns out that they're not correct and there is a study, then we will stand corrected." That was how it started.

HG: I want to back up to something you said. Some of the responses to your requests say that the virus has been isolated, and they give you a link. What do you find out when you dig deeper and click on that link?

CM: There are lots of different links given by different institutions. For example, one of the things that we often get is the link to a June 2020 CDC study.¹ It's by Jennifer Harcourt and some other people. It's the study that you'll find cited on the CDC webpage where they talk about having "isolated" the imaginary virus. It's like all the other studies that do these bizarre procedures where they take the sample, put it with the monkey cells, add fetal bovine serum and the toxic drugs, wait a few days and watch what happens to the monkey cells.

Drs. Kaufman and Cowan say they give the fetal bovine serum to feed the monkey cells, but they always lower the amount. They watch the monkey cells, and then when the monkey cells suffer [from poisoning and starvation], they call it "cytopathic effects." That's what they use to conclude that the virus is present, they have "isolated" it and it's causing disease. They sometimes do animal studies, too, but they're claiming they have identified the virus.

HG: Correct me if I'm wrong, but Dr. Stefan Lanka did this virus isolation/purification process with monkey kidney cells, adding all the things you mentioned but without inserting an alleged virus, and he got the



West River/West Townshend, Vermont chapter leader Leigh Merinoff enjoys the festivities



The main reason people attend our conference is because they love learning. And it shows!

same result, which to me implies the “virus” had nothing to do with the result or the sickness.

CM: What he showed was that the conclusions that virologists draw are not reasonable. On the surface, any rational person can see it's not reasonable because there could be so many other factors. You can't draw a conclusion. You should be doing a randomized controlled experiment with a purified virus if you want to see what the alleged virus does, but they don't have a purified virus. They do these procedures that don't prove anything. What Dr. Lanka did was helpful in making that more obvious. He showed, “Just because you see these specific cytopathic effects, it's not proof of a virus.” You haven't drawn a scientific conclusion. He disproved it by showing you can get those same effects without an alleged virus.

HG: How is it that all of these health institutions are operating as if the virus has been isolated? Maybe they haven't been looking at the studies in depth? Are their assertions based on a lie? Why, if this is not the truth, is there certitude from these health departments all over the world?

CM: I can't say for certain what their motivations are or what exactly is going on. What I do know is that the lower-level institutions usually say, “We don't culture the virus.” Because they realize that's typically what's done in virology, they'll say, “We don't do those things or isolate viruses ourselves. We're relying on information from the higher-up institutions.”

For example, an institution, maybe at the municipal level or in Ontario where I live, they'll say they're getting their information from Public Health Ontario, which is the institution that has the mandate to provide scientific input on health issues to the public health community. But we also have a Freedom of Information response from Public Health Ontario, and they don't have any records either. It's not the case that every single person is purposely going along with fraud. There's no way. Most people believe—the same as everyone else—what they're being told and what they hear from the news, their superiors, Public Health Ontario or whatever institution it is that they look to.

Nor is this specific just to Covid-19. This is virology in general. There have been people who've known for decades of these problems, not necessarily speaking out about all viruses—but Dr. Lanka has been, and there have been people who have known for years. A lot of people are aware because of AIDS. There's a group in Australia or New Zealand that was exposing the whole HIV story. They realized that the “virus” called HIV said to “cause” AIDS has never been shown to be true.

HG: Let's pause and let that sink in. In other words, it's not just that SARS-CoV-2 hasn't been isolated, purified or identified, but the same can be said about a number of viruses, if not all of the viruses of the past—Ebola, Zika or even polio. This is shocking. If this is the case, what have people gotten sick from? We're not saying that people aren't getting sick.

CM: It's the cause that's in question. There can be many different causes, even in one person. When people get sick, there can be multiple factors.

There can be things that happened in their history—injuries or nutritional issues. Or they've been exposed to toxins or air pollutants. It can come from many different sources. There can also be stress and emotional issues. There are so many factors that can be involved, even in one person, let alone in all these so-called Covid “cases.” Many of them aren't even sick. But of the people who *are* sick, there can be so many reasons.

If you look, for example, at Wuhan, where this supposedly all got started, they have had horrific air pollution for years. I've seen articles that people were going out on the streets in Wuhan protesting because their air pollution is so bad there. It has to be bad for someone to protest in China because they're putting their life on the line to do that. So, it's bad. They had also turned on 5G in Wuhan. I verified that myself. I was able to find it on their website for the region. In late 2019, I believe China also had mandated vaccines. In addition, Jon Rappoport, the investigative reporter, has reported on the fact that Wuhan is the world headquarters for the trafficking of the synthetic opioid fentanyl, which causes respiratory problems. So to jump to the conclusion that because there are people with severe respiratory illness it has something to do with a virus is completely irrational. It's not scientific or even reasonable.

HG: I want to ask you to give us another example of a response that you got from a health department. I understand that even the institute that Fauci directs—the National Institute of Allergy and Infectious Diseases (NIAID) at the National Institutes of Health (NIH)—responded to one of your Freedom of Information requests.

CM: We have two communications from them, but I'll tell you about the Freedom of Information response. First, they gave us links and cited various papers and websites, but there was nothing there that described the purification of an alleged virus. I don't bother disputing the FOIs too much because I have found, with Covid-19, it's mostly a waste of time and energy, but I did write back in this instance. In my requests, I always make it clear that I'm not looking for studies where they cultured something, did

PCR tests or sequenced something. When I wrote back, they stuck to their guns. They made a formal appeal to their designated person or body there that handles appeals. They explained the situation to her and stuck to their position. NIAID also says it's a CDC issue. I don't know officially what the mandates are for these organizations, but you would think an organization with the name "National Institute of Allergy and Infectious Diseases" would want to verify that an alleged virus exists—but apparently not! They passed the buck to the CDC. We have five responses from the CDC, and I know there's at least one more that I haven't had the chance to upload on the website.

HG: Isn't it a little bit arrogant to say that only a handful of people—such as Dr. Stefan Lanka, Dr. Andy Kaufman and Dr. Tom Cowan—are the few who know what's going on here in terms of the virus not being isolated? It's hard to believe that such a small number of people would know the truth and everybody else would be confused or misunderstanding it.

CM: There are more and more people speaking out. For example, if you go to Dr. Kaufman's website, you will see the Statement on Virus Isolation (SOVI), which was authored by Dr. Kaufman, Dr. Cowan and Sally Fallon Morell.² So far, over nine thousand four hundred additional people have signed on in support of the Statement. Or go to the website of Torsten Engelbrecht, an investigative reporter in Germany. If you scroll down on his homepage, he has a list of experts who are speaking out stating "there is no proof that the particles named SARS-CoV-2 belong to a disease-causing virus."³ The list includes people like Dr. Kelly Brogan and about forty-five others, including some well-known people that I'm personally not as familiar with because their work goes back quite a while.

HG: I'm pleased to hear that the numbers are growing.

CM: There are also a lot of other people behind the scenes. There are doctors and scientists who are aware but are not speaking out. I have an

email from a particular lawyer who is on my email list. This one said to me, "Thank you, Christine, for sending this. We feel the same way. We want to bring all this fraud forward. People have been lied to for so many years, but we can't talk about this because if we do, we won't have the support of the public." At this point, there are a lot of doctors and scientists, too, who have become aware, but they won't say it out loud because they're afraid it will sound too "out there." I understand that, but at the same time, if nobody tells the truth, we're never going to get out of this.

This isn't just about Covid-19. They're not going to stop with Covid-19. There'll be endless "variants," endless new imaginary "viruses" being used to control and manipulate people. It's very disturbing what's going on already. If people don't tell the truth, how are we going to get out of this? It will be an endless discussion about, "How bad is it? What are the appropriate measures? What are the best treatments?" It will go on and on. There will be "new and improved" tests. So, we can't just talk about the PCR tests. We can't do that. We have to get to the heart of the matter and educate the public so that they're no longer vulnerable to these lies.

HG: I'm glad you brought up the PCR test because if the virus hasn't been isolated or purified, what are they testing?

CM: Most people get diagnosed based on a PCR test, and this is the technology of Kary Mullis, a brilliant scientist. He won a Nobel Prize for that technology, but it was never anything to do with testing. It wasn't about diagnosing people.

There are a couple of things to understand. First, nobody ever purified this alleged virus, took genetic material specifically from it and sequenced that. Instead, they're always working with these ridiculous soups where they *assume* there's a virus, take the genetic material from that soup, play around on their computers and create something that doesn't correspond to anything in nature. There are no legitimate SARS-CoV-2 genomes, even though I believe well over one million sequences—so-called genomes—have been uploaded online that people can look at.

The PCR tests are sequence-based tests. You're trying to do a sequence-based test for something that's never been shown to exist and has never been sequenced. But even if you knew that there was a virus and even if you had properly sequenced it, the test doesn't test for viruses. It's not looking for a virus, disease, infection or genome. The people running PCR tests are looking for these little itty-bitsy sequences that they say are part of the genome and a marker for the virus. That's all they're testing for—these tiny little sequences. It's not even the same sequence in every person because they test for more than one sequence. They have sequences that correspond to the E (Envelop) gene, the N gene or the RdRp (RNA-dependent RNA polymerase) gene. There are a number of them. In other words, for all these people who get slapped with a fraudulent diagnosis from a "positive" PCR test, the result is based on testing for a sequence. And they don't have any particular sequencing in common because maybe one person was positive on the E gene but negative on the others, while their neighbor was positive on the N gene and negative on the others.

Your readers also may have heard about another problem with these tests: the results depend on number of cycles. There are always cycles happening where if the sequence that they're looking for is there, the amount of it—the number of copies—doubles every time. What they've been doing is running so many cycles and doubling so many times that it was already known that once you go over a certain number of cycles, the results are meaningless.

If you get a "positive" test result, it might simply reflect noise in the system. When people talk about false positives, they think, "The person didn't necessarily have Covid-19," but it's much worse than that. It means they didn't even necessarily have that little sequence that they didn't know had anything to do with the virus in the first place.

I'm trying to get people to understand this because there are still people putting in so much effort. Even people who have heard about this cycle issue are still trying to make sense of and analyze the PCR data and make arguments based on the data—because it hasn't fully sunk in that there is no meaning behind any of those data. It's all garbage. There is no meaning to the PCR data and no common denominator behind those cases. You can't even say, "It wasn't SARS-CoV-2 or some virus." It's not anything. There's nothing specific behind those "confirmed cases." There's nothing useful at all about any of those data. The only thing you could use the data for is to see how much fraud they got away with. That's it!


HG: How are they possibly suggesting that people have a certain "variant" and implying they tested "positive" for this variant? How do they even know that, if the original virus hasn't even been isolated? In other words, it seems to me you're also saying that the whole variant thing is conjecture or a theory that has not at all been proven.

CM: My understanding is that they don't rely on the PCR tests for diagnosing a variant. That's what I've seen written from various institutions—that they don't have a test.

We hear a lot about the spike protein as a fundamental feature of this imaginary virus.

Supposedly, the spike protein is what allows the imaginary virus to get into a cell. They first started talking about variants in December 2020, and the first one they started talking about supposedly was in the UK. I've seen documents from the UK government. They called it the Alpha variant, also known as "lineage B.1.1.7." With one of the variants—and I believe it was with the Alpha variant—they started saying that Alpha was when they couldn't detect the spike protein. "We can't even find the spike protein," but "spike protein is important." They might even have called you "negative" at the outset; they kept changing the criteria along the way. You might have been "negative" or "positive," depending on whether they could find one of the other sequences—because eventually they decided, "As long as we can find one of the sequences, that's good enough." They started talking about this Alpha variant when they couldn't find the spike protein and would have to find one of the other sequences. That was when they started calling it a "variant." It got ridiculous. In other words, even though the spike protein is this key feature of the virus that we constantly hear about, they said that Alpha variant is when they *can't* find spike protein. What they did was interpret the inability to find or detect the spike protein as an indication that maybe there's a variant, and so then they would do their sequencing, which is totally meaningless. It's completely fraudulent. They make up a genome, and they say that's a genome of a variant. But they never identified any virus to begin with, let alone any so-called "variants."

HG: I want to ask you the question I often pose at the end. If the reader could do one thing to improve their health, what would you recommend?

CM: Stop listening to the media and to public health officials. They're the ones spreading the fear and misinformation. It's good to stay informed and have an idea of what's going on, but you're not getting accurate information from them, and their role is to keep you in fear of something that doesn't even exist. Listen to your heart, or whatever it is that resonates with you. Let that guide you—not news stories—because that will be our undoing if we follow the news. 

Wise Traditions podcast 339 (Nov. 15, 2021). Christine Massey is a former biostatistician for cancer researchers, and was passionately involved in safe drinking water advocacy for a number of years. See the FOI responses: [FluorideFreePeel.ca](https://fluoridefreepeel.ca); click the "COVID-19 FOI RESPONSES" tab.

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All Thumbs Book Reviews

***The Real Anthony Fauci:
Bill Gates, Big Pharma and the Global War
on Democracy and Public Health***
By Robert F. Kennedy, Jr.
Skyhorse Publishing

The remedy for epidemics, according to the physician Rudolf Virchow—considered the father of modern pathology—is prosperity, education and liberty. The “remedy” for the current epidemic of Covid-19, imposed by governments throughout the world, is policies that create poverty, ignorance and submission.

As Robert F. Kennedy, Jr. reveals in his new book, *The Real Anthony Fauci*, the architect of these disastrous Covid-19 policies is Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases (NIAID). Masks, social distancing, lockdowns, vaccinations, useless PCR tests and the withholding of information on any remedy besides vaccinations—all these are the direct result of Fauci policies, even though it’s clear he knows better. For example, Fauci initially indicated he was aware that mask dictates were contrary to overwhelming science, but changed his tune in July 2020, noting that his earlier dismissal of mask efficacy was correct “in the context of the time in which I said it.”

Fauci’s advice for Covid patients: stay home in quarantine and do nothing whatsoever, until breathing difficulties force the sufferers to hospitals where they receive a death sentence of ventilation and the dangerous antiviral drug remdesivir. Numerous highly qualified physicians have suggested treatment protocols employing medications such as hydroxychloroquine and monoclonal antibodies, and nutritional strategies like zinc and vitamin D, all of which are disadvised by Fauci, who admitted taking vitamin D himself. According to Dr. Peter McCullough, a highly qualified and outspoken critic of Fauci policies, the Fauci dictates amount to “Cruelty at a population level. Never

in history have doctors deliberately treated patients with this kind of barbarism.”

As for the Covid vaccines, it was Fauci who led the charge with the accusations that 95 to 99 percent of Covid-related hospitalizations and deaths occurred among the unvaccinated. Health officials promulgated this deception by counting deaths and hospitalizations occurring up to two weeks after the second vaccine dose as “unvaccinated,” or simply attributing deaths from vaccination as Covid deaths. As reports of vaccine injuries and deaths have piled up—including the paralysis of trial participant Maddie de Garay from the Pfizer vaccine trial for teenagers—Fauci has remained silent, instead urging the vaccination of school children without parental consent.

As director of NIAID, Fauci dispenses over six billion dollars in annual taxpayer-provided funding for scientific research, allowing him to dictate the subject, content and outcome of scientific health research across the globe. And this has been going on for years. During his fifty-year career, Fauci “has transformed NIAID into a seamless subsidiary of the pharmaceutical industry . . . unabashedly [promoting] his sweetheart relationship with Pharma as a ‘public-private partnership.’” Fauci’s agency uses taxpayer monies to fund patent development by private companies, some of which pay royalties to Fauci and his underlings. For example, working with a company called SIGA Technologies, Fauci developed vaccine programs for HIV, SARS, Ebola, West Nile virus and influenza.

Same fear, different year—remember how these diseases were going to kill us all, and how a vaccine was conveniently waiting in the wings? Behold the methodology of Faucism: scare them into submission and profit from the panic. Fauci launched his career by allowing Burroughs Wellcome (now GlaxoSmithKline) to charge ten thousand dollars annually for the AIDS drug AZT (azidothymidine), a drug

(Continued on page 71)



All Thumbs Book Reviews



***Breaking the Spell:
The Scientific Evidence
for Ending the Covid Delusion***
By Thomas S. Cowan, MD
DrTomCowan.com

Tom Cowan's booklet, *Breaking the Spell*, serves as a follow-up to our book, *The Contagion Myth*, providing new information to support our claim that the existence of the SARS-CoV-2 virus is unproven and that no convincing evidence exists to indicate that the cellular structures called "viruses" are pathogens.

As Cowan points out, the published literature does not contain any evidence of any virus directly isolated from any bodily fluid from even one person suffering from a so-called "viral" illness—such as chicken pox, rabies, measles, AIDS or Covid-19—and that's not because separation and isolation are impossible to do. Scientists are able to isolate identical particles (called bacteriophages) from bacterial cultures and show pure samples of these particles under an electron microscope. These particles are morphologically identical, made of exactly the same proteins, with identical genetic sequences.

So why have scientists not done this with viruses? The answer they give: "There is not enough virus to find." Yet, these scarce viruses are supposed to be the ferocious agents that are making us sick!

If it is not possible to collect enough viruses to study them, how do scientists "prove" that viruses make us sick? They do this through a procedure that produces a "cytopathic effect" in cells. This process was the invention of John Franklin Enders, for which he received a Nobel Prize in 1954. It starts with taking swabs from sick patients—Enders used throat swabs from children with measles—and mixing them with other substances. Enders mixed the throat swabs with milk, human kidney cells, rhesus monkey kidney cells, bovine amniotic fluid, beef embryo extract and horse serum—all of

which contain protein and genetic material. To this culture Enders added antibiotics, known to be toxic to kidney cells. After a number of days, Enders observed the breakdown of the cells in the culture—called a cytopathic effect (CPE). The healthy, normal-sized cells degenerated into giant, disorganized cells with internal holes or vacuoles, and in this disorganized mass small particles were observed—these small particles they labeled "viruses." The CPE, they concluded, was "proof" that viruses from the measles sample infected and killed the cells in the culture. This flawed process is what virologists call "viral isolation," and it is on this culture that they perform "genetic analysis."

Interestingly, Enders carried out the same experiment *without* using measles swabs. He confessed, "The cytopathic changes it induced in the unstained preparations could not be distinguished with confidence from the viruses obtained from measles." As Cowan notes, "This is strong evidence that any CPEs were caused by the culture conditions, not by any alleged virus coming from the measles patients." Yet, in all the published papers on coronavirus, virologists use these methods and present CPE as *the* proof that the virus exists *and* causes disease.

Cowan then describes a recent experiment carried out by German virologist Stefan Lanka. In it he shows that normal cell cultures (without added material from sick people) still break down when they are starved with a minimal nutrient medium and poisoned with three antibiotics. The "viruses" that appear in the deteriorating tissue are the *result* of cell breakdown, not the cause.

Lanka added yeast RNA to one of the starved and poisoned cultures and then had the material analyzed for the SARS-CoV-2 genome, and guess what? The computer found the SARS-CoV-2 genome in the yeast RNA! In other words, "genome sequencing" is yet another fraud perpetrated by the scientific "discipline" called virology.

All Thumbs Book Reviews

Breaking the Spell also elaborates on other frauds including the PCR test, Covid vaccines and even current models of cell morphology.

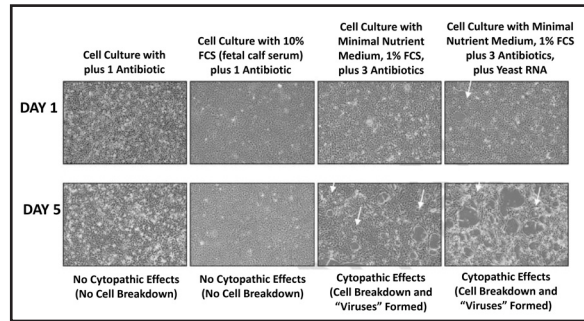
Progress cannot be made in biology, Cowan argues, until we recognize the fact that our cells are composed primarily of structured water, and that water is subject to influences from outside the cell: "... light and all the various frequencies, energy forms, wavelengths, sounds, colors, thoughts, emotions and other emanations that come to us from the universe." Wellness occurs when we provide our cells with all that is noble and

perfect—nutrient-dense food, sunlight, clean air, pure water, a coherent and native electromagnetic atmosphere, truth, freedom and love—not by poisoning them with vaccines and drugs.

As Cowan has consistently emphasized, we are living under a spell, a "perception package" installed in our early years and kept alive with constant propaganda. "Viruses are everywhere, they infect us and make us sick; we must find them and defeat them. The universe is hostile and we must be afraid."

Tom and I have been accused of "sowing dissension" in the holistic health community with our insistence that "viruses" are actually helpful exosomes. But this is what the science is showing us, and only by eliminating fear with the truth will we break the spell.

Review by Sally Fallon Morell



(Fauci, continued from page 69)

that cost a mere five dollars per dose to manufacture. The drug was tested and approved by Fauci himself and inflicted on AIDS patients whose condition NIH blamed on a virus; no one provided AIDS patients with life-saving advice on nutrition or lifestyle, and many succumbed to the side effects of the drug, side effects that included blood problems, anemia, wasting and death. Fauci's list of crimes includes administering AZT and other toxic drugs to foster children—by feeding tube when children resisted.

Kennedy isn't alone in his assessment of Fauci. Critics have compared Dr. Fauci "to a similarly long-lived federal agency bureaucrat, J. Edgar Hoover, who used his five-decade dictatorial control of the FBI to transform the agency into a vehicle for shielding organized crime, fortifying his corrupt political partners, oppressing Black Americans, surveilling his political enemies, suppressing free speech and dissent, and as a platform for building a cult of personality around his own inflated ego." Others have called Fauci a "snake oil salesman" and a "bigger medical charlatan than Rasputin." Fauci

himself admits that his favorite line from *The Godfather* is, "It's nothing personal, it's strictly business."

As Kennedy points out, Fauci doesn't do public health. "By every metric, his fifty-year regime has been a catastrophe for American health. But as a businessman, his success has been boundless." That catastrophe includes ever worsening health metrics for our children, the transformation of our hospitals into isolation prisons and greatly increased poverty, especially for minorities.

Kennedy concludes his fascinating tome with a call to action: "We can say No to compliance with jabs for work, No to sending children to school with forced testing and masking, No to censored social media platforms, No to buying products from the companies bankrupting and seeking to control us. These actions are not easy, but living with the consequences of inaction would be far harder."

All proceeds from *The Real Anthony Fauci* go to Children's Health Defense (CHD), an organization founded by Kennedy to end childhood health epidemics by working aggressively to eliminate harmful exposures, hold those responsible accountable and establish safeguards so this never happens again. CHD is asking activists to buy the book, to alert friends and contacts to do the same and to ask local bookstores and libraries to carry it. Give copies to local mayors, sheriffs, legislators and policymakers—whatever we can do to propel its message into the limelight and change the conversation about what constitutes public health.

Review by Sally Fallon Morell

All Thumbs Book Reviews



***There's a Cow in My Freezer:*
The Complete Guide to Buying, Storing, and
Enjoying Pasture-Raised Meat in Bulk
By Maxine Taylor
Independently published**

Many people who join the Weston A. Price Foundation do so out of concern for the food we put into our bodies and the impact of the industrialized food system. Research by WAPF and other organizations continually demonstrates that many of today's pervasive health issues stem from degraded nutrition. Those of us who live in cities, suburbs or small towns and primarily shop in industrialized grocery stores wonder whether our only option is to flee to the countryside and raise our own food. While that may be ideal, it certainly isn't practical for everyone, or even necessary. There are more incremental options that make it possible to obtain nutritious food and support family farms.

In *There's a Cow in My Freezer*, Maxine Taylor details the process of directly purchasing bulk meat orders from local farmers. She provides a veritable step-by-step owner's manual on purchasing, storing and dealing with several hundred pounds of meat at a time. Though the book's title focuses on beef, Taylor also incorporates information on pork, lamb and chicken bulk orders. With practical tips and advice for any level, she starts from the ground up, detailing how to go from standard grocery store shopping to purchasing a quarter or half cow.

Taylor begins with a philosophical discussion of the health benefits for humans as well as animals and the environment, offering the reader a concise and elementary overview of reasons to eat local pastured meats. Though not exactly groundbreaking, this opening also provides a good primer on the "why's" of buying this type of meat in bulk, zeroing in on practical benefits such as time, money and organization. Finally, Taylor addresses potential concerns that may initially arise. One item that really stuck out to me was the issue of power failure. Taylor allays this worry by noting that a properly

packed freezer will maintain its temperature for nearly seventy-two hours. Placing blankets over the freezer can extend that time even further.

Taylor's discussion of the nuts and bolts of meat buying is where the book really shines. She delves into considerations such as determining what quantity to buy, how to store the meat and working under budgetary constraints. With a focus on detail (even down to kilowatt-hours in the budgeting section), she forces readers to consider every aspect of the process but also provides ample information to make well-informed choices.

Building on this information, Taylor methodically describes purchasing a freezer, including outlining the different types and the full range of freezer-related issues one might experience. Taylor then introduces us to the considerations involved in choosing a farmer, paying for and picking up meat, organizing and inventorying the freezer and finally, meal planning. Each topic gets its own chapter, allowing Taylor to provide a detailed look at all stages of purchasing and consuming meat in bulk.

The book and the appendices delineate information especially useful for first-timers, including an overview of various breeds of cows, hogs and lambs noted for their meat. Taylor also provides explanations of the various cuts of meat, an overview of a typical order one might expect (including cuts and poundage), examples of inventory sheets, comparison outlines for choosing a farmer and comments about various preferred cooking methods depending on cut.

While I'm not sure the book would convince someone to purchase meat in bulk who is not already inclined to do it, it does provide a handy reference guide to doing so. *Freezer* gets a big thumbs up for those who have considered buying meat in bulk but just didn't know where to start or even what they didn't know. It's a great first step for those looking to strengthen their relationships with local farmers and step outside of the industrialized food system without purchasing three hundred acres.

Review by Keith Kadish

Allaying
worries
about power
failure, Taylor
notes that
a properly
packed
freezer will
maintain its
temperature
for nearly
seventy-
two hours.

All Thumbs Book Reviews

The Mitochondriac Manifesto: How Nature Nurtures the Body, and Technology Torments It
By Randy the Mito Man
Self-published (TheMitoMan.com)

It's time to stop treating our health like a hobby. For decades, people have read "top ten" lists of things to do to nurture health or they have followed their favorite guru for supplement suggestions or exercises to fit into their daily routine. But that's not good enough anymore. So says "Randy the Mito Man," the author of *The Mitochondriac Manifesto*.

I see his point. In the United States, over 40 percent of the population has one or more "incurable" health conditions, and the numbers are growing ever higher. Go to any elementary school playground, and you'll be hard-pressed to find a single healthy child. Conditions that plague children vary from poor eyesight to asthma, ADHD, autism and Tourette syndrome. Parents are suffering, too—from conditions like anxiety, allergies, fatigue and gut dysbiosis.

The Weston A. Price Foundation, of course, is doing its best to reverse the trend and restore people to the optimal health that is their birthright. WAPF focuses on food, farming and the healing arts. When I began reading this manifesto, I thought at first that it fell into the "healing arts" category, but upon further reflection, I realized that it falls neatly into the other two categories because it shines a spotlight on what nourishes us best and the role that the environment plays in our health and vitality.

The book makes a strong case for mitochondrial health as the foundation for a vibrant, healthy life. Mitochondria, as you may remember from biology class, are the little "battery packs" that power up our cells, generating ATP. They get energy from food (of course) but are also nourished by energy from the earth, sun and our body's own fat.

As Randy puts it, plants are constantly "plugged in" to these energy sources—their roots gather electrons from the soil, and their leaves gather photons from the sun. This is why

they don't need food or to store fat like humans do. They are perfectly nourished by their surroundings.

We have a lot in common with plants and animals in our need for nourishment from the environment, but there is one problem: our contemporary way of life steals electrons from us. Electrons are the currency or conveyance of the nourishment around us. One of Dr. Price's central observations was how the "displacing foods of modern commerce" were replacing nourishing foodstuffs with artificial ones that disrupt our bodies' optimal function. In a similar way, our physical comfort and technological conveniences interfere with electrons' mission and the mitochondria's role—leading to persistent inflammation, oxidative damage and premature aging.

To avoid this fate, the book recommends that we do all that we can to shore up mitochondrial health. Randy offers many specifics, punctuated by detailed scientific explanations and graphics, presenting a clear-cut path to rejuvenate the mitochondria. For example, he emphasizes reconnecting with nature and reducing stress levels; lowering exposure to non-native electromagnetic frequencies (nnEMFs), including cutting out blue light, dirty electricity and excessive radiation; seeking out high-quality water (making sure it's unfluoridated and low in deuterium); eating in-season fruits and vegetables (which will provide the body with the right plant-captured light); and avoiding processed foods, refined carbohydrates and rancid seed oils. He also recommends getting more full-spectrum sun (noting that infrared and ultraviolet light make more ATP and activate regeneration programs in the body) and advocates more cold exposure (cold strengthens mitochondrial function). Avoiding mitochondrial toxins (such as statins, antibiotics and cigarette smoke) is also advisable. Some individuals may wish to take supplements such as D-ribose and CoQ10 that help the mitochondria make more ATP.

When it comes to water, Randy the Mito Man describes water as a conduit of good health.



Our physical comfort and technological conveniences interfere with electrons' mission and the mitochondria's role—leading to persistent inflammation, oxidative damage and premature aging.

All Thumbs Book Reviews

The book breaks down the importance of good, clean water (that is structured properly) to support the absorption of water by our cells.

It literally supports the body's biochemistry. Dehydration leads to back pain, stomach ulcers, high blood pressure and more. This section of the book breaks down the importance of good, clean water (that is structured properly) to support the absorption of water by our cells, even citing the work of Dr. Gerald Pollack and his "fourth phase of water."

On the topic of food, many of the recommendations align with those of WAPF. There is a particular emphasis on including more fish and seafood in the diet, given that DHA (docosahexaenoic acid) is the only substance that converts light into DC electricity and back again. We need DHA to maintain energy in the cells and optimal competency of the organs. Sleep disturbances, infertility and some illnesses (including eczema and allergies) stem in part from DHA deficiencies. Raising our DC electricity with DHA, getting more sun and reducing nEMF exposure have the potential to alleviate such conditions altogether.

Dr. Jack Kruse is cited throughout the book, and the food section is no exception. Both Randy and Kruse recommend eating in-season fruits

and vegetables, and plenty of protein and fats. Dr. Kruse's "food pyramid" has at its base shellfish, followed by crustaceans and fish. Organ meats of pasture-raised animals are next, and pastured animals themselves. Pastured eggs are also in the pyramid, with nuts and seeds placed at the top (the least plentiful in the diet).

While this pyramid is a vast improvement over the USDA's recommendations, it departs from WAPF's dietary guidelines on the topic of grains. For the Mito Man and Kruse, all grains are verboten. Nonetheless, I like how the Mito Man gives specifics not only about what to eat but how. Herein lies one of my favorite aspects of the book. It is very practical.

The Mitochondriac Manifesto also offers "sun secrets" for getting the most out of sunlight, "biohacks" for getting more infrared light into your home to avoid the disrupting effects of blue light and more. Overall, this book inspired me to keep up what I'm doing for mitochondrial health, such as taking morning "shiver walks," using a cold plunge tub and sweating in a sauna. Read it, and you just may end up in this healthy, happy camp as well.

Review by Hilda Labrada Gore

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/or 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.

Tim's DVD Reviews

Dr. Jennifer Daniels – There's No Such Thing as a Deadly Virus; We're Playing a Game of Simon Says
One Radio Network
oneradionetwork.com/all-shows/dr-jennifer-daniels-theres-no-such-thing-as-a-deadly-virus-were-playing-a-game-of-simon-says-march-22-2021/

In this interview, Dr. Jennifer Daniels starts off making the case that we have yet to find any clear evidence that anyone has ever died of a virus. As far as I can tell, she is in general agreement with Dr. Tom Cowan and Dr. Andrew Kaufman on this point. She does realize—and we all realize—that thinking this far outside the box freaks some people out. By the CDC's own admission, the PCR test does not work. Since the actual number of deaths due to Covid is therefore unknown, Daniels doesn't waste a lot of time talking about the false numbers that dominate mainstream reporting. She just looks at excess deaths in 2020.

There were around two hundred fifty thousand more deaths in the U.S. in 2020 than in 2019. When you compensate for population growth, that works out to about thirty thousand excess deaths in 2020. Fifteen thousand were in New York alone, so clearly something else is going on there. She does not speculate on why New York was such an outlier but sets those numbers aside so as not to muddy the waters. Outside of New York, there were fifteen thousand excess deaths, or about one in one hundred thousand. Whatever Covid really is, it is less deadly than the common cold, based on these numbers. Where exactly is the emergency? Dr. Daniels correctly concludes that whatever is going on today is not about health; it is about something else.

So, let's talk about mind control. Every science fiction fan is familiar with the Jedi mind trick from the movie *Star Wars*. But that's just fiction, right? You can't just wave your hand and say in a soothing voice, "These are not the droids you're looking for." Well, if you believe that, in a way

you have already proven that mind control does work. And as in the movies, it works mainly on the weak-minded.

How does it work? In many cases, one of the first steps is to induce fear or anger because negative emotions convert strong minds into weak minds, and weak minds into weaker minds. Then you have mind-control words that have been used successfully many times throughout history. The most popular control word is "safety." There is just something about that word that stops brain function in its tracks. We are doing this, mandating that, taking away your freedom for your own "safety." We have seen people agree to outrages—from statutory rape in airports to needle rape over the last year—because it is "for your safety." Along the way, we have been convinced that we are not capable of thinking for ourselves (unless we have a PhD or MD or are a government authority), so we must let those people tell us what to think.

It really isn't that hard to see what is going on. It's not rocket science. The inescapable fact is, we live in a dangerous world. Everything we do carries some risk. When we become so obsessed with safety that we are paralyzed into doing nothing, well, that's not very safe, is it?

What do we do about those who are strong-minded and refuse to be controlled? No problem there—another mind-control phrase has been created to dispose of them. They are "conspiracy theorists," because everyone knows our sacred government would never involve itself in a conspiracy. Large corporations wouldn't do that either, even though many of them have well-documented criminal records.

David Martin, one of the most popular speakers at our recent conference, made the excellent point: we have forgotten what it means to be human. Social interaction—such as parties, weddings, funerals, family reunions, church, whatever—are part of being human. This goes beyond basic human rights. This is what we are. We don't need permission from Fauci, Biden, any government official or our doctor to be human.

Dr. Daniels correctly concludes that whatever is going on today is not about health; it is about something else.

Tim's DVD Reviews

Daniels reminds us that no one else owns our bodies. “My body, my choice” used to be popular in some circles. Have we forgotten? That is how successful mind control has been.

Daniels makes one more observation that I was going to skip over, but I can't resist mentioning it. She notes that in the course of the debates between Fauci and Senator Rand Paul, Fauci disputes one of Paul's points by saying that it is only valid for the wild virus. The wild virus? As opposed to what? The domesticated, genetically modified lab virus? Busted.

Daniels likens the situation today to a twisted game of “Simon Says,” where authorities see how far they can push before they get pushback. Many people have been pushed to the point where they have forgotten their humanity. Daniels doesn't illustrate this with a lot of examples but mentions that schools have reduced social distancing requirements from six feet to three feet due to teacher pushback. We have also seen successful pushback in the Chicago Police Department and on certain airlines. The message is that they can only push us as far as we let them. The thumb is UP.

Nano Particles to Contaminate Entire Food Supply Under Guise of Food Safety

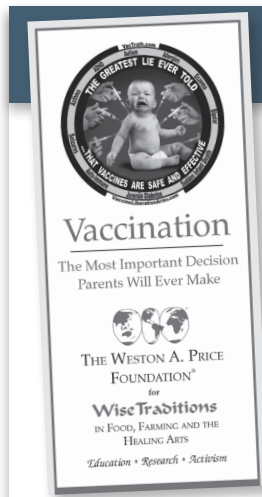
Greg Reese, Forbidden Knowledge TV

forbiddenknowledgetv.net/nano-particles-to-contaminate-entire-food-supply-under-guise-of-food-safety/

They're coming up with all kinds of new ideas to ensure “food safety.” Here's one from the American Chemical Society: “The combination of functionalized composite nanomaterials and well-known detection methods is gradually applied to detect hazardous substances, such as chemical residues and toxins, in agricultural food products” (<https://pubs.acs.org/doi/10.1021/acs.jafc.1c05185>). Mmmm. Wouldn't you like some yummy nanomaterials in your food? Maybe some “magnetic covalent–organic frameworks (Fe₃O₄@COFs), covalent–organic frameworks doped with quantum dots (COFs@QDs)” and other stuff like that?

Or maybe we need molecularly imprinted polymer-quantum dot sensors to track us down to almost the molecular level (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7999655/>). Then there are tunable, porous metals that have the power to regulate the dispensing nutrition to comply with international mandates. In two minutes, Greg Reese briefly covers these and other ideas. As far as we know, none of this has been implemented yet, but it is on the drawing board. I've included the links for anyone who wants to toss this into the “conspiracy theory” bin. The plans are real, not theory.

The video page includes a transcript and more links for those who want to dig deeper. There is just not enough time to vent the contempt that these ideas so richly deserve. The thumb is UP for this video. ☺☺

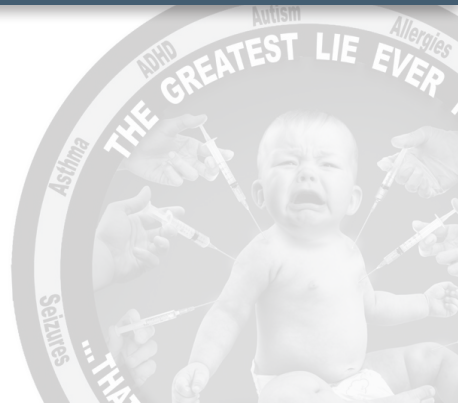


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Vaccination Updates

FULLY INFORMED CONSENT ON BEHALF OF CHILDREN: A CHECKLIST FOR PFIZER-BIONTECH INJECTIONS FOR CHILDREN AGES 5–11

By Diane Perlman, PhD

Note: This article is a lightly edited version of the article and consent form published on November 13 and updated on November 21, 2021 on Substack (coronawise.substack.com/p/informed-consent-on-behalf-of-children).¹ Both the article and consent form are reprinted in Wise Traditions with the author's permission.

“[W]e’re never going to learn about how safe this vaccine is unless we start giving it.” This statement (referring to vaccine-related myocarditis and deaths) was made by Eric Rubin, Harvard professor and editor-in-chief of the *New England Journal of Medicine*.² Rubin made his comment during the Food and Drug Administration’s (FDA’s) Vaccines and Related Biological Products Advisory Committee (VRBPAC) meeting on October 26, 2021,³ shortly before he and sixteen others voted in favor of emergency use authorization (EUA) of Covid vaccines for five- to eleven-year-old children.

CHILDREN NOT CAPABLE OF INFORMED CONSENT

Most parents and guardians trust the FDA, the Centers for Disease Control and Prevention (CDC), school authorities and mainstream media. Most believe that the messenger RNA (mRNA) Covid shots are necessary, safe, effective and the only way to open schools safely, have parties and sleepovers, hug grandparents, travel and finally end the Covid pandemic.

However, for children under age twelve, there are no adequate safety data and none on myocarditis, a disabling, life-threatening heart condition which, after the clinical trials, began appearing in young people, mostly males. Athletes around the world are dropping dead on the field from heart damage.⁴ The experiment begins now.

We are seeing pop-up “clinics” rushed out to schools and other places around the country

to mass “vaccinate” children as quickly as possible. Although these sites are handing out consent forms (see examples from the states of Massachusetts⁵ and Louisiana⁶), the forms leave out a few things.

The risks of injecting children are not trivial, and some may be irreversible. Based on data from Israel and what we have already observed in twelve- to seventeen-year-olds, adverse events (AEs), serious adverse events (SAEs), permanent injuries, disabilities and deaths are inevitable.

I am bound by a personal, professional and ethical duty to warn. Familiar with the Nuremberg Code,⁷ which requires fully informed consent, I created a consent form on behalf of children that can be printed and copied (see the two-page form at end of article). The second side can be checked and signed.

LACK OF SAFETY DATA

The studies used to justify authorization for children ages five to eleven were conducted on very few children who were followed for a ridiculously short period of time. Subjects who had adverse reactions were eliminated from the study, skewing its conclusions. There is zero information on potential long-term effects. And as Toby Rogers outlined, there were at least “ten red flags in the FDA’s risk-benefit analysis of Pfizer’s EUA application to inject American children 5 to 11 with its mRNA product” (Table 1, next page).⁸ Rogers’ conclusion is that the FDA “used tortured logic (that would be rejected by any proper academic journal) in order to reach a predetermined result that is not based in science.”

Many loving, protective and frightened parents believe there was a legitimate and independent scientific process that led seventeen of eighteen members of VRBPAC to vote that the benefits of vaccination for younger children

Subjects who had adverse reactions were eliminated from the study, skewing its conclusions.

How is it
they don't
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risk of dying
from Covid?

outweigh the risks. Several VRBPAC members have financial ties to Pfizer,⁹ however, and most of the rest have ties to other pharmaceutical companies.² Dr. Michael Kurilla, who voiced serious concerns, was courageous enough to abstain from the vote but not courageous enough to vote “No.”

On November 2, all fourteen members of CDC’s Advisory Committee on Immunization Practices (ACIP) likewise voted for authorization in children ages five through eleven.¹⁰

At both the VRBPAC and ACIP meetings, attendees wildly exaggerated, distorted and lied about the threat of Covid deaths and hospitalizations for children, ignored the data, dismissed natural immunity and minimized, denied or hid the data on adverse reactions, injuries, disabilities and deaths. How is it they don’t know that healthy children have zero risk of dying from Covid?¹¹ (See Table 2, page 79)

Some panelists at the meetings also minimized the incidence of vaccine-caused myocarditis,¹² falsely claiming that cases were “mild” and resolved quickly, suggesting that the condition likely had non-vaccine-related causes (maybe hereditary) and claiming that more cases of myocarditis were caused by getting Covid than from the “vaccines.” They also completely ignored all other known adverse events of the Covid vaccines, except for the usual swelling, fever, chills and headache.

A DONE DEAL

The final VRBPAC and ACIP votes were clearly a done deal from the outset. Although there was a pretense of going through the motions of a voting process, doses for twenty-eight million children had already been purchased and were on their way before the votes took place, with thousands of pop-up clinics already scheduled.

VRBPAC panelists also blatantly disregarded over one hundred forty-two thousand written public comments¹³ submitted by knowledgeable citizens warning of the dangers and urging committee members to vote “No.” Dr. Jay Portnoy, VRBPAC’s consumer representative, said he received four thousand emails asking him to vote “No.” Guess how he voted?

At the VRBPAC meeting, seventeen voted “Yes” despite problems raised, questions unanswered and awkward, illogical justifications for their verdict. The vote was a binary forced choice between authorization for all twenty-eight million American children in the five-to-eleven age group or none, which is absurd on its face. In explaining their vote, some panelists stated that they voted “Yes” so that obese and immune-compromised children would not be deprived of the Covid shots, despite the fact that there are no studies or evidence demonstrating that these shots would protect those groups of children. This rationale also ignored

TABLE 1. Ten red flags in risk-benefit analysis of Pfizer Covid injection for children ages 5 to 11

1. Covid-19 rates in children ages 5 to 11 are so low that there were zero cases of severe Covid-19 and zero cases of death from Covid in either the treatment (n=1,518) or control group (n=750).
2. Pfizer’s clinical trial in kids was intentionally undersized to hide harms.
3. Pfizer only enrolled “participants 5-11 years of age without evidence of prior SARS-CoV-2 infection.”
4. Did Pfizer lose contact with 4.9 percent of their clinical trial participants?
5. The follow up period was intentionally too short.
6. The risk-benefit model created by the FDA only looks at one known harm from the Pfizer mRNA shot—myocarditis.
7. Pfizer intentionally wipes out the control group as soon as they can by vaccinating all of the kids who initially got the placebo.
8. Given all of the above, how on earth did the FDA claim any benefits at all from this shot?
9. The FDA model only assesses the benefits of vaccine protection in a six-month period after completion of two doses. Furthermore, it assumes constant vaccine efficacy during that time period.
10. The FDA/Pfizer play fast and loose with their estimates of myocarditis.

Source: “Ten red flags in the FDA’s risk-benefit analysis of Pfizer’s EUA application to inject American children 5 to 11 with its mRNA product.”⁷⁸

the potential to treat the children’s underlying health conditions and to protect them with immune-boosting prophylactic measures such as adequate vitamin D levels, quercetin, zinc, vitamin C and melatonin.

Panelists said they had to vote “Yes” for the few, ignoring the known risk of myocarditis and other harms to millions of children. This is illogical. Even if it were true that a few compromised children would benefit from Pfizer’s mRNA shot, don’t you wonder why they could not just vote to authorize the shot for that much smaller subset of children? Why was this impossible? As it is, the VRBPAC and ACIP votes will lead to pressure and mandates for twenty-eight million children who will receive no benefit and will incur great risk.

COMMENTS AGAINST

VRBPAC members disregarded brilliant challenges made with data put forth by citizens selected to make three-minute public comments during the one-hour comment period. In the presentation by Brian Dressen, PhD—husband of Brianne Dressen, who developed a severe neurological injury following one dose of the AstraZeneca vaccine during its U.S. clinical trial—he told the FDA that after Brianne’s injury, she was “dropped from the trial, and her access to the study app deleted. Her reaction is not described in the recently released clinical trial report.”¹⁴

In other three-minute public comments made at the October 26 meeting, some speakers were for and some against injecting five- to eleven-year-olds. However, those who spoke in favor mostly uttered platitudes, while the comments of those against had substance.¹⁵

Among the commenters urging VRBPAC panelists to vote against authorization were Steve Kirsch, executive director of the Covid-19 Early Treatment Fund. Supporting his comments with referenced slides,¹² Kirsch argued there were far too many unanswered questions for the FDA to authorize the vaccine for children under age twelve.

Viral immunologist Dr. Jessica Rose spoke against emergency use authorization of the vaccine for young children because “Covid-19 is exceedingly treatable,” while Dr. Josh Guetzkow (from the Hebrew University of Jerusalem) argued that the pediatric vaccine “would do more harm than good.” Clinical pharmacologist and biotech consultant Dr. Beatrice Setnick reasonably stated, “Please do not assume the vaccine is safe for children until more data is evaluated.”¹⁵ On a personal note, Amy Alvo, the mother of a seventeen-year-old, described her daughter’s adverse reaction after vaccination.¹⁵

The live blog commentaries furnished to Children’s Health Defense by Dr. Meryl Nass for both the October 26 VRBPAC meeting and the November 2 ACIP meeting provide a further idea of the conflicts of interest at play as well as what was—and was not—said.^{16,17}

DATA ON LITTLE ONES

On November 20, Jessica Rose published a Substack update titled “Adverse events reported for 5-11 year olds occurring immediately,” describing “A recent VAERS update showing ‘anaphylaxis-like’ temporal association of AEs with injections in children.”¹⁸ Rose reported:

In this short timeframe, approximately 1,007,510 children less than 12 have been

The VRBPAC and ACIP votes will lead to pressure and mandates for twenty-eight million children who will receive no benefit and will incur great risk.

TABLE 2: Covid-19 infection survival rate by age

AGE	INFECTION SURVIVAL RATE
0-19	99.9973%
20-29	99.986%
30-39	99.969%
40-49	99.918%
50-59	99.73%
60-69	99.41%
70+ (non institutionalized)	97.6%
70+ (all)	94.5%

injected in the United States. There are currently (as of November 19th, 2021) 2,575 AE reports in the VAERS domestic data set for this age group of children and when a conservative under-reporting factor of 41 is factored in, this number becomes the more realistic estimate of 105,575 adverse event reports filed to VAERS in a time frame spanning approximately 2 weeks. Therefore, approximately 1 in 10 children in this age group have already reported an adverse event in the context of administration of the COVID-19 injectable biological products.

As of the latest VAERS update on November 19, 2021, 82% of reports in VAERS in children ages 5-11 have been made immediately following injection. IMMEDIATELY. This means that there is literally no time difference between the onset of the AE and the injection administration: consider that it takes time to report an AE to VAERS and to make it into the database. These reports include 291 *different adverse event types* including loss of consciousness (the 9th most reported AE), seizures, herpes outbreaks, blindness, cyanosis and death, to name a few [*emphasis in original*]. In CHILDREN.

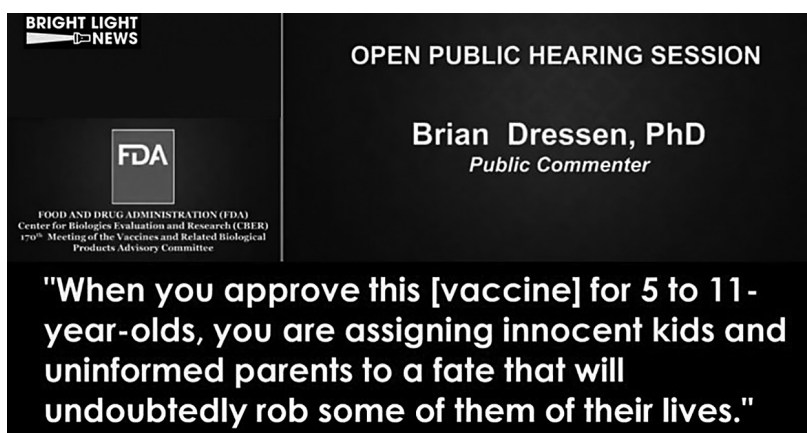
On the same day, Steve Kirsch wrote in his newsletter, “We are killing our kids. Does anyone care?”¹⁹ He added, “Kids that would have never died from Covid are now dying after getting the vaccine. Will it ever end?” Kirsch reported, “The vaccines rolled out for these kids starting on November 7. It is now just 12 days later and we are now killing perfectly healthy kids.” Kirsch then described receiving a text: “3 third graders just died in Pennsylvania. 2 last night and one the day before.” He observed, “That’s hardly an isolated incident,” and continued: **“These deaths simply are never ever going to [be] reported in the NY Times or on CNN [emphasis in original].** So you’re never going to hear about them except from alternate media sources. . . .” Finally, Kirsch summarized a tweet from an experienced emergency room nurse who reported seeing an eight-year-old with myocarditis for the first time in her fourteen-year career.

WHAT YOU DON’T KNOW CAN HURT YOUR CHILD

Ironically, on November 2, 2021, while CDC’s ACIP was meeting to recommend Pfizer’s mRNA shot for kids, Senator Ron Johnson (R-Wisconsin) conducted a Senate Expert Panel on Medical Mandates and Vaccine Injuries in Washington, DC.²⁰ (A twelve-minute selection from the three hour meeting is available here.²¹) Johnson’s session was followed by a rally in front of the U.S. Supreme Court, in the rain.

I met several people injured by the “vaccines” and their families. They would have given anything to have had meaningful informed consent. Now, they wish to spare others from experiencing the same kind of trauma. Shockingly, they have been censored, accused of all sorts of things, misdiagnosed and abandoned by the conventional medical community.

In testimony to politicians and in an interview, twenty-nine-year-old Kyle Warner, a professional mountain bike racer and national champion, described being injured after his second Pfizer shot, as many other athletes have been.²² Warner developed pericarditis (inflammation of the outer lining of the heart), the blood circulation disorder called postural orthostatic tachycardia syndrome (POTS) and reactive



BRIGHT LIGHT NEWS

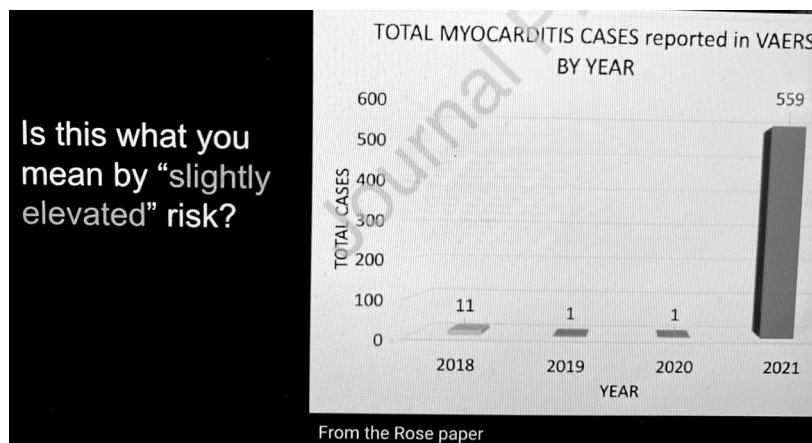
OPEN PUBLIC HEARING SESSION

Brian Dressen, PhD
Public Commenter

FDA
FOOD AND DRUG ADMINISTRATION (FDA)
Center for Biologics Evaluation and Research (CBER)
170th Meeting of the Vaccines and Related Biological Products Advisory Committee

"When you approve this [vaccine] for 5 to 11-year-olds, you are assigning innocent kids and uninformed parents to a fate that will undoubtedly rob some of them of their lives."

Powerpoint slide from Brian Dressen’s three-minute presentation during the public comment period at VRBPAC meeting on October 26.¹²



Powerpoint slide from Steve Kirsch’s three-minute presentation during the public comment period at VRBPAC meeting on October 26.¹²

arthritis. He has not been able to work or ride a bike since.

Thirteen-year-old Maddie de Garay has testified twice before Sen. Johnson, in June and November.^{23,24} While still twelve, de Garay “volunteered” with her two brothers to be a subject in the Pfizer study on twelve- to fifteen-year-olds—the study that Pfizer subsequently used to claim 100 percent effectiveness. Before the clinical trial, she was a healthy straight-A student.²³ After her second Pfizer shot on January 20, 2021, she experienced severe abdominal pain followed by heavy menstrual cycles, fainting, vision problems, loss of bladder control, seizures, verbal and motor ticks and difficulty swallowing food and water, with the result that she requires a feeding tube and pain killers. Paralyzed below the waist, she is now in a wheelchair, has made nine visits to the emergency room and has had three extended hospital visits.²⁵ (But she did not get Covid.) Adding insult to injury, doctors diagnosed her with “anxiety” and a “conversion reaction” allegedly caused by nonexistent preexisting conditions. This fits with the current widespread practice of attributing “vaccine” adverse reactions to psychological issues or characterizing them as “coincidences.” Pfizer listed her as having a stomach ache.

In Pfizer’s trial with children, the sixteen subjects who got the placebo and had Covid experienced mild or no symptoms and acquired natural immunity, which is enduring, robust against variants and far superior to “vaccine” immunity. Natural immunity also contributes to herd immunity. In contrast, all subjects in the vaccine group were injected with mRNA instructions to make spike proteins. Some developed fever, chills, headaches, fatigue, joint

pain, swelling and muscle pain. Some said they were allowed to check off reactions only on a pre-specified list but had no place to write in other reactions not on the list. Thus, we don’t know about other adverse reactions, and long-term reactions are entirely unknown.

BETTER SAFE THAN SORRY

Several of those who testified before Sen. Johnson had their data removed from the study just like Brianne Dressen. People who had reactions to the first shot and didn’t continue were eliminated from the reported results. Only healthy people who completed the study were included.

This is why I cannot remain silent. Better safe than sorry. Do your own due diligence. Think for yourself. ☯

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RESOURCES

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- Children’s Health Defense: <https://childrenshealthdefense.org>
- Front Line COVID-19 Critical Care Alliance (Prevention & Treatment Protocols for COVID-19): <https://covid19criticalcare.com>
- Global Covid Summit: <https://globalcovidsummit.org>
- Informed Choice Washington: <https://informedchoicewa.org>
- Informed Consent Action Network: <https://www.icandecide.org>
- Open VAERS: <https://openvaers.com/index.php> (As of November 12, 2021, nearly a million people had reported a Covid vaccine adverse event, including 94,537 hospitalizations and 18,853 deaths)
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TRULY INFORMED CONSENT CHECKLIST FOR PFIZER-BIONTECH INJECTIONS FOR CHILDREN:
A “VACCINE” INJURY PREVENTION PROJECT
(By Diane Perlman, PhD)

“[W]e’re never going to learn about how safe this vaccine is unless we start giving it.”
~ Professor Eric Rubin of Harvard University, speaking at FDA’s Vaccines and Related
Biological Products Advisory Committee (VRBPAC), Oct. 26, 2021, on myocarditis and deaths,
before voting to authorize Pfizer’s Covid injection for five- through eleven-year-olds.
https://www.youtube.com/watch?app=desktop&v=laaLO_xKmmA

Are you accurately informed? An hour of careful scrutiny can prevent a lifetime of regret.

- Children are incapable of informed consent. Many parents defer to the CDC, despite incomplete safety studies, flimsy and falsified data, exclusion of subjects, whistleblower testimony, expert warnings, no long-term data and over 142,000 public comments urging committee members to vote “No” on authorizing the Pfizer injections.
- What you don’t know can hurt your child. Do not delegate your responsibility to anyone. You owe it to your child to be fully informed about short- and long-term safety before injecting your child with mRNA Covid shots, which contain polyethylene glycol (PEG) and undisclosed ingredients. There are no data on interactions with other vaccines. No party has any liability for adverse reactions, as have occurred with 12- to 17-year-olds.
- The Nuremberg Code—the most important human rights document on medical ethics—states, “The voluntary consent of the human subject is absolutely essential. . . the person involved should have legal capacity to give consent; should. . . be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, over-reaching, or other ulterior form of constraint or coercion, and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. . . there should be made known to him. . . the effects upon his health or person which may possibly come from his participation in the experiment.”
- Do not be manipulated by fear and false information. “Vaccines” do not prevent infection or transmission. Healthy children have preexisting, innate, immune effector cells. Their immune systems handle Covid better than adults, with zero risk of dying. Most have no or mild symptoms and achieve enduring, robust natural immunity against future variants, superior to “vaccine” immunity, which wanes over time. Natural immunity contributes to herd immunity. The Amish reached herd immunity in three months without lockdowns, distancing or masks, as have other groups. Children do not transmit Covid to adults. mRNA shots can alter their immune systems and subject them to continuing booster shots. “Mass vaccination campaigns in children will prevent them from contributing to herd immunity” and provoke “more infectious viral variants,” says Dr. Geert Vanden Bossche, DVM, PhD. Watch his important warning interview (thehighwire.com/videos/vaccine-expert-warns-of-covid-vaccination-catastrophe/).
- Children with Covid rarely require treatment. If they do, effective protocols (that have been censored)—developed by independent, ethical doctors—are available at covid19criticalcare.com and elsewhere. These doctors know how to treat Covid, whereas treating vaccine injuries is new and challenging. Boost everyone’s immunity with a healthy diet, sunlight, adequate vitamin D levels, zinc, vitamin C, vitamin A, melatonin, etc. to reduce severity.
- Do a real risk/benefit analysis. Older people with comorbidities have the highest risk from Covid. Healthy younger people have virtually zero risk from Covid. Risks from the “vaccines” increase with decreasing age. The very few children who died with Covid—not from Covid—had serious illnesses like leukemia, cystic fibrosis, diabetes and obesity. Healthy children will not benefit from “vaccines” that undermine their effective innate immunity, subject them to boosters and render them more vulnerable in the future.
- Do not act under pressure or be controlled by fear—not from authorities, peers or your children’s peers. Do your own research. Think for yourself. You will live with any consequences. Challenge the basis for making social life contingent on getting the shots. These are manipulative forms of coercion, though they seem plausible.
- The best defense against any virus is a strong, healthy immune system.

TRULY INFORMED CONSENT CHECKLIST

Any person who gives consent to a medical procedure for themselves or their dependents must be fully informed of ALL the known or potential adverse effects of the treatment. If they have not been FULLY

INFORMED, those responsible for obtaining consent are guilty of malpractice. (Gary Kohls, MD)

1. Yes__ No__ I agree to allow my child to receive the Pfizer-BioNTech mRNA injection knowing that there are no reliable safety data and that my child will be participating in a medical experiment, which requires fully informed consent according to the Nuremberg Code.
2. Yes__ No__ I am informed that mRNA injections are technically not “vaccines.” They are genetic interventions never used before on humans and based on insufficient animal studies. They wane over time, do not prevent infection or transmission and will be followed by boosters. Impacts may be irreversible.
3. Yes__ No__ I am informed that there is no fully approved FDA Covid vaccine that is available in the U.S.
4. Yes__ No__ I am informed that the FDA and CDC authorized the Pfizer mRNA injections for children based on an Emergency Use Authorization (EUA), even though there is no emergency for 5- to 11-year-olds.
5. Yes__ No__ I am informed that most children who get Covid have mild symptoms, if any, and acquire superior, robust and enduring natural immunity shown to persist for many years or a lifetime and effective against variants. T-cell tests demonstrate natural immunity whether or not there are also antibodies.
6. Yes__ No__ I am informed that about 50% have natural immunity far superior to “vaccine” immunity, have no benefit from “vaccines” and have a 30% higher risk of adverse reactions to the shots, including death.
7. Yes__ No__ I am informed that the Pfizer shots instruct the cells to manufacture spike proteins, which circulate in the body and lodge in the organs in high concentrations in the endothelial cells, ovaries, testes, spleen and heart, as well as crossing the blood-brain barrier.
8. Yes__ No__ I am informed that the adverse effects from mRNA “vaccines” may include anaphylactic shock, allergic reactions, blood clotting, micro-clotting and other bleeding disorders, thrombosis in the brain, other thrombotic events, myocarditis, pericarditis, heart damage, stroke, tinnitus, vertigo and more.
9. Yes__ No__ I am informed that if someone has adverse reactions after the first shot, that person should not get the second under any circumstances, and that more severe reactions and deaths occur after the second shot.
10. Yes__ No__ I am informed that “vaccines” pose an elevated risk of myocarditis, highest in young males, causing permanent heart damage and death, including among healthy athletes. There are no data on myocarditis for ages 5-11. My child will thus be part of a medical experiment on myocarditis in this age group.
11. Yes__ No__ I am informed that some countries halted mRNA injections in children due to myocarditis.
12. Yes__ No__ I am informed that long-term effects in weeks, months, years or decades are unknown but may include antibody dependent enhancement, autoimmune diseases, neurodegenerative disorders, heart problems, thrombotic conditions, prion disease and an increase in chronic diseases and reproductive harms, including infertility.

BASIS FOR GRANTING EMERGENCY USE AUTHORIZATION

13. Yes__ No__ I am informed that the “safety” studies were conducted by Pfizer—which will profit from approval—and not by independent scientists, and that all data were controlled by Pfizer, including elimination of subjects who had adverse reactions to the first or second dose.
14. Yes__ No__ I am informed that many voting FDA and CDC committee members have financial ties to Pfizer.
15. Yes__ No__ I am informed that Pfizer’s studies were rushed, methodologically flawed, conducted on very few subjects who were followed for a very short time and incapable of picking up signals for adverse reactions, and Pfizer is being investigated for falsification of data, failure to investigate adverse reactions and more.
16. Yes__ No__ I am informed that adverse reactions other than fever, chills, headaches, soreness and fatigue were not recorded and that subjects who had serious adverse reactions were eliminated from the study. Their reactions were often dismissed and misdiagnosed as psychological or coincidences.
17. Yes__ No__ I am informed that based on studies on 12- to 17-year-olds, it is a statistical certainty that there will be adverse reactions, injuries, disabilities, trauma and deaths among 5- to 11-year-olds.
18. Yes__ No__ I am informed that health economists who have conducted a risk/benefit analysis and estimated the Number Needed to Vaccinate (NNTV) conclude that “For every one child saved by the shot, another 117 would be killed by the shot” (tobyrogers.substack.com/p/what-is-the-number-needed-to-vaccinate).

VICTORIES OVER BIDEN'S VACCINE MANDATES

On September 9th, President Joe Biden announced his three-pronged attempt to compel American workers to get vaccinated against Covid-19. These included a Department of Labor rule from the Occupational Safety and Health Administration (OSHA) aimed at businesses, a Department of Health and Human Services (HHS) rule aimed at certain health care workers who bill Medicare requiring all associated health care workers nationwide to receive the shot, and an executive order aimed at federal contractors and subcontractors. Fortunately for those of us who oppose medical tyranny the courts have rebuffed each of these vaccine mandates.

THE ONE HUNDRED EMPLOYEE MANDATE: The OSHA rule mandating all U.S. companies with more than ninety-nine employees to require Covid vaccination or weekly testing for their employees, or face fines of up to fourteen thousand dollars per violation, was issued on an “emergency” basis without public notice or comment, thereby circumventing the normal rule-making process. It was challenged in the Fifth Circuit federal court of appeals located in New Orleans by the states of Louisiana, Mississippi, South Carolina, Texas and Utah as well as numerous businesses that would be adversely affected. On November 12, 2021, the court stayed the rule pending further judicial review, citing “grave and constitutional” issues with the rule, which was set to take effect on January 4, 2022. This same rule was challenged by several other states and businesses in various appeals courts. In an effort to consolidate many cases, including the one from the 5th Circuit court, a panel of judges in the District of Columbia applied what is known as the “lottery rule.” Through a random draw process, the winner of the lottery was the 6th Circuit court in Cincinnati, which will likely decide the fate of the OSHA rule. In the meantime, OSHA has suspended implementation of their rule mandating the shots.

THE HHS RULE: The rule issued by HHS mandating all employees of hospitals and other health care workers who participate in Medicare or Medicaid programs be vaccinated was challenged by three groups of states in three federal courts (Florida, Missouri and Louisiana). While the judge in the first case in Pensacola denied the state’s request for a temporary restraining order, just nine days later, on November 30, 2021, the St. Louis court temporarily halted the rule in ten states. A day later, the New Orleans court granted a nationwide preliminary injunction against the rule pertaining to over ten million health care workers who work in facilities that receive federal funding. In this case, U.S. District Judge Terry Doughty cited both federal overreach and the Centers for Medicare and Medicaid’s (CMS’s) failure to go through the proper notice-and-comment rule-making process. CMS has since suspended enforcement of the rule.

GOVERNMENT CONTRACTORS: President Biden’s September 9, 2021, executive order mandating that government contractors and subcontractors require vaccination in their employees and follow masking and social distancing policies was first challenged in a Kentucky federal court by the states of Kentucky, Ohio and Tennessee. In this case, U.S. District Judge Gregory Van Tatenhove found the “president exceeded his authority” and thus issued an injunction on the requirement in those three states. Next up, a federal judge in Georgia temporarily halted the Biden Administration’s vaccine mandate for federal contractors and subcontractors nationwide on December 7, 2021. After acknowledging that the Covid-19 pandemic has taken a tragic toll, U.S. District Judge Stan Baker wrote in his twenty-eight-page ruling, “However, even in times of crisis this Court must preserve the rule of law and ensure that all branches of government act within the bounds of their constitutionally granted authorities.” Prior to Baker’s ruling the regulation had a January 18, 2022 compliance deadline for full vaccination, which would have affected millions of workers across the U.S. economy.

NO CONSTITUTIONAL AUTHORITY: The U.S. Constitution reserves police powers to the states, and health laws are one of those police powers. Furthermore, the executive branch does not make law; Congress wields that authority. In an effort to preserve the intentions of our founding fathers, these successful legal challenges were each mounted by states that recognize that the federal government does not have the constitutional authority to impose vaccine mandates. The Biden administration clearly overstepped its legal authority by trying to impose these oppressive directives. No matter your political affiliation, vaccine mandates are wrong. One of the most basic human rights is that of bodily autonomy, as recognized by the Nuremberg Code. Ethical medicine requires prior, completely voluntary and fully informed consent. Vaccines are a medical decision that should be left up to the individual, not mandated.

To learn more about other important cases visit Health Freedom Defense Fund (HFDF) at healthfreedomdefense.org. HFDF seeks to rectify health injustices through education, advocacy and legal challenges to unjust mandates, laws and policies that undermine our health freedoms and human rights. They are working around the clock to implement a strategy to remove the unethical and unlawful mask, testing and vaccine mandates being rolled out nationwide by government, businesses and educational institutions. As its fiscal sponsor, the Weston A. Price Foundation encourages support of this organization. Donations are greatly appreciated and will be used solely to protect the right to bodily autonomy.

Farm and Ranch

THE WISE TRADITIONS 2021 GUIDED FARM TOUR

By Will Winter, DVM

It's hard to explain the joy of our experience in written words.

I'm happy to report that our fourteenth annual WAPF Conference Guided Farm Visit across miles and miles of Texas was a huge success. If we could take everyone who attended the conference and who wanted to get boots on the ground, we would! However, out of kindness to the farmers and out of our desire to make it an intimate connection for all the attendees, we limit each year's tour to only two buses. Note that each tour sells out far in advance so we recommend registering early for the 2022 tour if you want to go next year!

The tour was led by WAPF executive director Kathy Kramer, who kept us informed and on-schedule, her lovable assistant Mike Mudrak and Tom Linley, who together kept us all fed, hydrated and laughing. The narrators of what we were seeing consisted of myself and the honorable Steve Campbell, who is the top bovine geneticist for grass-fed cattle in the country (Steve and I switched buses at the midway points). It seems like the conversations, discussions and narrations shorten the distance between farms, at least that is our hope.

Both Steve and I spend the other fifty-one weeks of our year visiting and consulting on farms from coast to coast so the WAPF tour adds to our own vision as well.

CIRCLE N DAIRY

The first stop on the tour was the Circle N Dairy outside of Gainesville, Texas (circledairy.com). They are in many ways the model of a true raw milk dairy. They follow all the guidelines and principles of our Raw Milk Producers Guidelines book so it is a joy to see healthy and happy cows! They are also healthy and happy farmers, and are the third generation on this family farm. They work extremely hard and there is a glow that emits from such successful dairy farmers.

They also raise their own crops to feed their cows, and they do their best to create a truly grass-fed and rich milk.

Our group feedback was that they should definitely consider doubling the current price of their raw milk! Seriously, it's totally worth it. Like so many farmers of their ilk, they just don't



Will Winter and Steve Campbell, intrepid tour guides.



Shawn Specht and Grayson Roth enjoy the beautiful day visiting farms!

see the true value of their own lovingly-made products. It's part of our duty as seekers of nutrient-dense, honestly-created food to help support this special breed of farmer and rancher.

After touring the facility, we did our best to empty the shelves and coolers of their on-farm store. Nothing tells the story better than that first sip of their delicious and velvety raw milk! OK, I'll admit it, we almost cleaned them out of their supply of their amazing and farm-made ice cream as well—even with it being morning!

NARROW WAY FARM

Our next stop was the Narrow Way Farm in Ivanhoe, Texas (nwffarms.com). We were lucky to see the last adult turkeys of the year as well as the chicken tractors and egg mobiles of their production. Perhaps most amazing was the restoration of their farmland, due to the rotational grazing and farming practices. All the birds are able to spend their entire life grazing outdoors while kept predator-free. They also raise pastured pork and sell their chicken eggs.

LETTUCE INDULGE FARM

Speaking of chickens, we had a farm-to-table lunch at Lettuce Indulge Farm (LettuceIndulge.com) out of Denison. The Lettuce Indulge farm-to-fork kitchen's gourmet chefs prepared a beautiful lunch in a great setting, serving us chicken from Narrow Way, along with root vegetables and delicious greens, which are produced in their expansive, all-natural greenhouses.

PRAIRIE FARMSTEAD

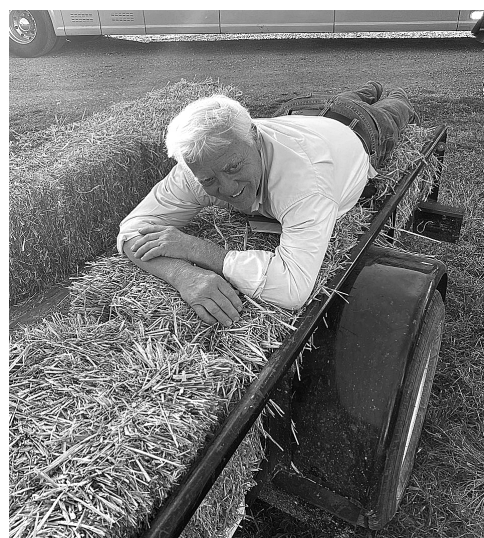
After our sunny outdoor lunch we proceeded to Prairie Farmstead, outside of Sherman (prairiefarmstead.eatfromfarms.com). This farm was so interesting when we visited them in 2019 when our conference was in Texas that we came back. It was even more valuable for us to revisit

and see the improvements. After all, this kind of farming has the goal of not only sustainability, always critically important, but also regenerativity, meaning leaving the land better than it was when acquired. We gave this farm an A-plus in that regard. We were able to witness three generations of farmers and ranchers working together as a family—and all relatively new to this. Together they are expanding their beautiful herd of pasture-raised beef, in this case Southpoll cattle, a new breed of cattle developed specifically to withstand brutally hot days and weather extremes, as well as to thrive on the forages of the southern climates, such as tall fescue, bermuda and bahai grasses. They also have diversified into raising pasture-raised birds and eggs, along with pasture- and forest-raised pork.

It's hard to explain the joy of our experience in written words, but the proof, you might say, is that after all this traveling and exercise, the majority of the attendees gathered together to continue the visiting back at the hotel. Savoring our experiences and sharing the joy of witnessing classic examples of how nutrient-dense, humane and sustainable farm food is created. Stepping off the bus, many asked if they could sign up for next year right away. If all this whets your appetite for farm fun, please join us in person next year! ☺☺☺



Richard Greer of Narrow Way Farm addresses an interested group.



Mike Mudrak sneaks a rest on the wagon.

Legislative Updates

CREATING A NEW NARRATIVE IN ANIMAL AGRICULTURE

By Judith McGeary, Esq.

For Big Ag, things such as the Oregon and Colorado initiatives are priceless opportunities.

Search the Internet for the phrase “animal agriculture under attack,” and you’ll come up with two million results.

There are good reasons that this phrase is high profile. Consider the ongoing threat in Oregon from IP 13, a ballot initiative that would remove long-standing provisions in the law that recognize the fact that livestock are different from pets and should not be subject to the same rules on abuse and neglect. Should this initiative pass, livestock animals could not be killed for food—they could be used only for nonlethal purposes such as milk or wool and other fibers, and with much more regulation on how they are cared for. Artificial insemination would be banned. Under Oregon’s initiative petition process, IP 13 organizers have until July 2022 to gather the signatures (over one hundred thousand) needed to get the initiative onto the November 2022 ballot.¹ The initiative is highly unlikely to pass, but even the slight chance that it might is of deep concern.

A similar initiative was also filed in Colorado earlier this year. If the measure had gone on to be approved by voters in the 2022 election, it would have prevented animals from being killed unless they had lived at least a quarter of their “natural lifespan,” defined as twenty years for cows and ten years for turkeys, for example.² But the ballot measure was struck down by the Colorado Supreme Court before reaching the voters, for violating the “single-subject” rule in the Colorado Constitution.

And then there are the seemingly endless calls to reduce or eliminate meat consumption on environmental grounds: the claims about how much water cows use—which ignore the difference between “green water” (soil moisture from precipitation) and “blue water” (groundwater and surface water resources)—complaints about cow farts, the claimed inefficiencies of meat production (which ignore the difference between

grain-fed and pastured livestock production), and more.

PRICELESS OPPORTUNITIES

These initiatives certainly provide ample grounds to claim a “war on animal agriculture.” But those two million webpages, news articles and podcasts do not simply stem from true grassroots concerns

Rather, for Big Ag, things such as the Oregon and Colorado initiatives are priceless opportunities. They allow the nonprofit entities and individuals who serve as the faces for the interests of companies like Tyson, JBS and Cargill to portray themselves as the victims of attack from crazy vegans and radical environmentalists who will stop at nothing to destroy traditional diets and agriculture.

Are there such people? Yes. Is that all there is to these initiatives or other efforts to reduce meat eating? No. Most of the meat in this country is produced in ways that provide ample grounds for concern from anyone who cares about clean water, clean air, our long-term food supply or treating animals with even a modicum of decency.

FACTORY FARMS

Our movement should not allow itself to be used by the monstrosities that are euphemistically called “confined animal feeding operations” or CAFOs. Even the more popular term of “factory farms” fails to capture the problems with these entities. They force animals to live under extreme conditions that cause many to die from stress, polluted air and other causes before they are old enough for harvesting. Many of the farmers—especially in the poultry and hog side of the industry—are nothing more than paid labor, having sacrificed all autonomy and independence in contracts with massive companies that lock them into debt and complete obedience.

In this system, the workers are exploited, both those that labor in the CAFOs, and even more those that work in the massive meatpacking plants. Indeed, the meatpacking plants often recruit undocumented immigrants because they won't dare file suit about working condition violations or even injuries. Our irreplaceable freshwater resources are frequently polluted, and the people who live near these facilities suffer from the odors, terrible air quality and higher risk of antibiotic-resistant bacterial infections.

Undoubtedly, some people will read that paragraph and jump to the conclusion that I am a radical activist myself, or at the least blind to the evil designs of activists who wish to abolish animal agriculture. Nothing could be further from the truth. Rather, I contend that recognizing, naming and fighting to change the problems in the conventional animal agriculture industry is the best, if not only chance for animal agriculture in the long term.

Right now, Big Ag is dominating the discussion about animal welfare and agriculture. It is manipulating the independent ranching and small farm community, sowing fears about animal rights activists so that many ranchers and small farmers are focused on these attacks rather than the big issues of who controls our food system and long-term sustainability.

UNHOLY ALLIANCE

Consider the debates around the Oregon ballot initiative. A YouTube commentator, the Ice Age Farmer,³ raised the alarm about the proposal. He ridiculed the idea that hogs should have twenty-four square feet of space—which is just six feet by four feet—calling such enclosures “condos.” Yet by both truly traditional farming and regenerative agriculture standards, twenty-four square feet of space is a minimal area, just enough for the hogs to stand up and turn around easily. The commentator also repeatedly quoted the claims of Farm Bureau and other industry mouthpieces about the “efficiency” of conventional agricultural practices, including equating the CAFO practice of dumping their mountains of manure on fields that don't need more nitrogen with the traditional ways manure has been used to maintain fertility.

And proposals like the Oregon and Colorado initiatives allow Big Ag to make allies with urban liberals. Consider the Animal Agriculture Alliance (a Big Ag PR group, with board members from not only the massive livestock industry, but also the pharmaceutical companies and huge row crop industry that enable the CAFOs to function), which convinced the anti-poverty activists in Massachusetts to join them in fighting even more moderate proposals that would make it more expensive for the CAFOs to produce meat. The massive companies that have reaped profits from squeezing producers, mining our natural resources and producing low-quality food are doing a great job making both ranchers and anti-hunger advocates their champions!

The attacks on self-sufficiency and traditional farming need to be opposed, strongly and vehemently. But we don't help that fight by acting as a defender for Big Ag.

Falling into this battle of “animal agriculture versus animal rights activists and environmentalists” simply increases the likelihood of one

of these outcomes: (1) a continuation of the corporate-controlled CAFO system, with various tweaks to make it sound more acceptable, or (2) a shift to highly processed plant-derived foods that are equally dominated by a few large companies (or some combination of the two).

COVERING ALL THE BASES

In support of the first scenario, Big Ag has funded numerous studies showing how CAFOs are more “efficient” than pasture-based livestock. This narrative fits well with American love of high-tech solutions. Consider a new study taking place at Cornell University, funded by Cargill: “Researchers will use the new facilities to understand how animals respond to changes in their diet—with the goal of optimizing livestock nutrition for efficient milk and meat production, minimum greenhouse gas emissions and nutrient waste, and enhanced animal health.”⁵ This is their response to environmentalist concerns—not returning animals to pasture, where they produce healthy meat and sequester carbon in the soil at the same time, but identifying which feeds will produce maximum weight gain per unit of carbon dioxide or methane emitted. Given a choice between going meatless and supporting “efficient, environmentally friendly” CAFOs, most Americans will continue to buy CAFO meat and reassure themselves that the latest technology has solved the problems.

At the same time, Big Ag is laying the groundwork to win even under the second scenario. Many animal products companies like Tyson have invested significant portions of their business into fake foods derived from plants—continuing to push highly processed, nutritionally deficient foods, through a heavily consolidated system that exploits natural resources, workers, farmers and consumers. These established corporate behemoths are trying to make sure that they don't lose ground to the extremely well-financed businesses that are backed by big names in our society. Beyond Meat is already a six-billion-dollar company, and its largest investor is Al Gore's Kleiner-Perkins. Impossible Foods is aiming for a seven-billion-dollar valuation, backed by Serena Williams. And Jeff Bezos, Bill Gates and Richard Branson are all backing a new vegan meat startup.

The grasslands of North America supported hundreds of millions of ruminant animals for millennia. The action of the grazing animals created the deep, rich soils on this continent, and continue to do so today when properly managed.

A BETTER APPROACH

So, what is the better approach?

I propose that we should reject the false dichotomy that underlies the “war on animal agriculture” discussions and loudly promote pasture-based livestock as an ethical, environmentally positive solution that nourishes people and the land while respecting the welfare of all living creatures.

The grasslands of North America supported hundreds of millions of ruminant animals for millennia. The action of the grazing animals created the deep, rich soils on this continent, and continue to do so today when properly managed. Grazing animals provide nutrient-dense food for humans from lands that should not be plowed or cultivated for crops, making them far more efficient and sustainable. And while there are pastured operations that are less than ideal from an animal welfare standpoint, even poorly managed ones are superior to the huge CAFOs—and, at their best, pasture-based farms and ranches provide a rich, happy life for the animals, one that ends quickly and without pain.

But it’s not only what you say, but how you say it. Informing people of the facts about pastured livestock—carbon sequestration, room for animals to express natural behaviors, etc.—in the role of a schoolteacher correcting a student is unlikely to change anyone’s mind! We must start by connecting with people through shared values, beliefs and emotions, and then showing how our local, pasture-based systems meet those values in a positive way.

Which values motivate people’s desire to end animal agriculture as it’s primarily practiced in this country? For most people, it’s things such as valuing clean air and water for themselves and others, compassion for living things and a desire to avoid inflicting pain, and a need for security for themselves and their children (such as knowing that there will be enough food and accessibility of that food).

I suspect all the readers of this article have those same values and needs. So, lead with that commonality and create a connection. And then explain both how regenerative pastured farms fulfill those values and how the so-called plant-based foods do not.

I say “so-called” because so many of the

foods proposed as substitutes for meat are heavily genetically engineered and then heavily processed, so that they are more accurately called lab-based foods than plant-based foods. Consider the Impossible Burger. One of the key ingredients is genetically engineered soy leghemoglobin, grown in industrial vats of yeast fed on broth made of chemically synthesized ingredients that are themselves industrially manufactured. The Impossible Burger uses far more materials and energy than pasture-based beef production (and possibly even more than CAFO-based beef production).

It’s important not to confuse the idea of common values with having the same beliefs. For example, there’s a common conflict between people who believe that humans were given dominion over all the animals and thus animals are there to serve people, and those who do not share that hierarchical belief. But you don’t have to agree on the specific belief about such a hierarchy if you both can agree on the value that no living being should suffer unnecessarily. Look for the commonalities, not the divisions.

There is a war. But it’s not a war against animal agriculture—that’s a diversion. It’s a war about control. Will our food system be controlled by individual human beings, raising real food to feed their communities? Or will it be controlled by a handful of large corporations, producing fake food at the lowest cost possible, seeking to maximize profits in the global markets? We are already far down the latter path, and it will take the collective work of everyone who cares about real food—omnivore, vegan and carnivore alike—to turn that tide. ☯

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BACK ISSUES OF **Wise Traditions** AND OTHER INFORMATIVE LITERATURE

Summer 2011	Sulfur Deficiency; The Importance of Salt; The Senomyx Scandal; Why We Crave; Raw Milk Safety.
Fall 2012	Vitamin & Mineral Synergies; Bacon; Protect Against Tooth Decay with a High-fat Diet; Kombucha.
Winter 2012	Vitamin A Synergies; The Story of Zinc; Natural Skin Cream; Slovenian Soups and Stews; Soy Infant Formula.
Summer 2013	Our Broken Food Supply; The Marketing of Crisco; GMOs in Europe; Insights of a Meat Processor; Natto.
Fall 2013	GMO Dangers; Roundup Dangers: Culinary Traditions in Romania; The Battle for the People's Milk.
Winter 2013	Beyond Cholesterol; Cancer as a Healing Strategy; Grain Traditions in Russia; Push to Pasteurize Breast Milk.
Spring 2014	Dr. Price's Scientific Approach; Weston Price and the Fluoridationists; Cows and Climate; Economics of Raw Milk.
Summer 2014	Nutrition for the Elderly; A New Look at Alzheimer's Disease; In Defense of Wheat; Dangers of Vegetable Oils.
Fall 2014	What Causes Heart Attacks? The Myogenic Theory of Heart Disease; Thrombi in Heart Disease.
Winter 2014	Effects of Smart Phones on the Blood; Dangers of Smart Meters; Protection Against EMR; U.S. Dietary Guidelines.
Spring 2015	Cleansing Myths and Dangers; Toxicity and Chronic Illness; Gentle Detoxification; Great Nutrition Pioneers.
Summer 2015	Vaccination Dangers Issue.
Fall 2015	The Scandal of Infant Formula; Vitamin D in Cod Liver Oil; Cod Liver Oil Controversy; Fermented Fish Foods.
Winter 2015	Water Issue: The Fourth Phase of Water; Sewage in a Glass; Water Stressors; Teaching WAPF to College Students.
Spring 2016	Folic Acid and Glyphosate; Why We Need Saturated Fats; Cod Liver Oil Testing; Flint, Michigan Cautionary Tale.
Summer 2016	Vitamin A; Healthy Fertility; Recovery from the Pill; The Concussion Epidemic; EMR and the ADHD Child.
Fall 2016	Recovery from a Low-Carb Diet; Why We Need Carbs; Salt; Nutritional Yeast; Big Box Stores; Addictions.
Winter 2016	Men's Health; Protein Powders; Fueling the Modern Athlete; Restoring Male Fertility; Glyphosate in Collagen.
Spring 2017	Type 2 Diabetes; Couch Potato or Marathon Runner?; Weight Loss; Costa Rica; Moving Heavy Loads; MSG.
Summer 2017	Cholesterol Sulfate and the Heart; Vitamin D Dilemmas; Five Obstacles to Cure; The Adrenal-Heart Connection.
Fall 2017	Why Do We Get Cancer; Support for Pediatric Cancer; The Tijuana Clinics; GCMaF and Raw Milk; Black Salve.
Winter 2017	The HPA Axis; A Primer on the Thyroid; Recovery from Bioidentical Hormones; WAPF in Peru.
Spring 2018	Mercury Issue: Mercury as Anti-Nutrient; The Thimerosal Travesty; Poisoning Our Children; The Cutler Protocol.
Summer 2018	Treating GERD; Gallbladder Health; Herbal Bitters; Hidden Histamine Problems; Constipation.
Fall 2018	Seniors on Drugs; Chronic Hyperinsulinemia; Dangers of Daily Aspirin Use; Incontinence; Nepal.
Winter 2018	Glyphosate and Non-Hodgkin's Lymphoma; Dangers of Sunscreens; Chronic Disease and Vaccines.
Spring 2019	Surviving in the Aluminum Age; The Cannabis Craze; Fluoride Dangers; Risks from Tablet Use.
Summer 2019	Rancidity Testing of Cod Liver Oil; Getting Informed about 5G; The Ketogenic Diet; Ukraine's Traditional Foods.
Fall 2019	Why We Cook; Mitochondria and Health; Prenatal Ultrasound, Not So Sound; Dissecting Fake Burgers.
Winter 2019	Dietary Support for the Alcoholic; Vitamin B6 and Nutritional Dependencies; Switzerland's Sourdough Bread.
Spring 2020	Vitamin A-Mazing; Sunlight and Vitamin D; Vitamin K2 MK-4, Dr. Price's X Factor.
Summer 2020	Is Coronavirus Contagious? Air Pollution, Biodiesel, Glyphosate and Covid-19; The Current Health Crisis.
Fall 2020	Toxic Iron, Arsenic and Anthrax, Traditional Foods of Morocco; Modified Food Starch.
Winter 2020	The Contagion Fairytale; Chlorine Dioxide Controversy; Ecuadorian Coconut Stews; Infant Constipation.
Spring 2021	Bringing Up Baby; MSG-Glyphosate Connection; Advice for the EMF-Sensitive; Colonoscopy Risks.
Summer 2021	Questioning Covid; Glyphosate and the Gut; Hidden Food Ingredients; Foodways of the Australian Outback
Fall 2021	Sound Frequency Therapy; Covid Vaccine Shedding; Outlawing Meat in India; The Batwa Pygmies of Uganda

HEALTHY BABY ISSUE: Traditional Remedies for Childhood Illness; Baby Food and Formula; Vitamins for Fetal Development; Wrong Advice in Baby Books; Vaccinations; Baby Food; Gut and Psychology Syndrome.

HEART DISEASE ISSUE: What Causes Heart Disease? Benefits of High Cholesterol; Oiling of America and more.

All articles from all journals are posted at westonaprice.org.

Back issues are \$12 (includes shipping & handling). Issues in **bold** \$5/each. Discounts: \$8 for 10-49; \$5 for 50 or more.

HEALTHY 4 LIFE DIETARY GUIDELINES AND RECIPE BOOK in English, French, Spanish and Italian
\$10 each (includes shipping & handling) or \$6 each for 10 or more.

TIMELESS PRINCIPLES OF HEALTHY TRADITIONAL DIETS 28-page booklet in English, French and Spanish
\$1 each (includes shipping & handling), 60¢ each for 100 or more.

SALE: 2021 SHOPPING GUIDE 99-page booklet listing 2,000 products in categories: *Best, Good, Avoid*
\$2 each (includes shipping and handling) \$1 each for 10 or more.

NEW: LISTEN TO THE PODCAST OFFLINE - FLASHDRIVE WITH 3 MONTHS WORTH OF PODCASTS

TRIFOLD FLYERS

The Dangers of Industrial Fats and Oils
Dangers of Vegan and Vegetarian Diets
Myths & Truths About Cholesterol
A Campaign for Real Milk

Cod Liver Oil, Our Number One Superfood
How to Protect Yourself Against Cancer with Food
Nutrition for Mental Health
A Message to Grandparents

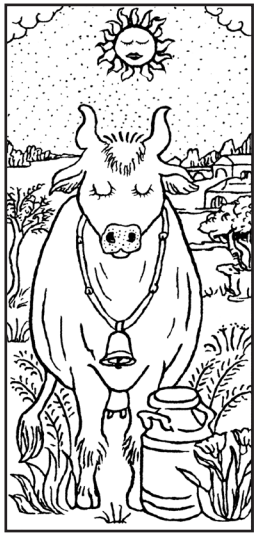
Butter Is Better
Soy Alert!
Sugar Alert!
Vaccination Dangers

Covid-19: Contagious Virus or 5G Microwave Technology?

Suggested donation for flyers is 25¢ each (includes shipping & handling), 15¢ each for 100 or more

Payment may be made by check, Visa, Mastercard, Discover or American Express.

Make checks payable to The Weston A. Price Foundation OR ORDER ONLINE at westonaprice.org or phone (703) 820-3333



A Campaign for Real Milk

LEGALIZATION OF RAW DAIRY PRODUCTS CONTINUES TO EXPAND

By Pete Kennedy, Esq.

On August 16, Alaska became the latest state to legalize the sale or distribution of raw dairy products other than milk or cheese aged sixty days when Governor Mike Dunleavy (R) signed House Bill 22 (HB 22) into law, legislation that legalizes the distribution of any raw dairy product through a shared animal (herdshare) agreement. Value-added is where the money is; states are increasingly expanding the kinds of products raw milk producers can legally sell or distribute. This past year, Montana and Texas also opened up similar opportunities for raw dairy farms.


What follows are listings of states that have legalized the sale or distribution of raw cream, butter and yogurt through statute, regulation, written policy or court decision. There is also a category for states that have legalized the sale or distribution of all raw dairy products including ice cream and unaged raw cheese. Federal law permits the sale of only raw cheese aged at least sixty days in interstate commerce, but there is no federal prohibition on the sale of any raw dairy product in intrastate commerce; it's up to the states to decide that.

There are several states that appear to be allowing the sale or distribution of raw dairy

products through unwritten policy; those states are not included in this list.

Each state is given a designation: “(d)” meaning only direct-to-consumer sales or distribution for human consumption is legal, or “(r)” meaning sales in retail stores are legal. In Maine’s case, “(d)” refers to the towns in the state that have legalized the unregulated sale of raw dairy products with the passage of a local food sovereignty ordinance; there is no equivalent state law in Maine. There are a few states that have legalized the unregulated sale or distribution direct to the consumer of certain raw dairy products through one law and the retail sale through another law. If products are legal in both types of transaction, the state will be designated as “(d, r).”

There are fewer reports of foodborne illness attributed to raw dairy products in recent years; with their good overall track record for safety, and the industrial food system’s decreasing reliability, it’s important to continue the expansion of raw dairy product legalization within the states to strengthen the local food supply.

Anyone with questions about the lists can email Pete Kennedy at pete@realmilk.com or call (941) 349-4984. 

Value-added is where the money is; states are increasingly expanding the kinds of products raw milk producers can legally sell or distribute.



Pete Kennedy hosts the raw milk fundraiser at Wise Traditions 2021.



Mike Mudrak participates in high drama as Miss Raw Milk’s friend Mucin.

STATES ALLOWING LEGAL SALE OR DISTRIBUTION OF RAW DAIRY PRODUCTS

RAW CREAM

Alaska (d)
 Arizona (r)
 California (r)
 Idaho (d, r)
 Kansas (d)
 Maine (d, r)
 Michigan (d)
 Minnesota (d)
 Missouri (d)
 Montana (d)
 Nebraska (d)
 New Hampshire (d, r)
 New Mexico (r)
 North Carolina (d)
 North Dakota (d, r)
 Oregon (goat & sheep only) (r)
 South Dakota (d)
 Tennessee (d)
 Texas (d)
 Utah (d, r)
 Washington (r)
 Wisconsin (d)
 Wyoming (d)

RAW BUTTER

Alaska (d)
 Arizona (r)
 California (r)
 Idaho (d, r)
 Kansas (d)
 Maine (d, r)
 Michigan (d)
 Montana (d)
 New Hampshire (d)
 North Carolina (d)
 North Dakota (d)
 Tennessee (d, r)
 Utah (d, r)
 Wyoming (d)

RAW YOGURT

Alaska (d)
 Idaho (d, r)
 Kansas (d)
 Maine (d, r)
 Montana (d)
 New Hampshire (d)
 North Carolina (d)
 North Dakota (d)
 Tennessee (d)
 Texas (d)
 Utah (d)
 Wyoming (d)

ALL RAW DAIRY PRODUCTS (INCLUDING UNAGED RAW CHEESE)

Alaska (d)
 Maine (d)
 Montana (d)
 North Carolina (d)
 North Dakota (d)
 Tennessee (d)
 Utah (d)
 Wyoming (d)



LEFT: Beauty Queen Miss Raw Milk makes an appearance at the raw milk fundraiser to kick off Wise Traditions 2021.



RIGHT: Master of Ceremonies Will Winter interviews the Nanny State, played by Jill Nienhiser.

INFORMATION RESOURCE FOR WAPF MEMBERS

Consult with Pete Kennedy, Esq., on state laws, regulations and policies including food freedom legislation and issues related to consumer access to raw milk, cottage foods and on-farm meat and poultry processing. (Pete cannot give individual legal advice or recommend support for or opposition to pending legislation.) Contact Pete at pete@realmilk.com.

CANADA: NEW RAW MILK ADVOCACY ORGANIZATION

The Canadian Artisan Dairy Alliance (CADA) has begun operations. CADA is a collective of consumers working to lift Canada's raw milk ban. The organization's mission is using research, education and advocacy to "lobby for access to safe, legal, raw milk and raw milk products produced under appropriate regulation and inspection."

When it comes to raw milk laws and enforcement, Canada is arguably the most draconian nation in the world. In February 2021 an Ontario judge rejected a Charter (constitutional) challenge to end that province's raw milk ban; subsequent to that decision government regulators have raided Ontario raw milk farmers, including Michael Schmidt, the individual most responsible for the increase in demand for raw milk among Canadian consumers. Canadians are among the 1 percent of the world's population living in countries prohibiting the sale or distribution of raw milk. An organization like CADA is badly needed to turn around the hostile climate that currently exists.

Those interested in supporting CADA can join as members, donate and/or help with lobbying. Go to artisandairy.ca for more information.

NEW ZEALAND - FIRST OF "NEW ZEALAND NINE" SENTENCED

On November 23, District Court Judge LC Rowe sentenced the defendants from the first of nine raw milk farms facing criminal charges when he fined both farmers of Alt Energy Farm—Cedric Backhouse and his wife Susan Galea (a WAPF chapter leader)—NZ\$25,000 each for violations of New Zealand's raw milk and animal products laws.

The New Zealand Ministry for Primary Industry (MPI) had brought criminal charges against Backhouse and Galea for twenty-six violations of the country's Raw Milk for Sale to Consumers Regulations 2015 (the "2015 regulations") and the Animal Products Act (APA); the potential penalties for each defendant were up to nineteen years in jail and NZ\$1.8 million (over 1.2 million in U.S. dollars) in fines (see *Wise Traditions* Spring, 2021 issue for more background).

Around the time MPI issued the 2015 regulations there were roughly two hundred raw milk dairies in New Zealand; today there are fewer than 20 percent of those dairies are still in business. The reason for the decline is the cost of compliance with the new regulations. Backhouse and Galea attempted to avoid the burdensome requirements by distributing meat and milk products through a herdshare agreement which they operated for three years. The judge rejected the legality of the farm's herdshare stating, "It was simply a way of selling raw milk to consumers."

Judge Rowe imposed the fine for four of the twenty-six charges that MPI brought against Backhouse and Galea; three of the charges related to the sale of raw milk and the fourth to the sale of "homekill meat." The judge acknowledged that neither defendant had been accused of making anyone sick with their products; he also noted in sentencing the defendants, "[N]either of you have previous convictions and you can be regarded as otherwise of good character"—all mitigating factors in determining the amount of the fine. Chillingly he stated, "I do not start at imprisonment (in deciding on the penalty) because I am not asked to. This is something MPI should reflect on. If I had been asked to consider penalties other than a fine, including imprisonment, I would have. . . . The outcome of this sentencing should not be taken as any sort of guide to or tariff in future cases"—leaving open the threat of the other charged raw milk farmers going to jail for violating laws designed to put them out of business. ☺☺



2000 Raw milk available in 27 states

2021 Raw milk available in 44 states
(thanks to the efforts of A Campaign for Real Milk)

Our Goal: Raw milk available in all 50 states! Help us make raw milk sales legal in the remaining 6 states.



Healthy Baby Gallery



Iona Evelyn was born at home in February, and she is a delightful, easy baby! Mama enjoyed an easy and fast delivery after drinking lots of raw milk throughout pregnancy. Iona started taking cod liver oil at four months and is now enjoying egg yolks, raw milk and butter, bone broth and roasted veggies. Her big brother Benji loves sardines and can't wait to share them with Iona when she's older. We are so thankful to have found the Weston A. Price Foundation—it has made us a much happier and healthier family!

Maple was born on May 5, 2021. Emily, Maple's mom, followed the GAPS protocol for two years leading up to pregnancy, and during pregnancy continued her traditional food diet with lots of fermented cod liver oil and concentrated butter oil. Maple is very healthy. Due to low supply, we had to supplement breast milk with the WAPF homemade raw formula; now at six months, Maple is on this exclusively and is starting to eat other nutrient-dense foods. She is an extremely happy baby and has always slept through the night. In fact, in her first six months, she has woken up crying only twice! We attribute a lot of this to everything we've put into both her and Emily's nutrition.



Local Chapters

Local chapters help you find locally-grown organic and biodynamic vegetables, fruits and grains; and 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 lifestyle. 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 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 or exhibit at our conference.**

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CHAPTER LEADER MEETING AT WISE TRADITIONS 2021
Sixty-eight chapter leaders attended the conference.

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LOVELAND, COLORADO

Sally Fallon Morell with a great team of past and current chapter leaders who organized an event in Loveland, Colorado, where Sally presented her Traditional Diets Seminar to two hundred fifty attendees—an enjoyable day and a record: fifty-two new members! Left to right: Cheryl Harris, Nancy Eason, Sally, Monica Corrado, Andrew Gardner and Gina Biolchini.

Local Chapters

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ALEXANDRIA CHAPTER

At recent meetings, members enjoyed discussing the “Questioning Covid” article from *Wise Traditions* (Summer, 2021), talking about remedies for Covid and learning about the Virginia Freedom Keepers—as well as sharing delicious food!



Local Chapters

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IOWA

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WAYNE COUNTY, OHIO CHAPTER

Twenty-five WAPF members and friends from the Wayne County area gathered at Sandy Zollinger's home to learn how to make sauerkraut, led by Ilona Laubli (pictured). A local organic farmer, Derek Miller, provided cabbage and shared his experiences of starting up his business making and selling sauerkraut. Following the kraut-making demonstration, attendees enjoyed fellowship, networking and tasting one another's WAPF-friendly dishes.

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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 398 local chapters:
322 serve the District of Columbia and every state in the U.S. except
Mississippi and 76 serve 25 other countries.

LOCAL CHAPTER CHAT GROUP

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

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Viroqua: Laura Mathes (816) 309-8708, viroquanutritioncounseling@gmail.com
Waukesha: Elizabeth Schuetze (262) 542-6295, E713521036@aol.com

WYOMING

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Lismore: Deborah Sharpe australianwildfoods@gmail.com [facebook.com/WAPFNorthernrivers/](https://www.facebook.com/WAPFNorthernrivers/) 0429 781 392
Manning Valley: Shelley McClure 04 2683 7432, pollinationmamas@gmail.com
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Ghent: Sofie De Clercq 32 496 93 39 89, info@sofiedeclercq.be holisticnutrition.be

BULGARIA

Sofia: Grigor Monovski +1 359.87.635.9838 wapf.sofia@xpana.bg chapters.westonaprice.org/sofiabg/



LEFT: About one hundred protestors in Westford, Massachusetts stand up for health freedom! Many drivers-by honked their horns. RIGHT: Travis Rowley and Westford chapter leader Kathy Lynch participated in the two-hour event.

International Chapters

CANADA

AB

Calgary: Susan Quirk (403) 483-4338 squirkx@icloud.com

Edmonton: Takota Coen (780) 781-5929, takota@coenfarm.ca chapters.westonaprice.org/edmontonab/ & Elaine Doucette theherbalmama@gmail.com

Olds: Rick Kohut (403) 507-5890, rick@healthstreet.ca

Peace Country: Peter & Mary Lundgard (780) 338-2934 plundgard@telus.net & Levke Eggers (780) 568-3805, levke@telusplanet.net

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Powell River, Sunshine Coast: Dirk & Ingrid De Villiers 6044890046, dirkdevilliers@telus.net

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<https://groups.io/g/WAPFVancouver>, chapters.westonaprice.org/vancouverbc/

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MB

Interlake Region: Debbie Chikousky (204) 202-3781, debbie@chikouskyfarms.com, facebook.com/groups/347912590282481

Pembina Valley: Dean and Tiina Hildebrand (204) 822-3005 deanhild@sdnet.ca

NB

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ON

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Hamilton: Kenneth and Claire Dam (905) 580 1319 kenandclaire@gmail.com

Kingston: Sue Clinton (613) 888-1389 sue@clintondentistry.com & Bob Clinton, DDS, (613) 376-6652, Robert@clintondentistry.com wapfkingston.org

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Prince Edward County: Karen Selick (613) 242-0369, & Angela Bakker pec.wapf@gmail.com

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facebook.com/BeatriceLevinsonNaturopath/



HOLISTIC HILDA'S ROAD TOUR

Podcast host Hilda Labrada Gore made many stops on her way to the Wise Traditions conference in Allen, Texas, including Fletcher, NC, western North Carolina, Knoxville, TN, Franklin, TN, Little Rock, AR and Dallas, TX. Pictured here, an enthusiastic group in Lexington, KY where she made a stop on her return.

International Chapters

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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.

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. 574-323-7919

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 (812) 637-3090.

MA

Health Hero Farm on the agricultural island of South Hero, VT, ships high-quality 100% grass-fed beef to the Boston area. Our farm is certified humane and our pastures are certified organic. See our video at <https://HealthHeroFarm.com/video>

Many Hands Organic Farm in Barre, MA. All products certified organic and free range. Lamb, 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 to Saturday 10-6 or 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.

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 (614) 915-9269, CopiaOhio.com. 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.

WANTED: PRIVATE MEMBERS to raise nutrient-dense grassfed food on our farm through herd share program. Raw milk. Beef. Pork. Lamb. Chicken. Turkey. Eggs. Vegetables. Honey. Members have access to a 1 mile hiking trail through the farm. For an appointment to visit the farm, write to Byler Family Farm 14912 CR 3, Frazeyburg, OH 43822.

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.

Windy Acres is a raw milk dairy. It provides families with raw cheeses, Gouda, Jack, Jalapeno Jack, Tri Colored Peppercorn Jack, White Cheddar, Swiss (Jarlsberg style), Feta, Camembert, etc. We make hand-pressed butter, cream, yogurt, kefir, lamb, pork and beef. Grass-fed, raised without GMO or soy. (541) 613-5239 Windyacres26@gmail.com.

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.

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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.

RAW CHEESES made from milk from our herd of 100% grass-fed A2A2 cows on our organically managed farms. **WE SHIP.** Oberholzer at Hilltop Meadow Farm. (570) 345-3305.

100% grassfed organic A2A2 raw milk and dairy products plus beef, pastured soy-free pork, chicken, turkeys, eggs, beef and chicken stock, fresh and fermented vegetables. Mount Tabor Farm. New Holland, PA (717) 354-3753.

Raw milk cheese from our grass-fed Jerseys, made on our family farm with Celtic sea salt. No grain feed. 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.

SC

S C VEGETABLE FARM EQUIPMENT SELL-OUT. Sold as a package only. IH 531 plow, IH 574 Tractor, only 300 hrs., Pico 10/20 disk cultivator, Lely spreader, 6' scrape blade, 6' lift arm, older Cole planter/cultivator w/ seed plates, 5' Bushog, IH Farmall Super "A" tractor with front cultivator. \$35,900. (864) 292-5001.

TN

Martin Family Farm - located between Knoxville and Chattanooga. Offers pastured pork, eggs, 100% grassfed lamb, pasture raised meat chickens, 100% grassfed - grassfinished beef, veal, and whole raw A2A2 milk from 100% grassfed Jerseys. Everything is organically raised in harmony with nature, and is sold at the farm. Contact address and farm location: Martin Family Farm 959 Co Rd 423, Athens, TN 37303.

VA

Salatin family's Polyface Farm has salad bar beef, pig-aerator pork, pastured chickens, turkeys and eggs, and forage-based rabbits. Near Staunton. **Nationwide delivery available.** Call (540) 885-3590, polyfacefarms.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.

VT

Health Hero Farm on the agricultural island of South Hero, VT, ships high-quality 100% grass-fed beef to the Boston area. Our farm is certified humane and our pastures are certified organic. See our video at <https://HealthHeroFarm.com/video>

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

Prairie 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. Contact: (570) 855 3715; email: prairiefoods@mailbug.com.

Successful retiring farmer seeking paid apprentice. Rural S. Oregon Cascades 100-ac. forested/9-ac. pastured organic beef main operation. Very established customer base. Seek mature, responsible, teachable person with desire/willingness to learn. Basic Ag/Husbandry is necessary but the willingness to learn is most important. Ongoing projects in construction, soil/pasture management, agronomy, large composting, husbandry, agriculture, irrigation, gardening, forest management, heavy equipment, mechanics, welding, etc. We try to do it all here. Looking for a long-term potential partnership. Opportunity of a lifetime. inforoc@posteo.net

TEMPLE WILTON COMMUNITY FARM IN WILTON, NH is seeking an experienced biodynamic vegetable grower, beginning with the 2022 season. The grower will work cooperatively with our dairy and other farmers, the Board of Trustees, and the community to re-envision and renew our farm to enhance our long-term sustainability. The

farmer who has worked these lands for the farm for 36 years is available for advice on the fields and community. Info & details including compensation and benefits at www.twcfarm.com.

HEALTHY PRODUCTS

FLUORIDE FREE AMERICA Mission: Enhancing communication between individuals and organizations to exchange information and create strategies to end water fluoridation. facebook.com/waterliberty * [Twitter.com/FluorideFreeAmerica](https://twitter.com/FluorideFreeAmerica) * 70% of Americans are fluoridated. JOIN IN THE EFFORT TO END FLUORIDATION - You have the right to safe drinking water.

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CRAFTS & CLOTHING

Beautiful crafts by local artists. Keep your gift-giving dollars in the USA. Alpaca blankets, socks and yarn; hand painted decorations, paintings by award-winning artist David Zippi; handmade quilts. Exclusive source of Nourishing Traditions posters. Saturday farm tours. Store open Thurs-Sat 10-6 or by appointment. P. A. Bowen Farmstead, 15701 Doctor Bowen Road, Brandywine, MD. (301) 579-2727, pabowenfarmstead.com.

DVDS/ON-LINE VIDEOS

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!**

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HOMES/FARMS & LAND SALE

BEAUTIFUL PREPPER RESOURCE RETREAT, upstate South Carolina 15 minutes west of Lake Keowee. Secluded 4,400sf. luxury energy efficient home: 4br, 6 full bath, walk in level has easy conversion to 2 separate apts. Designed for self sufficiency during adverse times. 50 acre historic farmstead includes 10 acres bottomland and pasture, 3 stall horse barn, 2 streams, spring fed stocked pond, \$699,500. (864) 292-5001. website: SCCherokeePathRetreat.com.

Business and farm in Oregon looking for a buyer. The farm is a turn key operation. It has a 30 cow 30+ heifer herdshare dairy, with over 100 members. Includes cheese room operation, USDA-inspected raw dairy cheese room for extra revenue, underground fodder container and green room, smaller greenhouse, and orchard that haven't been completely developed for revenue. On one side of the parlor is for cows and one for sheep or goats. A large walk-in freezer and milk equipment for milking sheep and cows. Deliveries to Portland, Medford, Ashland, Dalles, Bend, Redmond, and on-farm sales. See pictures windyacresdairy.com. Call (541) 613-5239.

Raw milk dairy farm for sale 30 miles south of Atlanta, Georgia. The business has a solid customer base and is very profitable. 10 minutes from I-75 and in a convenient location to all areas of Atlanta, but still feel like you are in the country. Business comes with two great houses, barns, necessary equipment and 20 acres. We have blueberry bushes, figs and muscadine vines and plenty of garden space. We also have a huge walk-in freezer and outdoor chicken processing facility. Property is also available for sale without the business. Call Kevin at (770) 584-6164 or email allthings828@lavabit.com.

NETWORKING

I work as a private chef who cooks traditional foods recipes for people in their homes. I use high quality ingredients like pasture raised meats and cooking fats, raw milk, bone broths, and seasonal produce. I am interested in networking with other real foods private chefs so we can help support

each other and share tips for how to run a private chef business. I am located in Canada; I look forward to chatting with you! Jana Kutarna Jkutarna@gmail.com.

RESEARCH

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.

WITH THE AUSTRALIAN DAIRY INDUSTRY STRUGGLING, farmers walking off the land and suicides at dismal highs—it's time for urgent action. Our biggest project this year will road test the 2009 risk assessment by Food Standards Australia New Zealand (FSANZ). Please DONATE here ausrawmilk.org/donate.

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to bring their gifts to the world. Trained and certified coach, meditation teacher & WAPF member. FREE 30 min. trial session. hiplivingcoach.com.

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Book your stay at Mulberry Lavender Farm and B&B in Tennessee to experience a simpler life and watch heritage animals thrive. Visit the farm store or stay in the Historic Farmhouse or Cottage, with all-organic farm breakfast. Book online at mulberrylavender.com.

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SOUTHERN MARYLAND – Farm stay at P A Bowen Farmstead. Living room with kitchenette, 1 bedroom, plus cots, to sleep 4, even 6 total. Barbeque, pool, private entrance. Tree house for children. Walks, farm activities. 1 hour from downtown Washington, DC and Annapolis. Listed at AirBNB or contact Lindsay at farmstay@pabowenfarmstead.com. 15701 Doctor Bowen Rd, Brandywine, MD.

CRAFTS



Wise Traditions Alpaca Vest

WAPF Gold Sponsor Villa de Alpacas is proud to offer this super-soft, ultra-warm Alpaca vest to our friends at WAPF! These beautiful, high-quality vests are tailored for an attractive fit, easy care, and a lifetime of wear. Sizes S-M-L-XL in a variety of natural & hand-dyed colors.

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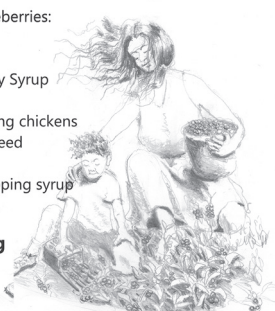
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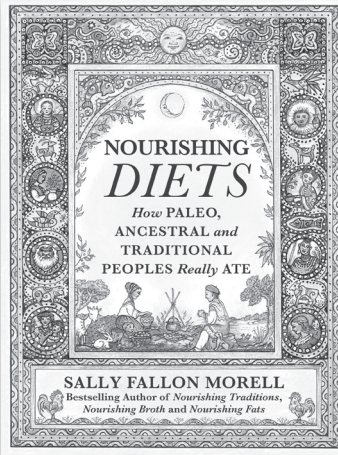


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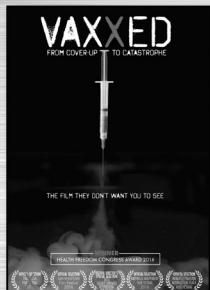


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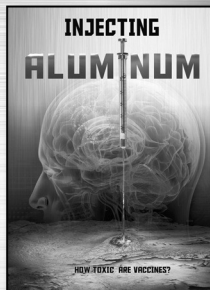
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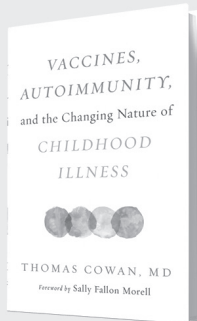


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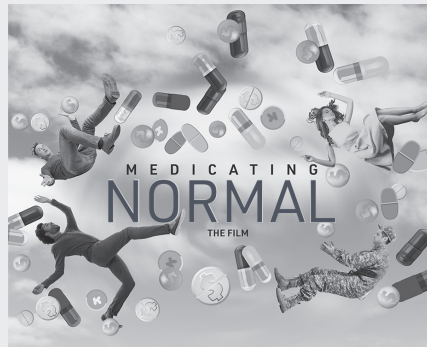
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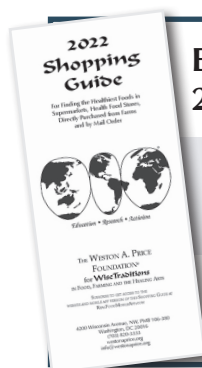
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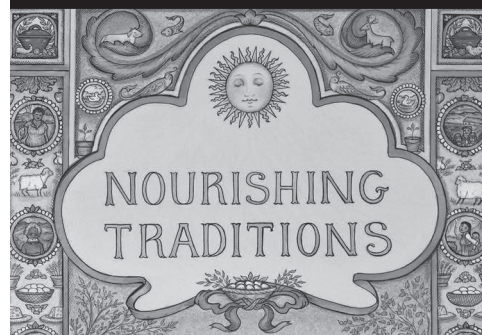
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Upcoming Events

2022

- Feb 17-19 GAPS OnCon online conference:** Featuring Natasha Campbell-McBride, Stephanie Seneff, Monica Corrado, Sally Fallon Morell and others.
Contact: gapstraining.com/gaps-oncon-2022/
- Feb 26-27 Health Freedom Expo online conference** featuring Karen Lyke, Judy Mikovitz, Sherry Tenpenny, Sally Fallon Morell and others.
Contact: trinityhealthfreedomexpo.com.
- Apr 23 Berkeley Springs, WV:** The Contagion Myth (full presentation) by Sally Fallon Morell. **Contact:** arlingtoninstitute.org/event/sally-fallon-morell-the-contagion-myth/.
- May 1 P A Bowen Farmstead, Brandywine, MD:** Nourishing Traditional Diets for Health and Happiness, with Sally Fallon Morell. **Contact:** westonaprice.org.
- May 7 Polyface Farm, Swoope, Virginia:** The Extraordinary in the Ordinary. A Holistic Hilda event at Polyface Farm featuring Joel Salatin, Hilda Labrada Gore and Sally Fallon Morell. **Contact:** holistichilda.com.
- Jun 11-12 Polyface Farm, Swoope, VA:** Nose-to-Tail Eating with Sally Fallon Morell, Joel Salatin and others. **Contact:** godsgoodtable.com.
- July 8-9: Nashville, TN:** IABDM@TheDental Festival featuring Sally Fallon Morell and many other speakers on holistic dentistry. **Contact:** events.iabdm.org.

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Stay Tuned for Details!

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