



# Wise Traditions

IN FOOD, FARMING AND THE HEALING ARTS

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THE WESTON A. PRICE FOUNDATION®



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# President's Message

Here at the Weston A. Price Foundation, we have never shied away from difficult topics, and in this issue we take on another: the increasing occurrence of gender dysphoria. This we do at the request of a number of members, including several parents who are bewildered and heartbroken because a child of theirs wants to change his or her sex. While I take a look at the nutritional factors that interfere with optimal hormonal development, Dr. Anthony Jay explores the pervasive influence of environmental plastics, Anke Zimmermann provides homeopathy support and Merinda Teller reveals the horrific effects of sex-change drugs and surgeries.

We have not published this information to shock or offend, but to offer hope to confused teens and to parents who wish to become grandparents. I personally know several individuals whose confusion disappeared and their lack of interest in the opposite sex was resolved when they began eating the Wise Traditions way, specifically a diet containing plenty of animal fats. To put it simply, what we are seeing today are the long-term effects of the USDA dietary guidelines and a national policy that promotes the substitution of toxic soybean oil for butter and lard.

It was wonderful seeing so many of you at Wise Traditions 2022 in Knoxville, Tennessee—we had almost fifteen hundred participants! In our Spring issue we will publish some of the most interesting presentations. You can hear them all by ordering a set from Fleetwood at [fleetwoodonsite.com/wise/2022/stream/](http://fleetwoodonsite.com/wise/2022/stream/). We've posted a link to Tom Cowan's and Andy Kaufman's popular presentations on the home page of our website.

As another momentous year comes to a close, I would like to thank all of our members for their support—not only for financial support but also for their encouragement and faith in our work. As we see more and more of the nation's children suffering from nutritional deficiencies, environmental toxins and the assault of vaccines, it becomes clear that nothing is more important for our future than the work we are doing. Our main focus has always been on providing information to parents so that their children may have the gift of health, and we know that our work is having an effect when we hear from those who are providing a Wise Traditions diet for their sons and daughters. Truly, you are supporting a natural selection of the wise, a generation of optimally healthy and clear-thinking individuals whose task it will be to solve the many problems that beset mankind.

We wish all of you a happy and healthy holiday season and health and prosperity in the new year. 

# Letters

## SOCIAL CREDIT SCORES

Yesterday I went to the Weston Price website to order DVDs and flash drive recordings of the *Wise Traditions* conference. Three times I tried to purchase the recordings and three times my Visa card was declined. Finally, my card was blocked. I called my bank because I use this card very regularly and this has never happened before. They did some research and said that my card had been given a “low rating” which caused it to decline. The bank manually removed the “low rating” and I was able to complete my purchase.

So my husband immediately drove to the bank to speak with the manager. He said that Visa is now putting their own ratings on credit and debit card purchases and was denying my transaction based on their own criteria. I could not make another purchase until the bank intervened. The manager said it is now regularly happening that accounts may be flagged by Visa if, for example, customers purchase a gun with their card. The bank manager agreed with my husband that this is the beginning

of Visa implementing the social credit scores being tied to our ability to transact business. Evidently, Visa does not think I should be doing business with Weston Price!

I wanted you to be aware so that people know they still have recourse if they go directly to their bank.

Sandi Blanchard  
Tennessee

## BALANCING THE AUTONOMIC NERVOUS SYSTEM

I absolutely love the *Wise Traditions* journal and read it cover to cover every time it arrives. I found the article on sulfur really interesting.

It was a little disturbing, however, that the authors completely omitted specific chiropractic adjustments as an approach to balancing the autonomic nervous system.

There is abundant evidence that good, specific and regular chiropractic care will up-regulate the parasympathetic nervous system, thereby restoring the normal adaptive response to the body. I have found this to be the case in

my own chiropractic practice in regard to many of the symptoms listed in the article.

As stated in the article, “We underestimate the intelligence the body has in initiating what we think as a pathology.” I couldn’t agree more!

Keep up the fantastic work you do.

Michelle Whitney, DC  
Guelph, Ontario, Canada

## THE BENEFITS OF PASTURED PIGS

In case you hadn’t heard, the South Dakota Happy Grazing raw milk dairy has been ordered to stop sales while they await a confirmation of a possible positive E. coli test.

They have been my supplier for some time and seem to be competent and scrupulous operators. I wonder whether the South Dakota Health Department people have been pressured by USDA operatives into taking unfair actions against these producers. It seems that there have been excessive numbers of food recalls on flimsy evidence lately, emanating from federal agencies.

I have advised the Eisenbiese family at Happy Grazing Dairy to procure a large batch of young pastured pigs and suitable, portable electronet fencing to contain them. Then their milk can produce a profit by feeding it to the pigs, until they are cleared to sell to the public once again.

I would advise any raw milk supplier to keep a small backup pig operation, fed whole or skim milk, since it can be rapidly expanded in times of negative regulatory action, due to the wonderfully high reproduction rate of our porcine friends.



Andrew Kaufman, MD,  
hugs Sally Fallon  
Morell after receiving  
the coveted  
Integrity in Science  
Award  
for his work  
in uncovering  
the virus fraud.

# Letters

Becoming licensed to raise popular dog breeds fed on raw milk could likewise help. Man's best friends also have a high reproduction rate useful for fast expansion weathering a regulatory storm.

Last of all, do any of your readers have experience spreading milk on garden ground as a fertilizer? Seems it could be useful as a last-ditch or supplementary use.

Ken Lindberg  
Newcastle, Nebraska

## MYPLATE

My company is doing some videos for USDA's Food & Nutrition Service to promote their "Discover MyPlate" curricula for kindergartners. (Sigh!)

I was downloading their materials to do the background content research and happened to find this infographic, showing "scores" stratified by age of how well Americans align their choices with the dietary guidelines. The scores range from fifty-three to sixty-six by age group, out of one hundred. Of course, they don't tie one's score to any health markers but it's implied that the closer your score to one hundred, the less likely you are to get diabetes, heart disease or cancer (versus more likely, I'd think).

You can see more infographics here: [myplate.gov/resources/graphics/infographics](http://myplate.gov/resources/graphics/infographics). Five ways to incorporate canned peaches! Canned pears! Frozen broccoli! Canned or frozen corn! Everything with vegetable oil and lowfat dairy. Mmm-mmm! The

one called MyPlate Holiday Makeover says, "a little gravy goes a long way!" (Says who? So you can't even splurge at Thanksgiving?) The dietary guidelines are grim!

Jill Nienhiser  
Kansas City, Missouri

Recently, I was at a three-day seminar which trains professionals in craniosacral fascial therapy (CFT). They recruited babies for us to practice with, mostly from a Facebook tongue tie forum because tongue tied babies usually have feeding problems, tight fascia and cranial issues. Some of the babies had already had a frenectomy and some had not. Indeed, most of them were tight, irritable babies who didn't sleep, feed or poop well.

It came up that one of the moms follows a WAPF diet, drinks raw milk, etc. Her baby was six months old and had a mild or moderate tongue tie which she had chosen not to clip and just wait and see how he would do. This little guy stood out so much from the rest—not irritable, no tightness, cranium and jaws expanding and growing. He was totally present, cheerful and in charge (in an adorable way). He was breastfeeding well. His mom was bright and energetic, unlike most of the other exhausted (rightfully so) moms with difficult babies.

It's only one case, but the difference was dramatic. Despite a tongue tie (which will usually limit getting the tongue to the palate and interfere with growth of both jaws and expansion of the skull), this infant was thriving. This mom had two other older children who had had ties. Whatever the reason for the ties (I'm not sure anyone has a good answer for this), the WAPF diet was surely helping this little boy overcome the usual problems associated with it. He was such a joy.

Barbara Carr  
Columbia, Missouri



## TONGUE TIE

Thank you for your article on tongue tie (Fall 2022). I couldn't agree more and have such frustration over this whole issue. I'm in a few groups (tongue tie babies, cranial birth trauma, etc.) where this theory is stated over and over as if it were fact.

Also on these groups, the WAPF diet is often mentioned as a counterclaim to the soft food theory to explain crooked teeth, but I'm not sure it is drowning out the false claim enough.

# Letters

## TRAUMA AND DISCONNECT

I am ex-trans, or a detransitioner, and had surgery. After changing my diet and working on my health from a holistic approach—including adding meat to my formerly pescatarian diet—I realized I was a woman all along. Believing I was non-binary was due to trauma and a disconnect with my body.

As I testified before the Florida Board of Medicine in October 2022, prior to my transition, I had spent twenty years in mental health therapy with conventional modalities. I didn't respond well to medications, saw a gender therapist, and had two rounds of TMS (transcranial magnetic stimulation therapy). I was diligent and wanting to heal, but nothing my doctors offered had healed me because they always saw my issue strictly as a mental one.

I was thirty and at the end of my rope when I transitioned. At the time I

believed I was non-binary. I struggled with severe mental illness and suicidal ideation. I had a trauma history: when I was in sixth grade, my best friend had been raped by her brother. Being a girl meant I was vulnerable. I started to act more masculine.

This should have been a red flag. Yet within a few months of requesting top surgery, it was performed on me. I developed complications after my surgery. There were many times I didn't know if I would make it through the night.

If I made this mistake as an adult, a young girl could, too. Not only did my surgery exacerbate my mental health issues. I now struggle with physical complications as well. Taking on another gender was a way for me to escape womanhood. Escape is not a valid way of dealing with trauma; you will have to deal with it eventually.

I was able to work through these

difficult emotions and improve my mental health through a holistic approach. I had physical health issues that had been previously overlooked. Had that been managed, I would never have gotten the surgery. This surgery was a horrible misdiagnosis. The goal of healthcare should always be to get to the root cause of the problem.

Today I am more grounded than I have been my entire life, but I am mutilated. Between my carved-up body and the physical complications, I often question whether there's anything on the other side. Where my breasts were are hollow. I can never get them back. I can never fit a dress the same way again. I can never breastfeed. Who will love me?

You know what keeps me going? Stopping this from happening to someone else. You can find me on social media through [allmylinks.com/thegetbetterresearcher](http://allmylinks.com/thegetbetterresearcher).

Camille Kiefel 



### ACTIVIST AWARD WINNERS

Yolanda Hawthorne, Georgette Jones, Leigh Merinoff, Kathleen Phillips, Christine Muldoon, Debra Mize, Karen Hamilton-Roth and Michele Reneau (not shown).



### PRESIDENT'S AWARD

Executive Director Kathy Kramer receives the first annual President's Award.

# Caustic Commentary

Sally Fallon Morell takes on the Diet Dictocrats

## SPERM COUNTS PLUMMETING

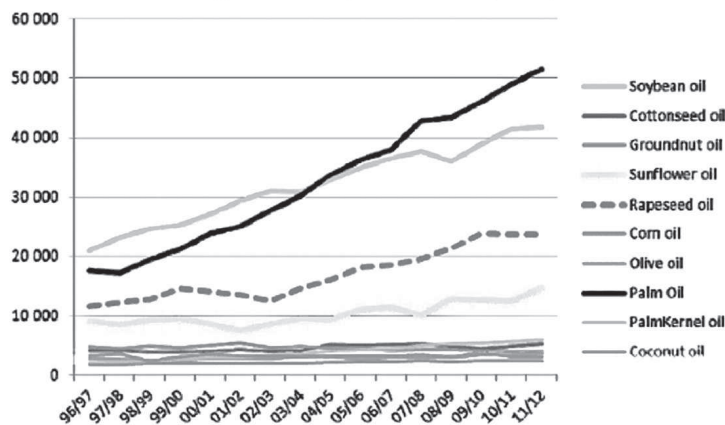
New evidence indicates that sperm counts are dropping dramatically throughout the world. In a just-published analysis appearing in *Human Reproduction Update* (November 15, 2022), scientists report that sperm counts dropped by more than 50 percent between 1973 and 2018, and the rate of decline is accelerating. Since 1972, sperm counts dropped about 1 percent per year; since 2000, the rate of decline has averaged more than 2.6 percent per year. The average global sperm count in 2018 was forty-nine million per milliliter of semen, only slightly more than the “tipping point” of forty-five million per milliliter, at which level the ability of a man to cause a pregnancy starts dropping dramatically. Researchers rightly point the finger at endocrine-disruption chemicals used in household items and agriculture, but dance around the issue of diet—because a major contributor to fertility decline worldwide has to be the “displacing foods of modern commerce,” particularly the replacement of animal fat with industrial seed oils. The most serious offender is soybean oil, which carries a load of estrogenic isoflavones in addition to glyphosate and other agricultural chemicals. Soybean oil production has doubled during the last twenty-five years.

## STILLBIRTHS AND MISCARRIAGES

The *Epoch Times* has reported some alarming trends following the unconscionable push to give the Covid-19 vaccine to pregnant women. A leaked memo from a nurse in Fresno, California, revealed how her hospital has seen a dramatic rise in the number of stillbirth cases—from an average of one or two every three months to more than twenty-two stillbirths per month after the shots began (November 2, 2022). Dr. James Thorp, a maternal-fetal medicine expert, has analyzed the data in the Vaccine Adverse Event Reporting System and

found that in comparison to flu shots, the Covid-19 vaccine has resulted not only in a fiftyfold increase in miscarriages, but also a one thousandfold increase in menstrual irregularities, a one hundredfold increase in fetal chromosomal abnormalities, a fiftyfold increase in fetal malformations, a two hundredfold increase in fetal cardiac arrest and a seventyfold increase in fetal placental thrombosis (theepochtimes.com, August 3, 2022). Germany, Sweden, Switzerland, UK, Taiwan, Hungary and the U.S. all recorded large drops in births, with miscarriages occurring “almost like clockwork, approximately nine months after pregnant women around the world started getting the vaccine (europere-loaded.com, August 23, 2022). What the pregnancy rate among vaccinated young women will be remains to be seen. The only silver lining to these personal tragedies is that many people are waking up to the dangers of vaccines in general, and of the Covid-19 shots in particular.

Vegetable oil production (1000t)



## EXCESS DEATHS

Another report in the *Epoch Times* (September 7, 2022)—which received over one million views—indicates record numbers of excess deaths among young adults worldwide. According to nurse educator Dr. John Campbell, excess death rates in 2022 should be lower than average now since the most vulnerable people already died from Covid in 2020. However, instead of a drop in non-Covid-related deaths, the numbers are rising—thus, the number of excess deaths is even worse than it appears. For example, deaths in Scotland are 11 percent above average for this time of year and have been above average for the past twenty-six weeks. This pattern reappears worldwide. According to Campbell, the U.S. has suffered more, cumulatively, from excess deaths than any other country. Circulatory problems, diabetes and cancer top the list of causes. And of the athletes who are dy-

# Caustic Commentary

ing suddenly, up to 80 percent had no symptoms or family history of heart disease.

## EXCESS DEATHS IN THE BALEARIC ISLANDS

The Balearic Islands, which include the island of Mallorca, are a tourist destination off the coast of Spain. The year 2022 saw a 400 percent increase in deaths compared to the first year of the pandemic and a 90 percent increase compared to the second, largely from stroke, heart attack, pulmonary thromboembolism and coronavirus infection itself ([euroweeklynews.com](http://euroweeklynews.com), November 20, 2022). Why the huge increase compared to nearby Spain? Did the SARS-CoV-2 virus suddenly discover the Mediterranean vacation spot? Or could it be . . . 5G? On November 3, 2020, the government of the Balearic Islands and Wireless DNA signed a collaboration agreement to help the Balearic Islands develop 5G mobile technology. They worked fast because the current map ([nperf.com/en/map/5g](http://nperf.com/en/map/5g)) shows the Balearic Islands are now well covered. Residents were furious when without permission from town planners, a large cell tower went up in the village of Camí de Can Boqueta, blocking their view of the picturesque Tramuntana Mountains ([majoracadailybulletin.com](http://majoracadailybulletin.com), October 5, 2021). Public health officials in the Balearic Islands are at pains to dismiss “rumor-mongering” that vaccination complications have caused the deaths, but they do not even mention the theory that 5G could be contributing to—or causing—the many deaths.

## CONTORTED LOGIC

Public health officials are in a panic to explain the increase in blood clots, strokes, heart attacks, dizziness, fainting, blurred vision and loss of smell and taste that so often happens in patients after Covid vaccination. In an article entitled “Covid 19 vaccines and the misinterpretation of perceived side effects clarity on the safety of vaccines” (*Biomedicine* (Taipei), September 1, 2022), author Raymond Palmer notes that “the anti-vaccination movement across the world is currently at an all-time high. Much of this anti-vaccination sentiment could be attributed to the alleged side effects that are perpetuated across social media from anti-vaccination groups. Fear mongering and misinformation being peddled by people with no scientific training to terrorise people into staying unvaccinated is not just causing people to remain

susceptible to viral outbreaks, but could also be causing more side effects seen in the vaccination process.” Since “mental stress clearly causes vasoconstriction and arterial constriction of the blood vessels. . . if subjects are panicked, concerned, stressed or scared of the vaccination, their arteries will constrict and become smaller in and around the time of receiving the vaccine.” In other words, all the side effects “could most likely be attributed to the fear mongering and scare tactics used by various anti-vaccination groups.” In other words: it’s your fault, you fear-mongering anti-vaxxers!

## ANOTHER PARADOX

Is your doctor badgering you to take statins to lower your LDL-cholesterol? Here’s a new study you can show him when you tell him to shove it. The authors identified nineteen studies that included more than six million individuals; eighteen of the studies provided data on total mortality. In eight of them, those with the highest LDL-cholesterol lived as long as those with normal LDL-cholesterol; in nine of them, they lived longer—whether they were on statin treatment or not. The conclusion: high levels of LDL-cholesterol are not associated with reduced lifespan. “These findings are inconsistent with the consensus that high lifetime LDL levels promotes premature mortality. The widespread promotion of LDL-C reduction is not only unjustified, it may even worsen the health of the elderly because LDL-C contributes to immune functioning, including the elimination of harmful pathogens” (*Annals of Epidemiology & Public Health* 2020;3(1):1040). Not to mention those unpleasant side effects from the cholesterol-lowering drugs themselves—muscle weakness, heart failure, impotence, depression and Parkinson’s disease.

## GROWTH MARKET?

“Autism Can Be a Growth Market, if Investors Help It Scale Up,” was the title of an article by David Feshbach appearing in *Barron’s* financial magazine (September 3, 2022). Feshbach notes that “Talented entrepreneurs, led by parents and siblings of individuals with autism, have leveraged their passion, expertise, and networks to create an emerging technology ecosystem. Advances in smart devices, virtual reality, artificial intelligence, big data, and videoconferencing have enabled a marketplace to grow around autism technology and other personalized interventions. Autism start-ups are

# Caustic Commentary

now receiving millions of dollars in funding.” Looks like his son’s tragic condition has been a good thing for this father. “Last year, the company I helped build all those years ago was acquired by a major private-equity investor.” Since “the global market for autism spectrum disorder treatments is projected to grow from \$1.93 billion this year to \$3.17 billion by 2029,” it’s time to get on the gravy train. Feshbach may have cashed in on autism, but most parents are impoverished by the occurrence of autism in their child or children. And the solution, of course, is not expensive high-tech gadgets but the courage to protect your children from vaccinations and the wisdom to feed them nutrient-dense food—not something the venture capitalists can make any money on.

## VITAMIN D AND KIDNEY STONES


Taking large amounts of vitamin D is the current fad, even endorsed by mainstream physicians; many patients are taking up to 10,000 IU per day. This is not something the Weston A. Price Foundation recommends. Vitamin D requires balance with vitamins A and K2, and all these vitamins should come from food, not isolated supplements. One thousand IU vitamin D from food is perfectly adequate for most people. Taking vitamin D supplements indeed has a dark side: kidney stones. In a study published in *Nutrients* (2018, 10, 366), the authors note growing evidence that taking vitamin D, or having high levels of vitamin D in the blood “may increase urinary calcium excretion and kidney stone formation in predisposed individuals. . . .” In fact, studies that look at the effects of taking vitamin D, including studies dedicated to bone fractures, “did not demonstrate a significant benefit of vitamin D.” Without the support of vitamins A and K2, calcium can end up in the wrong place—in the soft tissues as kidney stones and not in the bones, where it belongs.

## CONTAMINANTS IN FISH OIL

Another fad in the health world is fish oil supplements, for their content of omega-3 fatty acids DHA and EPA. In November, the Hong Kong Consumer Council announced the test results of twenty-five samples of fish oil supplements and found that all contained various levels of contaminants. For example, 95 percent of the samples contained a toxin called 3-monochloropropanediol (3-MCPD), which is linked to damage to the kidneys, central nervous system and male reproductive system. According to the council, the compound

can be produced during high-temperature deodorization at 160 degrees C (320 degrees F!). Another toxin formed during processing is glycidol, which is carcinogenic. Only three samples tested free of dioxins and dioxin-like chemicals (udumbara.net, November 20, 2022). The Weston A. Price Foundation has always held that fish oil supplements are worthless and toxic, processed at extremely high temperatures from farmed fish, the most polluted agricultural crop out there. The processing destroys the omega-3 fatty acids, creates toxins and does not remove pollutants. Better to take cod liver oil processed at low temperatures from wild fish, which will supply not only intact omega-3 fatty acids but also vitamins A and D.

## SATURATED FAT FOR MITOCHONDRIAL FUNCTION

The mitochondria are the energy producers in our cells. They work by a process of fusion and fission to maintain their form and integrity. In a recent experiment, volunteers consumed a lowfat vegan diet for two days and then took a drink high in saturated stearic acid. After the vegan diet, their mitochondria were fragmented, indicating a disruption in the process of fusion and fission; but three to six hours after the stearic acid-rich concoction, fragmentation dropped. The effect was consistent across all twenty-one subjects. Concoctions consisting of saturated palmitic acid and monounsaturated oleic acid did not obtain these results (*Nature Communications* 9;3129;2018). Stearic acid is plentiful in red meat, butter, tallow and lard, which we need to eat regularly for energy metabolism and good health overall. 

## 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.



# How to Ensure Optimal Hormonal Development in Your Child

By Sally Fallon Morell

**D**uring the last few years, a development long simmering in the background, the increased incidence of gender dysphoria—reduced sexual dimorphism and confusion about the defining behaviors of male and female—has appeared on the front pages of our newspapers and in headlines on the Internet.

As early as 1948, Dr. Francis Pottenger warned about this trend. In an article published by the American Nutrition Society he wrote: “Experimental work with animals shows a loss of secondary sexual characteristics after two or three generations on impoverished diets. Males lose their heavy masculine frame; their makeup begins to resemble the female. Females also tend to lose their distinguishing build so that both sexes approach a state of physical neutrality. . . .”<sup>1</sup>

Maryland's Montgomery County school district reported an almost 600 percent increase in the number of students who identify as "non-binary."

How prevalent is gender dysphoria? According to the *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition, published in 2013, gender dysphoria prevalence accounts for a mere 0.005 to 0.014 percent of the population for biological males and 0.002 to 0.003 percent for biological females.<sup>2</sup> However, more recent studies put the rate considerably higher. A Dutch study, conducted in 2016, indicated that 4.6 percent of over eight thousand study participants who were born male and 3.2 percent who were born female identified themselves as ambivalent to their specific birth gender.<sup>3</sup> A recent Pew Research Center study found that among adults under age thirty, 5.1 percent self-identified as trans or non-binary. This compares with 1.6 percent of adults thirty to forty-nine years of age and 0.3 percent of adults age fifty or older.<sup>4</sup>

More recently still, Maryland's Montgomery County school district reported an almost 600 percent increase in the number of students who identify as "non-binary." The school district required students from elementary through high school to fill out a form asking for their "identified name," "identified gender" and "preferred pronouns." In 2019, only thirty-five students in the whole school district identified as non-binary; the 2021 survey saw this number increase to two hundred thirty-nine.<sup>5</sup>

According to a Gallup poll of more than three hundred forty thousand adults in the United States, 8.1 percent of millennials (born between 1980 and 1999) identified as LGBT in 2022, compared to 5.8 percent of millennials

in 2012.<sup>6</sup>

While the recent social media focus on this subject and encouragement by teachers and other adults can explain some of this upsurge, there are good reasons to conclude that a portion of this increase is real and that a growing number of young adults are genuinely confused about their gender and uncomfortable with traditional expectations of sexual behavior.

#### HEARTBREAKING DILEMMA

Parents of gender-confused children find themselves in a heartbreaking dilemma. As one parent of a transgender child put it, "We're one hundred percent accepting of her no matter who she is, but this isn't anything I would wish on my child because of the challenges she's likely to encounter in the world."

These challenges are serious. People with gender dysphoria have a higher rate of suicide than the general population.<sup>7</sup> An alarming 32 to 50 percent of people with gender dysphoria attempt suicide. In addition, an estimated 26 percent of gender-dysphoric people resort to substance abuse.<sup>8</sup>

Parents are right to be concerned about the difficulties encountered by their transgender child. And even the most accepting parents are likely to lament the prospect of seeing their child unable to have biological children or themselves growing old without biological grandchildren.

#### ENVIRONMENTAL INFLUENCES

Shanna H. Swan, PhD, describes many of the modern influences that can disrupt normal

#### AVOIDING ENVIRONMENTAL ENDOCRINE DISRUPTORS

As much as possible, and especially during preconception (for men and women) and pregnancy, avoid exposure to the following:

- Any pharmaceutical drugs, especially pain killers, including Tylenol
- Recreational drugs, such as marijuana
- Wall-to-wall carpet; outgassing linoleum
- Scented detergents and cleaning products
- Commercial and scented personal care products
- Air fresheners, scented candles
- Liquid, scented or antibacterial soap
- Fabrics treated with flame retardants or stain resisters
- Glyphosate (Roundup) in food and applied to lawns and gardens
- Sunscreen
- Beverages in plastic bottles
- Canned foods

hormonal development in infants and children in her book *Count Down: How Our Modern World Is Threatening Sperm Counts, Altering Male and Female Reproductive Development, and Imperiling the Future of the Human Race*, published 2021. Most modern children grow up in a sea of gender-disrupting chemicals, chemicals that can interfere with physical development as well as the complex biochemical pathways of the brain.

This exposure often begins in the womb. For example, male monkeys exposed to bisphenol A (BPA) in utero exhibited more female behavior, such as clinging to their mothers, after birth.<sup>9</sup> A 2002 study from the Netherlands found that exposure to dioxins and PCBs was associated with more feminine play behavior in boys (such as a preference for dolls over trucks) and with less feminine play behavior in girls.<sup>10</sup> And scientists believe that these estrogen-mimicking chemicals are a cause of declining sperm counts in men, a phenomenon observed worldwide.

Marijuana has estrogenic effects. According to a 2015 study from Denmark, men who smoked marijuana more than once a week had a 29 percent lower sperm count; when marijuana is combined with other recreational drugs, the decline is even greater. Men ages eighteen to twenty-eight who used marijuana more than once a week along with other recreational drugs had a sperm count reduced by 55 percent.<sup>11</sup>

Opioid pain killers can lower testosterone levels and increase DNA damage in sperm. Even Tylenol can cause sperm abnormalities, including DNA fragmentation. Boy babies born to moms who take Tylenol during pregnancy are likely to have less “male-typical” brains and behavior.<sup>12</sup>

Endocrine-disrupting chemicals (EDCs) are everywhere and can have profound effects not only on physical development but also on the developing brain in ways that affect a person’s sexual identity. When ingested, EDCs alter the normal levels of estrogen in both females and males by binding to and activating estrogen receptors. They are in carpets and fabrics saturated with stain-resistant chemicals, flame retardants, personal care products, air fresheners, scented household products, antibacterial

hand soaps, canned foods and beverages in plastic bottles. Swan describes an experiment in which men exposed themselves to these products and then collected urine and blood samples for analysis. The levels of chemicals increased significantly in the blood and urine, especially an EDC called monoethyl phthalate (MEP), which increased from 64 to 1410 nanograms per milliliter in one volunteer. “This was the direct result of smearing himself with scented toiletries, including hair-care products, shaving gel, deodorant, fragrance and lotions, as well as using scented liquid soap and plug-in scented oil in the test room.”<sup>13</sup>

Swan doesn’t mention sunscreen products, which can contain not only estrogenic chemicals but also testosterone blockers. A particularly dangerous EDC in sunscreen is oxybenzone, which is easily absorbed through the skin. Used by pregnant women, it may harm the developing fetus; smeared on growing boys, it may interfere with normal sexual development; in girls, it causes negative effects on the mammary glands.<sup>14</sup> Titanium dioxide also has endocrine-disrupting effects.<sup>15</sup> No one should apply these products to themselves or their children—instead use coconut oil plus a hat and organic cotton tee shirt.

Men who ingest EDCs may suffer from symptoms such as low semen concentrations, poor semen quality, lack of sperm motility and eventually a reduced sexual appetite—problems that usually reverse themselves when exposure to estrogens is terminated. For the developing male fetus, however, these environmental estrogens can have severe and lifelong detrimental consequences to reproductive and urogenital development.

Female babies are also affected, usually with premature breast development and early and difficult menstruation.

#### NUTRITION FOR OPTIMAL HORMONAL DEVELOPMENT

Most commentators on hormonal development, including Dr. Swan, recommend a “Mediterranean” diet for parents and growing children, a diet based on organic fruits and vegetables, whole grains, wild fish, skinless poultry, nuts and seeds, with olive oil as the

Endocrine-disrupting chemicals (EDCs) are everywhere and can have profound effects not only on physical development but also on the developing brain in ways that affect a person’s sexual identity.

only fat. This advice ignores several fundamental facts:

- Our bodies make sex hormones out of cholesterol (see Figure 1).
- Infants and toddlers do not make cholesterol and must get it from their diet.
- A key vitamin your body needs for transforming cholesterol into sex hormones is vitamin A.<sup>16,17</sup>

Commentators like Dr. Swan warn against animal fats and healthy foods such as cheese, butter and naturally cured meats like salami because EDCs concentrate in the fats of animals. But EDCs concentrate in seed oils as well, including seed oils used to adulterate most oils labeled as “olive oil,” not only as pesticides and processing chemicals, but also as overtly estrogenic substances called isoflavones occurring naturally in soybean oil—and 80 percent of oil used in processed food is soybean oil. One website indicates one tablespoon of soybean oil contains levels of estrogenic compounds equivalent to one birth control pill!<sup>18</sup>

Back to the key fact: we need cholesterol to make sex hormones, and that goes for children as well as adults. In fact, male infants undergo a surge of testosterone—with levels as high as that of an adult male—during the first six months of life. This testosterone surge programs male babies to express male characteristics later in life. Other key periods of sexual differentiation include weeks six through twelve in pregnancy, when the male and female sexual organs form; the second half of pregnancy when a peak of testosterone programs several areas of the brain to express male or female gender identity later in life; and ages two to four during which the number of cells in an area of the hypothalamus associated with sexual

differentiation reaches a peak (and thereafter declines in females but remains high in males).<sup>19</sup>

Obviously, mothers and their children need to avoid EDCs during the whole period of growth and development, but especially during these critical periods. A diet rich in organ meats and animal fats, supplying plenty of cholesterol and vitamin A, during pregnancy and growth will ensure that these complicated processes proceed as nature intended.

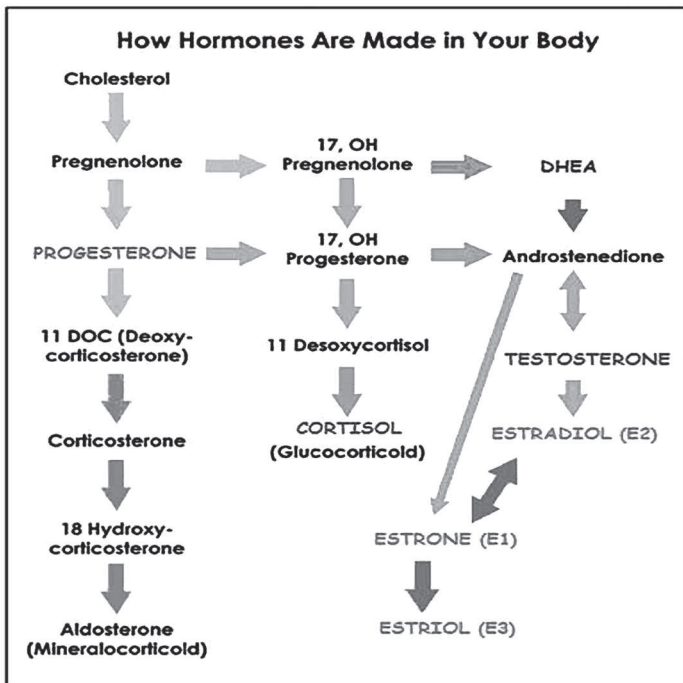
Babies must obtain cholesterol from their diet—they do not have the enzymes on line yet to make their own cholesterol. Mother’s milk—indeed, raw milk from any species—is rich in cholesterol and contains special enzymes to ensure that the baby absorbs 100 percent of that cholesterol. There is no cholesterol in infant formula; all these formulas, including organic varieties, are based on skim milk and vegetable oils—and babies on soy formula are also getting a whopping dose of estrogenic isoflavones. A study conducted in 2000 found that the daily exposure of infants to isoflavones in soy infant formula was four to eleven times higher on a body weight basis than the dose that has hormonal effects in adults consuming soy foods. Circulating concentrations of isoflavones in the seven infants fed soy-based formula were 13,000–22,000 times higher than normal plasma estrogen concentrations in early life.<sup>2</sup>

Most American babies are weaned on pureed fruits and vegetables packaged in estrogenic plastic or containers lined with aluminum—guaranteed to give your baby a bad start in life!

USDA advice suggests giving babies lean meat or tofu, the occasional egg and cheese, fruits and vegetables, lowfat milk, low-trans-fat spreads, whole grains (such as dry breakfast cereals) and reduced salt<sup>21</sup>—in summary, a diet that does not support the optimal hormonal development of your baby boy, nor your baby girl either.

Which are the best weaning foods? It is obvious from the chart on the opposite page that the ideal weaning foods for your baby—foods that will support optimal hormonal development—are chicken liver and egg yolk. The high cholesterol content of egg yolk qualifies yolks

FIGURE 1. How Hormones Are Made in Your Body



as the ideal first food for babies—baby should receive one egg yolk per day, starting at four to six months. (The whites can be allergenic and are best delayed until one year of age.)

Egg yolks and chicken liver also supply vitamin A, with its cofactors vitamins D and K<sub>2</sub>—to support the creation of sex hormones out of cholesterol in just the right proportions. Red meat and gizzard provide nutrient-dense alternatives. All four of these animal foods are rich in zinc, another important nutrient for sexual development and fertility.

It's also clear from the chart that fruits and vegetables are not nutrient-dense foods, although well cooked and mashed with butter and cream, they can supplement baby's diet of healthy animal foods.

Obviously, parents should continue a nutrient-dense diet for their children throughout the growing years, a diet that contains organ meats and plenty of animal fats like butter, cream, egg yolks, lard, tallow and poultry fat—no skinless chicken breasts, please! Of course, these foods should come from pasture-fed animals not raised in the industrial system. But even if your only choice is supermarket foods, it's still better to feed your children rich animal foods instead of processed foods based on vegetable oil and sugar. Vitamin A and saturated fat in animal foods can protect the body from dioxins and similar endocrine-disrupting chemicals.<sup>22</sup>

## VEGETABLE OILS

The greatest dietary change in the history of the human race occurred in the first half of the twentieth century as Western nations began to use industrial seed oils. Before the invention of the stainless steel roller press in the late nineteenth century, the only seed oils available to human beings were those easily removed with a stone press—sesame seed oil, rape seed oil and flax seed oil—and these occurred in diets where the chief fats were saturated and monounsaturated fats from animals and poultry, and oils from fruits such as olives, coconut and palm fruit.

The industrial seed oils come in two forms: partially hydrogenated margarines and shortenings, and polyunsaturated oils for cooking, dressing and spreads. Partially hydrogenated oils contain *trans* fats, which block hormone production. The polyunsaturated oils are highly unstable and break down into small molecules called aldehydes—think formaldehyde—which cause extreme oxidative stress to every kind of tissue with a wide range of deleterious effects, almost certainly including the reproductive organs and the hormone-producing centers in the brain.

More seriously, these industrial fats and oils have replaced saturated animal fats such as butter, lard, tallow and poultry fats. Saturated fats support hormone production,<sup>23</sup> while poly-

The ideal weaning foods for your baby—foods that will support optimal hormonal development—are chicken liver and egg yolk.

Per 100g	APPLE	CARROT	RED MEAT	GIZZARD	EGG YOLK	CHICKEN LIVER
PHOSPHORUS	6 mg	31 mg	140 mg	148 mg	390 mg	299 mg
IRON	0.1 mg	0.6 mg	3.3 mg	2.5 mg	2.7 mg	9.0 mg
ZINC	0.05 mg	0.3 mg	4.4 mg	2.7 mg	2.3 mg	2.5 mg
COPPER	0.04 mg	0.08 mg	0.2 mg	0.04 mg	0.08 mg	0.4 mg
VITAMIN B2	0.02 mg	0.05 mg	0.2 mg	0.2 mg	0.5 mg	1.8 mg
VITAMIN B6	0.03 mg	0.1 mg	0.07 mg	0.1 mg	0.4mg	0.72 mg
VITAMIN B12	0	0	1.84 mcg	1.2 mcg	1.9 mcg	16.6 mcg
VITAMIN C	7 mg	6 mg	0	3.7 mg	0	18 mg
VITAMIN A	0	0	40 IU	64 IU	2300 IU	34,000 IU
VITAMIN D	0	0	8 IU	?	1400 IU	370 IU
VITAMIN K	0	0	2.5 mcg	?	35 mcg	9.5 mcg
CHOLINE	3 mg	7 mg	38 mg	104 mg	820 mg	290 mg
CHOLESTEROL	0	0	78 mg	537 mg	1085 mg	631 mg

unsaturated and *trans* fats do not; in addition, saturated animal fats carry vitamin A and other fat-soluble vitamins without which hormone production cannot occur.

To make matters worse, most oil used in processed and fast food is soybean oil, which contains phytoestrogens such as genistein. In 1995, researchers demonstrated the effects of exposure in utero to genistein on the rat endocrine system.<sup>24</sup> They injected groups of rats with various levels of genistein and found that genistein caused feminization of external male genitalia, even at low doses.

Another study indicated that developmental genistein treatment, at levels that decrease maternal and offspring body weight, also causes subtle alternations in some sexually dimorphic behaviors.<sup>25</sup> Low-dose genistein also proved to delay puberty and dampen signals for development of masculinization in young rats.

From these findings, the researchers were able to conclude that genistein, at high and low levels, influences not only the physical development of the male sexual organs but also areas of the hypothalamus associated with male and female thinking and behavior.

Further research by the same team demonstrated how serious these morphological changes can be to male subjects.<sup>26</sup> This research showed conclusively that even at low levels, genistein decreased sexual dimorphism in rats, causing both males and females to act in the same manner during courtship, sexual arousal and during intercourse. In effect, male rats were expressing female sexual behaviors including lordosis, the typical female mating stance. Exposure to genistein in the womb rendered the males non-receptive to typical female behaviors.

A recent study found that soybean oil fed to mice affected the hypothalamus in such a way

that oxytocin levels declined.<sup>27</sup> Oxytocin, produced in the hypothalamus, is the nurturing hormone, associated with “warm, fuzzy feelings” in both men and women. (A surge of oxytocin during labor helps strengthen uterine contractions; without it, labor cannot proceed.) Whether the decline in oxytocin was due to the polyunsaturated structure of soybean oil, or the estrogenic compounds it contains—or a combination of both—is unknown, but it is fair to ask whether the consumption of soybean oil over the last three generations has led to lack of affection in males and decreased motherly instinct in females.

#### MSG

The hypothalamus is key to differences in male and female behavior. The volume of a specific nucleus in the hypothalamus is twice as large in heterosexual men as in women and homosexual men. In addition, an area that regulates mating behavior is about twice as large in men than in women and contains twice as many cells. This large size is determined by male sex hormones in utero and during the period of growth. Furthermore, the male hypothalamus has a higher number of androgen receptors than that of young adult women.<sup>28</sup>

Obviously, we should avoid any foods that cause damage to the hypothalamus, yet one ubiquitous ingredient in the food supply does just that: MSG.

According to a review published in *Biomedical and Environmental Sciences*, exposure to MSG in infants “results in a clearly defined lesion of the arcuate nucleus (AN) of the hypothalamus,” leading to “clear histological changes. . . in testicular tissue.”<sup>29</sup>

MSG acts on glutamate receptors, which are especially numerous in the hypothalamus, hippocampus and amygdala. Results from both animal and human studies have demonstrated that administration of even very low doses of MSG has toxic effects on the reproductive system.<sup>30</sup>

According to commentator Jack Kruse, humans absorb MSG. . . five to seven times more aggressively than any species ever tested. “This effect is more dramatic when the human is younger with a developing immune system in the gut. The younger the gut and brain are, the more aggressive is the uptake and the more sensitive the developing nervous system is to its cumulative effects.”<sup>31</sup>

MSG lurks in all processed foods, including powdered milk and whey protein concentrate used in infant formula and flavored milks served in school lunches. Anything hydrolyzed, extracted, concentrated or auto-lyzed can contain MSG—and hydrolyzed protein is a frequent additive in

#### STRESS AND HORMONAL DEVELOPMENT

The pathways for the creation of sex hormones out of cholesterol also contain the pathways for the creation of stress hormones. Note in Figure 1 that the corticoid hormones derive from progesterone.

When the body is under stress, progesterone is vectored into the production of stress hormones at the expense of sex hormones, especially in situations of vitamin A deficiency. If a mother is under severe stress during pregnancy, she may not be able to produce enough testosterone and estrogen for the optimal development of the sex organs or the optimal programming of the areas of the brain associated with sexual identity. Likewise, children under stress may not be able to produce the sex hormones they need for normal development in puberty.

Herein lies the scientific explanation for the belief that pregnancy and childhood should be happy and stress-free!

baby food. “Caseinates,” “flavorings,” “natural flavor,” “seasonings” and “spices” can all harbor MSG. Of course, we should avoid processed food at all times, but it is especially important to make sure your baby and growing children are receiving home-cooked meals using simple, natural ingredients.

#### SUGAR. . . AND CAFFEINE

Sugar is an empty food that causes hormone disruption in many ways. By stimulating the release of cortisol and adrenalin from the adrenal glands, sugar consumption leads to adrenal fatigue, making it harder for the body to produce sex hormones—and remember that children as well as adults need to produce sex hormones.

Since the hypothalamus is involved in blood sugar control, a high-sugar diet can cause inflammation of this important master gland.<sup>32</sup> In fact, the hypothalamus is particularly sensitive to a high-sugar diet.<sup>33</sup> The hypothalamus produces gonadotropin-releasing hormone (GnRH), which stimulates the production of testosterone. Too much sugar in the diet can depress testosterone production in boys at critical periods of growth.

Add caffeine to sugar, as in sodas, and you have a double whammy to the delicate balance of hormones that children need for normal development. No parent should allow their children to consume sodas—nor set a bad example by drinking sodas themselves.

#### MILK

Many practitioners advise against milk for growing children, based on the perception

that the hormones in milk will interfere with hormone production in the child. Such advice ignores the fact that healthy, stable, milk-drinking populations, characterized by normal sexual dimorphism, thrive in isolated communities all over the world. Simple observation makes it clear that whole milk from healthy animals—including cows, goats, sheep, camels, reindeer and water buffalo—supports normal growth and optimal hormonal development in human beings.

Modern milk presents a different story. It comes from animals bred or pushed to excessive milk production. Modern cows get soy in their feed, and the estrogenic substances in soy come out in the milk. Modern milk is low in fat and often has (unlabeled) powdered nonfat milk added, a source of MSG. In addition, pasteurization renders milk highly allergenic, a condition that puts stress on the adrenal glands.

If you can’t obtain raw milk for your child, don’t feed them milk! Give them high-quality cheese as a source of calcium, as well as butter from grass-fed cows.

#### SALT

High levels of cortisol—from sugar consumption, caffeine consumption or stress—can decrease testosterone. In contrast to sugar, salt supports adrenal function and decreases the stress response, allowing the production of more sex hormones, particularly testosterone.

As explained by John Gildea (*Wise Traditions*, Fall 2022), citing a 2020 study on regulation of male fertility,<sup>34</sup> “Low sodium leads to increased renin angiotensinogen, ACEI,

Sugar consumption leads to adrenal fatigue, making it harder for the body to produce sex hormones—and remember that children as well as adults need to produce sex hormones.

#### CAN VACCINATIONS INTERFERE WITH OPTIMAL HORMONAL DEVELOPMENT?

Vaccinations contain many toxins whose influence on hormonal development remains unknown. But the main toxin in vaccinations—aluminum—can definitely contribute to hormonal disorders.

In one study, for example, female mice treated with aluminum had a lower pregnancy rate while male mice showed significantly decreased testicular and epididymal weights, as well as significant decreases in sperm counts.<sup>35</sup> Another study found that serum testosterone concentrations declined in aluminum-treated mice.<sup>36</sup> Rabbits treated with aluminum exhibited decreased libido, sperm concentration, total sperm output and sperm motility.<sup>37</sup>

The research clearly indicates that along with many other adverse effects, aluminum can interfere with sexual development and performance. Yet, a fully vaccinated child receives over one thousand micrograms of injected aluminum at the two-month baby checkup and almost five thousand micrograms by eighteen months. In contrast, the maximum allowable aluminum per day for intravenous parenteral feeding is twenty-five milligrams.<sup>38</sup>

So, in addition to asthma, learning disorders and paralysis, vaccinations pose the risk of endocrine disruption and reduced fertility. You can protect your child and increase your chances of having grandchildren by just saying No to vaccines.

Government advice to restrict salt in babies and growing children, as well as in pregnant women, is a recipe for endocrine disruption.


angiotensin II, aldosterone and epinephrine, all geared to increase sodium absorption. Angiotensin II in the testes reduces testosterone.” In particular, Gildea proposes that diets high in protein can cause a reduction in testosterone unless offset by plenty of salt. When feeding your baby high-protein foods like egg yolk and liver, be sure they are well salted (with unrefined salt, of course).

Babies need salt for many processes—for cell function, for brain development, for adrenal support and for digestion. Hydrochloric acid for digesting meat requires chloride, available only from salt. Government advice to restrict salt in babies and growing children, as well as in pregnant women, is a recipe for endocrine disruption. Much better is the Jewish custom of placing a grain of salt under the tongue of a newborn baby, and ensuring that mom (and dad) and all growing children receive plenty of salt with their food.

#### WHAT IS A WOMAN? WHAT IS A MAN?

No one had more to say about the ideal qualities of men and women than Shakespeare. Consider his character Rosalind in the play *As You Like It*. According to the convention of the time, the character of Rosalind would have been played by a boy. In the play, Rosalind disguises herself as a young man in order to have the freedom she craves; then, to woo Orlando, the man she loves, she pretends to be a woman—so the audience is watching a male actor playing a woman who is pretending to be a man acting the part of a woman. The character that Shakespeare has created is thus telling us that the favorable qualities of human beings have nothing to do with our sex. Rosalind refutes the perception of women as passive and adopts stereotypical “masculine” behavior; she is wild and witty, initiating conversations and arranging marriages. Likewise, Shakespeare presents characters with aggressive “masculine” behavior—such as Hotspur and Richard II—in a negative light, as disruptive of peaceful society.

While we can celebrate the physical differences between the sexes, and be accepting of departures from the norm, in Shakespeare’s ideal society, the behavioral characteristics of men and women are the same. Men and women

should aim equally to be curious, courageous, patient, loyal, free-thinking and observant—firm in intentions but gentle in manner. Whatever the hormonal development of our sons and daughters, we should aim to instill in them the confidence to behave in a manner that can be called exquisitely human. 

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#### REFERENCES

1. Pottenger FM Jr. Which are girls and which are boys. *The American Academy of Applied Nutrition*. 1948;1. <https://price-pottenger.org/research/which-are-girls-and-which-are-boys/>
2. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR)*. <https://www.psychiatry.org/psychiatrists/practice/dsm>
3. Bouman WP, de Vries ALC, T’Sjoen G. Gender dysphoria and gender incongruence: an evolving inter-disciplinary field. *Int Rev Psychiatry*. 2016;28(1):1-4.
4. Branigin A. 5 percent of young adults identify as trans or nonbinary, survey says. *The Washington Post*, Jun. 8, 2022.
5. School district in Maryland reports almost 600% increase in students who identify as non-binary. *Survive the News*, Oct. 31, 2022.
6. McShane J. A record number of U.S. adults identify as LGBTQ. Gen Z is driving the increase. *The Washington Post*, Feb. 17, 2022.
7. Virupaksha HG, Muralidhar D, Ramakrishna J. Suicide and suicidal behavior among transgender persons. *Indian J Psychol Med*. 2016;38(6):505-509.
8. Gonzalez CA, Gallego JD, Bockting WO. An examination of demographic characteristics, components of sexuality and gender, and minority stress as predictors of excessive alcohol, cannabis, and illicit (noncannabis) drug use among a large sample of transgender people in the United States. *J Prim Prev*. 2017;38:419-45.
9. Nakagami A, Negishi T, Kawasaki K, et al. Alterations in male infant behaviors towards its mother by prenatal exposure to bisphenol A in cynomolgus monkeys (*Macaca fascicularis*) during early suckling period. *Psychoneuroendocrinology*. 2009;34(8):1189-1197.
10. Vreugdenhil HJI, Slijper FME, Mulder PGH,



- et al. Effects of perinatal exposure to PCBs and dioxins on play behavior in Dutch children at school age. *Environ Health Perspect.* 2002;110(10):A593-A598.
11. Gundersen TD, Jørgensen N, Andersson AM, et al. Association between use of marijuana and male reproductive hormones and semen quality: a study among 1,215 healthy young men. *Am J Epidemiol.* 2015;182(6):473-481.
  12. Acetaminophen and phthalates: anti-androgenic action and altered development. Collaborative on Health and the Environment, Dec. 14, 2016. [https://www.healthandenvironment.org/partnership\\_calls/93981](https://www.healthandenvironment.org/partnership_calls/93981)
  13. Swan SH, Colino S. *Count Down: How Our Modern World Is Threatening Sperm Counts, Altering Male and Female Reproductive Development, and Imperiling the Future of the Human Race.* Scribner, 2021, p. 114.
  14. The trouble with ingredients in sunscreens. Environmental Working Group, n.d. <https://www.ewg.org/sunscreen/report/the-trouble-with-sunscreen-chemicals/>
  15. Plourde E. Sunscreens: the dark side of avoiding the sun. *Wise Traditions.* Winter 2018;19(4):26-35.
  16. Clagett-Dame M, Knutson D. Vitamin A in reproduction and development. *Nutrients.* 2011;3(4):385-428.
  17. Teletin M, Vernet N, Ghyselinck NB, et al. Roles of retinoic acid in germ cell differentiation. *Curr Top Dev Biol.* 2017;125:191-225.
  18. <https://cattlefeeders.ca/hormone-free-beef-no-better-people-environment/>
  19. Swaab DF, Wolff SEC, Bao AM. Sexual differentiation of the human hypothalamus: relationship to gender identity and sexual orientation. *Handb Clin Neurol.* 2021;181:427-443.
  20. Setchell KDR, Zimmer-Nechemias L, Cai J, et al. Exposure of infants to phyto-oestrogens from soy-based infant formula. *Lancet.* 1997;350(9070):23-27.
  21. Ward EM. *MyPlate for Moms, How to Feed Yourself & Your Family Better: Decoding the Dietary Guidelines for Your Real Life.* Loughlin Press, 2011.
  22. Masterjohn C. Dioxins in animal foods: a case for vegetarianism? *Wise Traditions.* Fall 2005;6(3):32-45.
  23. Hämäläinen E, Adlercreutz H, Puska P, et al. Diet and serum sex hormones in healthy men. *J Steroid Biochem.* 1984; 20(1):459-464.
  24. Levy JR, Faber KA, Ayyash L, et al. The effect of prenatal exposure to the phytoestrogen genistein on sexual differentiation in rats. *Proc Soc Exp Biol Med.* 1995;208(1):60-66.
  25. Flynn KM, Ferguson SA, Delclos KB, et al. Effects of genistein exposure on sexually dimorphic behaviors in rats. *Toxicol Sci.* 2000;55(2):311-319.
  26. Ferguson SA, Scallet AC, Flynn KM, et al. Developmental neurotoxicity of endocrine disruptors: focus on estrogens. *Neurotoxicology.* 2000;21(6):947-956.
  27. Deol P, Kozlova E, Valdez M, et al. Dysregulation of hypothalamic gene expression and the oxytocinergic system by soybean oil diets in male mice. *Endocrinology.* 2020;161(2):bqz044.
  28. Mandal A. Hypothalamus males and females. News-Medical.Net, updated Jun. 4, 2019.
  29. Gong SL, Xia FQ, Wei J, et al. Harmful effects of MSG on function of hypothalamus-pituitary-target gland system. *Biomed Environ Sci.* 1995;8(4):310-317.
  30. Niaz K, Zaplatic E, Spoor J. Extensive use of monosodium glutamate: a threat to public health? *EXCLI J.* 2018;17:273-278.
  31. Kruse J. MSG, your gut, and your brain, post-trauma. Reversing Disease for Optimal Health, n.d. <https://jackkruse.com/msg-your-gut-and-your-brain-post-trauma/>
  32. Gao Y, Bielohuby M, Fleming T, et al. Dietary sugars, not lipids, drive hypothalamic inflammation. *Mol Metab.* 2017;6(8):897-908.
  33. Żebrowska E, Chabowski A, Zalewska A, et al. High-sugar diet disrupts hypothalamic but not cerebral cortex redox homeostasis. *Nutrients.* 2020;12(10):3181.
  34. Gianzo M, Subirán N. Regulation of male fertility by the renin-angiotensin system. *Int J Mol Sci.* 2020;21(21):7943.
  35. Llobet JM, Colomina MT, Sirvent JJ, et al. Reproductive toxicology of aluminum in male mice. *Fundam Appl Toxicol.* 1995;25(1):45-51.
  36. Guo C-H, Huang C-J, Chen S-T, et al. Serum and testicular testosterone and nitric oxide products in aluminum-treated mice. *Environ Toxicol Pharmacol.* 2001;10(1-2):53-60.
  37. Yousef MI, El-Morsy AMA, Hassan MS. Aluminium-induced deterioration in reproductive performance and seminal plasma biochemistry of male rabbits: protective role of ascorbic acid. *Toxicology.* 2005;215(1-2):97-107.
  38. <https://wapf2point2.wpenginepowered.com/wp-content/uploads/WAP-FVaccinationIndex.pdf>

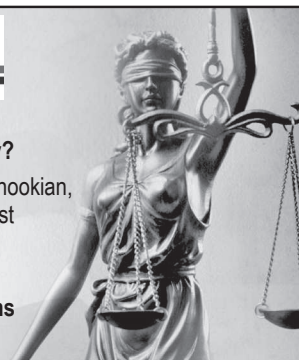
## HEALTH FREEDOM

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# Living in the “Plasticene”: The Plastic Age

By Anthony Jay, PhD

**P**lastic! In 1980, a wacky “new wave” band called The Buggles put out an album titled *The Age of Plastic*. Forty-plus years later, this album title still accurately characterizes our current era. The album featured a single bearing the same name, “The Age of Plastic,” in which vocalist Trevor Horn feverishly chanted about plastics and imminent illness. Bon Jovi also wrote a rock song four years after *The Age of Plastic* album called “Runaway.” Here are the introductory lyrics: “On the street where you live girls talk about their social lives, they’re made of lipstick, plastic, and paint, a touch of sable in their eyes.”

Plastic has become part of modernity’s make-up (literally). Scientific discoveries relating to plastics have earned a number of Nobel Prizes. Plastic permeates our culture, our personal care products, our environment and our awards. But do plastics adversely affect our health?

## BPA AND DES

Let's start with bisphenol A (BPA). A 2012 article in the *Journal of the National Cancer Institute* pointed out that of over two thousand five hundred lab-tested urine samples, 93 percent contained BPA.<sup>1</sup> That's virtually everyone. Yet it gets even worse. The urine samples under scrutiny were from children six years of age and younger.

Are children adversely affected by BPA exposures? Undoubtedly. It has been well established that childhood BPA exposures are harmful on many levels. For instance, in a 2017 scientific review called "Bisphenol A exposure and children's behavior: a systematic review," the authors noted that higher BPA in urine is associated with higher levels of anxiety and depression in children aged twelve years and younger.<sup>2</sup> I don't know about you, but I find childhood depression particularly heartbreaking because children don't have adult burdens like mortgages or bills. Children should be carefree, imaginative, playful and caught up with living in the moment and developing a love of learning. Children should not be depressed.

The health damage from BPA extends far beyond behavioral changes and pediatrics, however. Infertility,<sup>3-5</sup> weight gain,<sup>6</sup> breast cancer,<sup>7,8</sup> lower testosterone,<sup>9,10</sup> and toxicity to the immune system<sup>11</sup> are well-established issues related to BPA exposures. The complete list of problems is long, painful and ever-expanding.

At this point, we all know BPA is bad for our health, but why exactly is it bad? Simple—it acts like estrogen in our bodies, disrupting our natural sex hormone activities. Natural estrogen, at proper levels, is incredibly healthy. But ordinarily, estrogen is present at nanogram levels in the bodies of both men and women. (Just as a reference, a nanogram is 0.00000001 grams.) In men, estrogen is generally around thirty nanograms per liter (ng/L). In women, estrogen ranges between about thirty and three hundred ng/L, depending on age and/or the time of the month. These minuscule hormone levels are maintained in a delicate balance that is easily disrupted.

Enter BPA, which "was first developed as a synthetic estrogen in the 1890s and was reported to have the efficacy of estrone in stimulating

the female reproductive system in rats in the 1930s."<sup>12</sup> Estrone is one of three natural forms of human estrogens and very potent.<sup>13</sup> Basically, BPA was specifically designed and intentionally researched as an artificial birth control drug. The main scientist who performed the pioneering BPA birth control studies, British researcher Edward Charles Dodds, also developed DES (diethylstilbestrol). Dodds called DES the "mother substance" of BPA.<sup>14</sup>

If you're at all familiar with DES, you undoubtedly know about the horrendous health damage this estrogen-mimicking drug has caused. Briefly, licensed medical doctors legally prescribed DES to some ten million women between 1940 and 1970 for things like morning sickness, hot flashes, estrogen deficiency, "risk of miscarriage" and other related issues. Meanwhile, taking the drug DES literally increased risk of miscarriages,<sup>15</sup> blood clots, immune system dysfunction, weight gain and depression.<sup>16</sup> This list is eerily similar to the adverse effects of modern artificial estrogen birth control drugs, in case you're not versed in those adverse effects. Moreover, DES led to a variety of birth defects that can be damaging to multiple generations.<sup>17</sup> So-called "DES babies" or "DES daughters" were ultimately what drove the drug off the market for pregnant women, but only after thirty years of being sold with a stamp of approval by the medical establishment. "First, do no harm"?

## PLASTICS AND LEACHING

As for BPA, research into this synthetic estrogen compound shifted away from reproductive manipulation and artificial birth control when scientists discovered that BPA could be linked together into chains (polymers) and used to make plastic. The timing was perfect because the birth control market for BPA was contracting. At that time, DES appeared to be a better candidate. Meanwhile, the market for plastics was exploding.

By the early 1950s, BPA was in commercial production for plastics of all sorts, including food and liquid storage products.<sup>14</sup> The good news, consumers were told, was that BPA, like cigarettes, was safe! In 1962, for example, researchers deemed it ethical to put BPA-containing skin patches on people—similar to hormone skin patches—to see whether the patches caused skin reactions.<sup>18</sup> (Spoiler alert: they did.) The lesson: don't put BPA directly on skin. Thankfully, although many clothes are made from polyester (plastic), no BPA clothing is currently on the market.

Part of the apparent good news was that when you made plastics with BPA by linking it up into long, connected chains, the polymers "obviously would not leach." At least this is what people were and are told. When I was writing my book *Estrogenation*,<sup>19</sup> I spoke to a number of plastics researchers who still insisted that it was "absurd to think that BPA leaches" because "all the molecules are linked together as chains." As recently as 2012, authorities such as Denmark's Environmental Protection Agency were still assuring us that BPA "appears to be effectively retained within the polymer matrix of materials such as polycarbonates and therefore losses through leaching from the product surface are expected to be limited."<sup>20</sup>

From the 1950s to 2012, scientists barely investigated the "unlikely" phenomenon of BPA leaching. Crazy people (like myself) who suggested

In a study comparing people who ate canned soup with people who did not, canned soup eaters showed an immediate 229 percent increase in urinary BPA.

that it would be wise to avoid BPA plastics for liquid storage, due to leaching, were laughed at and patronizingly told that we just “didn’t understand science.” The party line was, “BPA is all linked together so it doesn’t leach, silly.”

Except it does. It leaches because there are always free, unlinked (monomer) molecules of BPA in BPA-containing plastic. When the fact of leaching became too obvious to ignore, supposedly educated people started saying BPA only leaches when it is heated. I’ve also often been told that the leaching dose is so low that it doesn’t affect our health. Neither of these claims has held up, but we still hear them today.

I don’t want to launch into the long history of BPA because there are currently over twelve thousand scientific studies on the topic, and you’re probably on board already with avoiding BPA. I do want to summarize some key points: BPA leaches; extremely low levels are damaging; health impacts can take many years to appear; most scientific studies are very short-term so they miss the health issues; and even room-temperature water stored in BPA bottles leaches to levels well above the levels of our own natural estrogen levels within one day (see Figure 1).

“BPA-FREE” MEANS LITTLE

The latest bit of “good news” is that now that we know how bad BPA is for our health, corporations no longer use BPA in plastics that come in contact with our food and beverages. Just kidding! In fact, BPA is frequently present in the plastic linings of many metal food or metal beverage cans. The federal government

has done virtually nothing to stop BPA use in food products, although seventeen states have at least made it illegal in baby products like pacifiers. In a recent study comparing people who ate canned soup with people who did not, canned soup eaters showed an immediate 229 percent increase in urinary BPA.<sup>22</sup>

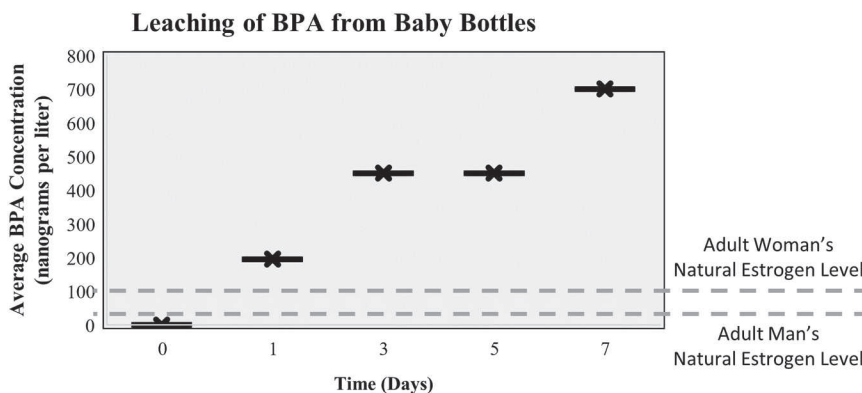
When something is labeled “BPA-free,” is that enough of a safeguard? The troublesome fact is that even if we make BPA illegal (which we have not done), there remains an entire alphabet of BPA-mimics. They’re called “BPA analogues.” BPS, commonly used as a replacement for BPA, is one example: other examples of BPA analogues are BPF and BPAF.

Products labeled “BPA-free” can still have BPF. BPA and BPF are basically the same thing, with minor tweaking, but one is called BPA and the other one (technically) is not called BPA. That technicality is massive. BPF plastic is, therefore, “BPA-free.” Yay. Scientists do this type of manipulation when they design steroids to pass drug tests. They slightly manipulate the structure of the testosterone molecule, but it acts in the same way in the human body.

Here is what a 2016 study published in *Environmental Science and Technology* discovered about all these BPA-analogue chemicals:

“Whereas BPA was still the major bisphenol analogue found in most environmental monitoring studies, BPF and BPS were also frequently detected. Elevated concentrations of BPAF, BPF, and BPS (i.e., similar to or greater than that of BPA) have been reported in the abiotic environment and

FIGURE 1: Leaching of BPA from baby bottles



Adapted from Hoekstra EJ, Simoneau C. Release of bisphenol A from polycarbonate: a review. *Crit Rev Food Sci Nutr.* 2013;53(4):386-402.<sup>21</sup>

human urine from some regions. *Many analogues exhibit endocrine disrupting effects, cytotoxicity, genotoxicity, reproductive toxicity, dioxin-like effects, and neurotoxicity in laboratory studies.* BPAF, BPB, BPF, and BPS have been shown to exhibit *estrogenic and/or antiandrogenic activities similar to or even greater than that of BPA.*<sup>23</sup> [Emphasis added]

In other words, these “backup” BPA-mimicking plastics are not only in use but are just as bad—or worse—than BPA in terms of their impact on our health.

Anyone who takes issue with me calling these plastic chemicals “toxins” clearly doesn’t have a grasp of the current research. For example, what does the “cytotoxicity” mentioned by these scientists mean? It means these BPA-like chemicals are toxic to cells. And “genotoxicity” means toxic to DNA. And what are “dioxin-like effects”? “Dioxin-like effects” is a fancy way of saying, “It acts like Agent Orange.” The notorious herbicide and defoliant Agent Orange is the quintessential dioxin.

Like Agent Orange, it can take time for the ugly hormone-disrupting effects of these toxic plastic chemicals to surface, but they eventually cause problems. Sometimes, the health impacts are even passed to future generations.

#### WHAT ABOUT PHTHALATES?

What about plastics that are free of BPA, BPS, BPF and the entire alphabet of possible bisphenols? Generally, these plastics are identified by the #1 inside the recycling arrow-triangle. (Check the plastics in your fridge.) These plastics are called polyethylene terephthalate (PETE) and contain phthalates.

Currently, there is a massive effort to convince people that PETE is safe and does not leach phthalates. Dr. Ken Berry and I recently completed a YouTube video on this topic. Later, he emailed me to say his phone is now presenting advertisements to him specifically saying plastic #1 is safe! Apparently, his phone “heard” our podcast discussion and created some customized ads as part of the phthalates-are-safe corporate push. And they say phones aren’t listening!

But we’ve heard the same claims of safety before with BPA—“it’s safe,” “it doesn’t leach” and “the BPA molecules are all linked together so they can’t leach.” Yet we found BPA is not safe, it does leach and, even though the molecules are supposed to be 100 percent linked together, there are always free molecules that escape and leach into liquids. We’re now hearing these same familiar arguments to convince us that PETE is safe.

To get to the bottom of the leaching question, I emailed one of the best third-party lab testing companies in the country, which measures chemicals leaching into liquids. I decided I would fund my own study and test the PETE leaching for myself. I’ve seen scientific studies, but I wanted to test some standard grocery-store bottled water (from plastic bottles, of course). My “experiment” was as follows: I would buy several types of popular bottled water from my local grocery store. It would be at room temperature. Some bottles were PETE plastic, and a few other bottles were not. I would have this third party test for phthalates and BPA, in case there was residual BPA.

Upon inquiry, here is the email I received back from a top-tier testing company:

“Thank you for contacting [our company] with your request for BPA and phthalates testing. You’ve come to the right place! [our company] is approved by the CPSC [Consumer Product Safety Commission], accredited by A2LA, and we’ve been in the business of testing since 1967. The cost for testing is as follows: BPA analysis is \$400 for the first sample & \$350 for each additional. Limit of detection is 100 ppt. Phthalate analysis is \$300 for the 1st sample and \$250 for each additional. Limit of detection is 50 ppm.”

As you can see, the cost was painfully high, given that I was doing this out of pocket. Nevertheless, I thought I’d take one for the team and finish the experiment so I could learn and publicize what I learned. But I balked when I saw the limits of detection for phthalates.

For BPA, one hundred ppt (parts per trillion) was a respectable detection limit. Because

These “backup” BPA-mimicking plastics are not only in use but are just as bad—or worse—than BPA in terms of their impact on our health.

we usually measure estrogen in ng/L (nanograms per liter), I did a little math and found that one hundred ppt is equivalent to 0.1 ng/L. This is good. Our natural estrogen is usually around twenty to two hundred ng/L, so measuring down to 0.1 ng/L is useful. In other words, they were testing for BPA levels that were at or above 0.1 ng/L, which would be well below our natural levels of estrogen. Since BPA is a known estrogenic (or “estrogen mimicking”) chemical, it was a relief to see that the lab would actually measure levels that are relevant to our natural hormone levels.

Their limit of detection for phthalate analysis, unfortunately, was abysmal. The limit given, fifty ppm (parts per million), is far less than parts per trillion. Doing the same math I did for BPA, this translated to fifty million ng/L! In other words, the levels of phthalates that this top-tier testing company looks for don’t even come close to our natural levels of hormones. They won’t detect phthalates unless they are above fifty million ng/L. I mentioned that our natural estrogen is in the range of twenty to two hundred ng/L, so this is like looking for pounds of lead in our blood before worrying about it! I want to know if I have a tiny amount of lead in my blood, not pounds! So, don’t tell me my blood is “lead-free” if all you can measure is one pound or higher!

This leads me to believe that many people deny phthalates leach from plastics because they aren’t measuring small enough units. Phthalates leach. I wrote about these details in my book *Estrogenation*. It’s obviously easier to deny leaching if you limit your detection to fifty million ng/L and don’t go below fifty million ng/L.

The next important question is, how harmful are phthalates to our health? First of all, phthalates aren’t one simple chemical. The

term “phthalate” refers to a class of chemicals, and there are hundreds of phthalates. Some are worse than others, but they definitely can disrupt our natural sex hormones and our health. Since I’ve written an entire book on this topic, I’ll drop this quote from a scientific study and leave it at that:

“Epidemiological studies have suggested associations between phthalate exposure and shorter gestational age, shorter anogenital distance, shorter penis, incomplete testicular descent, sex hormone alteration, precocious puberty, pubertal gynecomastia, premature thelarche, rhinitis, eczema, asthma, low birth weight, attention deficit hyperactivity disorder, low intelligence quotient, thyroid hormone alteration, and hypospadias in infants and children. Furthermore, many studies have suggested associations between phthalate exposure and increased sperm DNA damage, decreased proportion of sperm with normal morphology, decreased sperm concentration, decreased sperm morphology, sex hormone alteration, decreased pulmonary function, endometriosis, uterine leiomyomas, breast cancer, obesity, hyperprolactinemia, and thyroid hormone alteration in adults.”<sup>24</sup>


#### THE LONG GAME

In case it isn’t enough to warn about “sex hormone alteration” (which can lead to issues such as weight loss, depression, anxiety and fatigue), let’s end on the topic of epigenetics. Epigenetics literally means “marks on your DNA.”


This sounds complicated, but if you think about a musical note analogy, epigenetics is easy to understand. Think about a song and the melody line from that song. Let’s go with “Puff the Magic Dragon,” since cannabis smoke can act like estrogen (a different topic for a different day). The melody line is very simple. It can be passed along to other musicians, and they can play that same song fairly simply. That’s like your DNA. It’s fairly simple code and can be passed along to future generations.

Epigenetics still has that same song melody. The DNA is still present. Now, however, we’ve added more notes. It’s “notes added to the melody” or “supporting harmonies on our DNA.” The song is more complex and beautiful. Most importantly, this can be passed on to future generations, similar to DNA.

I want to mention two main points on the topic of epigenetics. First, sex hormones impact our epigenetics. If our sex hormone levels are strong, we can affect strong epigenetics to future generations. On the other hand, if our sex hormone levels are weak, this can be reflected and passed along



Melody line




Notes added to the melody

to offspring as well. Second, artificial estrogen chemicals, such as those found in plastics, are well known to cause detrimental epigenetic impacts. Over several generations, they can lower fertility. They can also increase cancer not just in the present but in future generations not even exposed to the chemicals.

Thus, we are playing a long game where plastics are concerned. You'll never be able to get them completely out of your life, but I suggest you minimize your exposure as much as possible. Here are some simple steps:

- Avoid liquids stored in plastics and certainly don't microwave liquids in plastics. It's okay to have some bottled water occasionally, but don't make it a regular occurrence. Best to buy beverages bottled in glass
- Avoid plastic chew toys for babies.
- Don't brew coffee in plastic coffee machines.
- Avoid "aluminum" soda cans, which are lined with PETE or BPA plastic.
- Avoid polyester (PETE phthalate-containing) pillowcases and bed sheets. You don't want all-night skin exposure to plastics.
- Avoid hot coffee in "paper" cups—they're not paper.

Awareness is a big step in the right direction regarding plastics. Bear in mind that scientific studies downplay the true health ramifications of plastics because the studies are usually only short-term. Remember, too, that these chemicals "bioaccumulate," meaning they store up inside our bodies. This amplifies their long-term health impacts. And these estrogen-mimicking chemicals are even additive, because they all act like estrogen in our bodies.

When researchers study estrogenic chemicals, they investigate only one chemical at a time, but our bodies aren't exposed to one chemical at a time—not in the current "Plasticene" era. As for me? I'm basically with George Bailey in the classic 1946 film, *It's a Wonderful Life*: "Now you listen to me! I don't want any plastics. . . ." 

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## REFERENCES

1. Fillon M. Getting it right: BPA and the difficulty proving environmental cancer risks. *J Natl Cancer Inst.* 2012;104(9):652-655.
2. Ejaredar M, Lee Y, Roberts DJ, et al. Bisphenol A exposure and children's behavior: a systematic review. *J Expo Sci Environ Epidemiol.* 2017;27(2):175-183.
3. Kay VR, Chambers C, Foster WG. Reproductive and developmental effects of phthalate diesters in females. *Crit Rev Toxicol.* 2013;43(3):200-219.
4. Chen M, Tang R, Fu G, et al. Association of exposure to phenols and idiopathic male infertility. *J Hazard Mater.* 2013;250-251:115-121.
5. Ziv-Gal A, Flaws JA. Evidence for bisphenol A-induced female infertility: a review (2007-2016). *Fertil Steril.* 2016;106(4):827-856.
6. Pereira-Fernandes A, Demaegdts H, Vandermeiren K, et al. Evaluation of a screening system for obesogenic compounds: screening of endocrine disrupting compounds and evaluation of the PPAR dependency of the effect. *PLoS One.* 2013;8(10):e77481.
7. Paulose T, Speroni L, Sonnenschein C, et al. Estrogens in the wrong place at the wrong time: fetal BPA exposure and mammary cancer. *Reprod Toxicol.* 2015;54:58-65.
8. Parada H Jr, Gammon MD, Chen J, et al. Urinary phthalate metabolite concentrations and breast cancer incidence and survival following breast cancer: the Long Island Breast Cancer Study Project. *Environ Health Perspect.* 2018;126(4):047013.
9. Zhang J, Jin S, Zhao J, et al. Effect of dibutyl phthalate on expression of connexin 43 and testosterone production of leydig cells in adult rats. *Environ Toxicol Pharmacol.* 2016;47:131-135.
10. Chang WH, Li SS, Wu MH, et al. Phthalates might interfere with testicular function by reducing testosterone and insulin-like factor 3 levels. *Hum Reprod.* 2015;30(11):2658-70.
11. Robinson L, Miller R. The impact of bisphenol A and phthalates on allergy, asthma, and immune function: a review of latest findings. *Curr Environ Health Rep.* 2015;2(4):379-87.
12. Rochester JR. Bisphenol A and human health: a review of the literature. *Reprod Toxicol.* 2013;42:132-155.
13. Perkins MS, Louw-du Toit R, Africander D. A comparative characterization of estrogens used in hormone therapy via estrogen receptor (ER)- $\alpha$  and - $\beta$ . *J Steroid Biochem Mol Biol.* 2017;174:27-39.
14. Vogel SA. The politics of plastics: the making and unmaking of bisphenol a "safety." *Am J Public Health.* 2009;99(Suppl 3):S559-S566.
15. Hilakivi-Clarke L. Maternal exposure to diethylstilbestrol during pregnancy and increased breast cancer risk in daughters. *Breast Cancer Res.* 2014;16(2):208.
16. Conlon JL. Diethylstilbestrol: potential health risks for women exposed in utero and their offspring. *JAAPA.* 2017;30(2):49-52.
17. Newbold RR, Padilla-Banks E, Jefferson WN. Adverse effects of the model environmental estrogen diethylstilbestrol are transmitted to subsequent generations. *Endocrinology.* 2006;147(6 Suppl):S11-S17.
18. Fregert S, Rorsman H. Hypersensitivity to epoxy resins with reference to the role played by bisphenol A. *J Invest Dermatol.* 1962;39:471-472.
19. Jay AG. *Estrogenation: How Estrogens Are Making You Fat, Sick, and Infertile.* Pyrimidine Publishing Company, 2017.
20. Møller L, Fotel FL, Larsen PB. Survey of bisphenol A and bisphenol-A-diglycidylether polymer. Copenhagen, Denmark: The Danish Environmental Protection Agency, 2012. <https://www2.mst.dk/Udgiv/publications/2013/04/978-87-93026-14-8.pdf>
21. Hoekstra EJ, Simoneau C. Release of bisphenol A from polycarbonate: a review. *Crit Rev Food Sci Nutr.* 2013;53(4):386-402.
22. Hartle JC, Navas-Acien A, Lawrence RS. The consumption of canned food and beverages and urinary bisphenol A concentrations in NHANES 2003-2008. *Environ Res.* 2016;150:375-382.
23. Chen D, Kannan K, Tan H, et al. Bisphenol analogues other than BPA: environmental occurrence, human exposure, and toxicity – a review. *Environ Sci Technol.* 2016;50(11):5438-5453.
24. Yen TH, Lin-Tan DT, Lin JL. Food safety involving ingestion of foods and beverages prepared with phthalate-plasticizer-containing clouding agents. *J Formos Med Assoc.* 2011;110(11):671-684.

# So Much More than Scottish Porridge: The Rich Culinary History of British Oats

By Alison Kay

**W**hen you think about oats, does your mind automatically conjure up a bowl of breakfast porridge? If yes, I'm not surprised; oats are so synonymous with the famous Scottish dish that you'd be forgiven for thinking that the porridge pot is where oats start and finish.

Historically, however, the oat grain has sustained much more of the United Kingdom's population than just the Scots. From the earliest times up to seventy years ago, oats were the staple—if not only—cereal grain available to large parts of the UK, including central and northern England, Wales and Ireland. And as I have learned, the creativity of these peoples, when faced with only one cereal choice, elevated the humble oat grain into so much more than a bowl of porridge!



## OATS—A TRADITIONAL SUPPLY CHAIN

The oat grain, so suited to the UK's northern and exposed geography, traditionally was grown close to home. The harvest was carefully kiln-dried and then sent to the local stone mill where, with a wide setting, the husk was crushed from the kernel and winnowed away. Next, the miller put the oats through the mill again at a slightly narrower setting. Winnowing for a second time produced some clean grits to lay aside. The remaining grains were run through the stones a third time to get oatmeal. The grits, oatmeal and, as we shall see, even the husks were then employed in the kitchen!

The big-brand “instant” oats we see on store shelves today are a poor cousin of this ancestral grain. With consciousness of the incredible nutrient density of oats, I buy them as fresh and unprocessed as I can. Whole oat groats can be rolled at home with the help of an inexpensive flaker; this will preserve more nutrient value and also result in tastier grains than processed and packaged store-bought oats.

## PORRIDGE

Porridge is one of Scotland's most famous exports. As F. Marian McNeill wrote in *The Scots Kitchen*, “Oats are the flower of our Scottish soil and through that magic cauldron, the porridge pot, Scottish oatmeal has been transmuted through centuries into Scottish brains and brawn.”

Few know the traditional way porridge was made and eaten, however, so, let's start by diving, so to speak, into the porridge pot! The Scots prepared their porridge with salted water, stirring it with a “spurtle” (a wooden rod). The spurtle's advantage over the wooden spoon was that it dragged less, meaning the resulting porridge was smoother.

Once cooked, the porridge was served hot with a bowl of cold milk (or sometimes cream) on the side. By dipping each spoonful of oatmeal into the milk (rather than pouring milk over the whole dish), the oats stayed hot longer. In addition, the Scots traditionally stood while eating porridge. Some say it was to honor the beloved oat grain, others that it was to be prepared for enemies!

If you want to make authentic Scottish

porridge, add two-thirds of a teaspoon of salt to two large cups of water and bring to a boil. While stirring this with a spoon (or spurtle) in your right hand, slowly sprinkle in one cup of coarsely milled or rolled oats using your left hand. Each oat must get sealed when it hits the hot water. Keep going until all the oatmeal is in, but don't sprinkle so fast that you stop the water from boiling. Then, stir vigorously for a few minutes, put the lid on the pot, turn the heat to medium-low and leave it for twenty minutes, stirring occasionally. Preparing it this way should leave you with a dish of individual, still chewy oats that don't cling to the spoon or bowl—the epitome of “porridge” to a Scot.

Although this method of making porridge doesn't include pre-soaking the oats, British households would often have soaked oats in a bowl of water overnight. In the morning the oat mixture was worked through a fine sieve and then boiled with milk to create a gruel which, salted and sweetened, was particularly indicated for the sick and also for nursing mothers.

I personally love to ferment my oats before cooking, stirring a generous spoonful of sour-dough starter into a bowl of oats and water and leaving this out on the counter overnight before cooking well. Although the Scots didn't do this pre-fermentation, they did a post-fermentation by pouring their still-warm porridge into a kitchen drawer after cooking. This stash would provide food for days afterwards. As the “porridge drawers” repeatedly used for this process were wooden, it's likely that lactic-acid bacteria accumulated in the wood contributed to a robust post-cooking fermentation.

## OATCAKES AROUND THE BRITISH ISLES

Arguably a more popular use for oats than porridge around the UK were oatcakes, a staple in Scottish, Welsh and Irish households. These were dry, transportable, wafer-like discs baked once a week on an open fire using a heavy “bakestone.” Oats are not easy to coax into a dough as their protein, avenin, does not have the strength of wheat's gluten. Because of this, the process needed skill—the method of making these becoming lodged in the muscle memory of housewives. Fat, which would have been bacon drippings or butter, could be used to help bring

They would pour their still-warm porridge into a kitchen drawer after cooking. This stash would provide food for days afterwards.

Until the 1800s, households placed the batter in a wooden barrel dedicated to oatcake fermentation.

together the dough, but the most skilled makers didn't need this aid and would form the lean oaty discs with incredible deftness.

You can have a go at oatcakes in your own kitchen by following my directions (see recipe sidebars). They are wonderful warm and usually get eaten straightaway in my home. They will also keep for a few days, but will become softer. Originally, to help them last longer after cooking, they would have been further dried by the fire until very crisp.

Besides being eaten alone or with meals, there were other creative and popular ways of using oatcakes. For example, people often crushed and mixed them with liquids. In Scotland, the addition of stock made *brewis*, the addition of only water made *browse* and in Wales, the addition of buttermilk or whey made *siot*.

#### A WILD-FERMENTED OAT PANCAKE

There's another oatcake that's important to British food history, which I love to make in my kitchen. It hails from Staffordshire where, in the 1700s, it helped fuel the local pottery industry workers (Staffordshire is the land of the famous pottery-maker, Wedgwood). Originally, women had cottage industries, selling the oatcakes from their kitchen windows. The Staffordshire oatcake is still popular, so these days, dedicated shops open their doors at five o'clock in the morning to feed local workers.

The Staffordshire oatcake is much more like a pancake than the Scottish one. They are made by frying an oat batter. Until the 1800s, households placed the batter in a wooden barrel dedicated to oatcake fermentation. In this way, the batter became infused with "old" microbes,

#### SCOTTISH OATCAKES

I have cooked these on the stove using a cast iron pan (as they would have been baked originally) and also in the oven. The results are quite different, and I'd suggest trying both! This recipe is written for stovetop preparation. If you wish to use the oven instead of the stove, preheat it to 165C/330F before starting, place the oatcakes onto baking trays (no need to grease) and cook for 20-25 minutes until lightly golden in color.

The Scots did not pre-soak their oats when making oatcakes, but if you wish, you can soak the oats with an acidic medium and then dehydrate them back to dryness to ready them for this recipe.

*Ingredients* (makes three large oatcakes, which can be divided into a total of twelve servings):

200 g (2 ¼ cups) medium oatmeal  
pinch of salt  
2 tablespoons lard  
80 g (1/3 cup) water  
Extra oat (or other) flour for rolling

*Instructions:*

1. Preheat on medium-high a cast iron pan that is at least 8 inches (20 cm) across.
2. Measure the oatmeal into a heatproof bowl and add the salt, mixing well.
3. Heat the water and the lard together in a small, lidded saucepan. Aim for the lard to be completely melted but the water not quite boiling.
4. Sprinkle a working surface with oat (or other) flour in preparation for the rolling and shaping.
5. Add the hot water-lard mixture to the oats and mix well. The mix will be hot, so be careful (start with a spoon, if necessary, before switching to hands).
6. Bring the mix together into a dough. Squeeze it with your hands, encouraging its stickiness to work it into a large ball.
7. Working swiftly (the dough is easier to form when it's still warm), divide the ball into three and place the first piece onto the floured surface. Using your palms (or a floured rolling pin), flatten and shape the dough into a circle about 6 inches (15 cm) in diameter and about 1/8 inch (3 mm) thick.
8. Cut the circle into four quarters (these quarters are traditionally called farls).
9. Repeat this process with the remaining two dough pieces, so that you have three oat cakes, each divided into four pieces.
10. Carefully transfer the oat cakes onto the hot cast iron pan (no cooking fat is needed).
11. Cook them for 5-10 minutes per side, until they start to show a golden surface and lift slightly away from the pan at the corners.
12. These oatcakes are best eaten fresh, ideally still warm! You can also keep them in a bread bin for a day; they are still good but will lose their initial crispness.

lending a wild ferment to the process.

I make these oatcakes at home with oats ground into a coarse flour; I ferment them with sourdough discard, though it could be done with any live starter. I fry thin layers of the batter in lard; the resulting pancake is soft and rollable but has a crisp lacy edge. Traditionally served at breakfast with bacon, eggs, cheese and mushrooms, they are a hearty and tasty way to start the day!

There are many more creative methods to make fermented pancakes using oats. You could soak oats overnight, as European traditions often have, in buttermilk and then add eggs, melted butter and raisins into the batter in the morning before frying in the same way.

#### MORE FERMENTATION

Oats are particularly low in phytase, the enzyme that neutralizes phytic acid. Fermentation helps render them more digestible. It seems our ancestors, who relied on the cereal grain to live, knew this because the Staffordshire oatcake is not the only example of the fermentation of oats.

The Scots created a lacto-fermented oat

product that gave them both an easy-to-digest porridge (called *sowans*) and a probiotic drink (called *swats*). They traditionally ate *sowans* on Christmas Eve, which the Scots called *sowans nicht* (sowans night).

I've been making *sowans* and *swats* in my own kitchen regularly for over two years, and I love them! The *sowans* porridge is creamy and tangy, and the *swats* drink is not only refreshing cold but also makes a hearty beverage when warmed with spices.

Incredibly, the Scots made these delicious oat products from “waste.” After sending their oats to the mill, they would receive two sacks back—one with the ground oats, and the other with the hulls that had been winnowed from the grain during the milling process. These hulls, as well as being coated in microbes perfect for initiating fermentation, would have had tiny pieces of the white carbohydrate-rich endosperm of the oat grain clinging to them—a perfect mix for a ferment!

To make *sowans* and *swats*, the hulls were mixed with water and left to wild ferment (without a starter) before being strained. The

The *sowans* porridge is creamy and tangy, and the *swats* drink is not only refreshing cold but also makes a hearty beverage when warmed with spices.

#### STAFFORDSHIRE OATCAKES—A NATURALLY FERMENTED VERSION

These oatcakes have been a staple way to start the day in the north of England for centuries and are traditionally made thin and pliable and then stuffed with breakfast foods such as eggs, bacon and sausages. These days, they are made with commercial yeast, but originally, they were fermented in wooden barrels that were used over and over again for the batter, their sides becoming impregnated with wild yeasts and bacteria. This is a fun sourdough version.

*Ingredients* (makes four pancakes):

- 200g (2 ¼ cups) very fine oatmeal or oat flour
- 250g (1 cup) water
- 1 tablespoon sourdough starter (you can substitute any active starter, such as dairy kefir, apple cider vinegar, etc.)
- Pinch of salt

*Instructions:*

1. In a bowl, mix well the oats or oat flour, water and sourdough starter.
2. Cover and leave on the counter to ferment. How long you leave the mix is up to you—anything from a few hours to overnight. The longer you leave it, the more fermented and sour it will become. You can refrigerate the uncooked batter for a few days if you are not ready to use it straight away.
3. When you are ready to cook, preheat a cast iron pan that is 20cm/8inches across. Put it on medium to medium-high and allow it to get hot (for me this takes a good ten minutes).
4. Add a pinch of salt to your batter and stir it well.
5. Add a generous knob of fat to the pan (I use lard).
6. Using a large spoon, ladle about a quarter of the batter into the pan, encouraging it to cover the pan by spreading it in a circular motion with the back of the spoon.
7. Cook until the upwards-facing surface looks dry (about 6-8 minutes), then flip the pancake and cook until golden-brown on both sides.
8. Serve warm!

white powder that settled on the bottom was used for an easy-to-digest porridge, and the soaking liquid became the *swats*.

This method of oat fermentation wasn't unique to Scotland. The Irish did the same thing (there, it was called *cáfraith*). In Wales, the dish (which was fermented with buttermilk) was called both *llymru* and *sucan*; here, instead of becoming a porridge, the fermented oat mix was cooked and then poured into wetted molds where it set beautifully into a cold jelly. This dish was later taken up by the English, who added spices and sweeteners (and called it flummery), but originally it was simply oats and water.

## OTHER WAYS OF USING OATS

As you've now seen, oats were vital to a large portion of the UK's population, being the central carbohydrate available. As well as oat-only dishes, oats were also the backbone of many more varied dishes.


Most of us have heard of the traditional Scottish haggis, which is made by stuffing a sheep's stomach with offal, suet, oats, onions and spices. As well as in haggis, the oat grain was often used in sausages; toasted oatmeal was mixed with lard and dried herbs before being boiled in sausage skins.

Due to the prevalence of the stove over the enclosed oven, sweet and savory "puddings" (steam-cooked, all-in-one dishes) were a staple. These were often as simple as oats and broth steamed together, perhaps with a few chopped onions added. More complicated versions could be "black" with blood and/or meat, or "white" with spices, dried fruit and shredded suet or even eggs and cream.

Oats were also often cooked with the ubiquitous ale (unhopped local beer) to make caudle, a warming, filling drink given to the sick or to travelers on completion of a long journey.

## OATS: THE "TRUE AND WORTHY FRIEND"

Crispy griddle cakes, rollable pancakes, fermented drinks and jellies, sausages and puddings that could grace an everyday or celebratory table—yes, oats were vital to the Scottish, but they have also been much more than porridge to many people throughout the British Isles. You can see why, in 1615, Markham, in the book *The English Housewife* declaimed, "No house-keeper whatsoever hath so true and worthy a friend as his oats!"

Recreating these dishes in my own kitchen has helped me connect to my British ancestors. In addition, it has given my whole family the benefit of this delicious and nutritious grain in many more ways than just from the porridge pot! 

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## SOWANS AND SWATS

This natural oat fermentation produces a creamy, easy-to-digest porridge and a probiotic drink that can be enjoyed cool but is also great warm and spiced. I make it as the Scots would have done—with the crumbs of freshly rolled oats—but I give a more accessible version using oat flour here:

### *Ingredients/equipment:*

- 250 g (2 cups) wholegrain oat flour
- unchlorinated water
- 2-quart jar
- muslin plus elastic for covering the jars

### *Instructions:*

1. Clean your jar well and place the oat flour into it.
2. Top up the jar with unchlorinated water leaving a 2-3 cm (about 1 inch) space at the top and stir well.
3. Cover the jar with muslin and secure with an elastic band.
4. Ferment for 2 days to 2 weeks, stirring at least twice a day. The length of time depends on your ambient temperature, the yeasts/bacteria on your grain and your personal taste (the longer you leave it the more sour it will become). At 26 degrees C (80 degrees F) I leave mine 5-7 days, stirring 4-5 times a day.
5. When fermented to your liking, agitate the mixture and pour through a medium to fine sieve. Compost the bran left in the sieve. Leave the strained mix to settle for at least 12 hours. The liquid can then be poured off—this is the *swats*. The white paste at the bottom is the *sowans* and can be cooked as porridge.

# Reading Between the Lines

By Merinda Teller

## Big Gender Means Business: Behind the Euphemisms, a Dark Agenda

“Gender dysphoria”—and “gender dysphoria in children”—made their debut as formal diagnoses in the 2013 edition of the American Psychiatric Association’s (APA’s) *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5); the revised manual also added an “optional ‘post-transition’ specifier to indicate when a particular individual’s gender transition is complete.”<sup>1</sup> The APA thereby jettisoned the term “gender identity disorder,” which had prevailed since 1994 and had in turn ended fourteen years of use of the “transsexualism” diagnosis. Underscoring the relative recency of gender-related diagnoses, prior to 1980, the DSM made no reference to gender identity at all.<sup>1</sup>

The refashioned diagnostic language set the stage for the proliferation of “gender clinics” in North America, which have gone from two or three in the mid-1990s<sup>2</sup> to over four hundred.<sup>3</sup> This rapidly expanding market dangles the promise of a medical fix for gender dysphoria through drugs and procedures euphemistically referred to as “gender-confirming surgery.”<sup>4</sup> Researchers reported a fourfold increase in this type of surgical procedure from 2000 to 2014,<sup>5</sup> and in the 2016–2017 year alone, “transgender” surgeries increased by a whopping 155 percent—the largest increase of any type of plastic surgery that year.<sup>4</sup>

If the “two clear trends” related to individuals who self-identify as transgender or “gender non-binary” (TGNB) persist—namely, growth in the proportion of individuals claiming such labels and “a higher proportion of TGNB identities among the younger generations”<sup>6</sup>—then the upward trend in surgeries and pharmaceutical interventions is likely to continue. A 2016 survey of Minnesota ninth and eleventh graders is suggestive, with an unprecedentedly large proportion of students self-reporting “transgender and gender nonconforming” identities—twenty-seven per thousand, versus an estimated seven

per thousand for eighteen- to twenty-four-year-olds.<sup>6</sup> Describing the study’s high prevalence as an “outlier,” some researchers nevertheless speculate that it could be “indicative of future trends.”<sup>4</sup>

Broken down by sex, the 2016–2017 surgical tsunami revealed that far more girls and women now choose to tamper with the body they were born with compared to boys and men—that year, there was an astonishing 289 percent increase in “female-to-male” procedures versus a 41 percent increase for “male-to-female.”<sup>4</sup> Prior to 2012, scientific literature on the phenomenon in girls did not exist, but the situation shifted dramatically over the next decade. Describing the present state of affairs, Abigail Shrier, author of the book *Irreversible Damage*, notes, “For the first time in medical history, natal girls are not only present among those so identifying [as “transgender”]—they constitute the majority.”<sup>7</sup>

### “PUBERTY BLOCKERS”: A COMMON FIRST STEP

A common first step among children and preteens diagnosed with gender dysphoria are gonadotropin-releasing hormone (GnRH) analogs—dangerously and disingenuously referred to as “puberty blockers.” GnRH analogs suppress the release of sex hormones, including testosterone and estrogen.<sup>8</sup> In boys who take them, the drugs will “decrease the growth of facial and body hair, prevent voice deepening, and limit the growth of genitalia,” as well as prevent erections; in girls, the drugs’ impacts include limiting or stopping breast development and halting menstruation.<sup>8</sup>

Lupron is the undisputed GnRH analog market leader. The Food and Drug Administration (FDA) initially approved it to treat prostate cancer and conditions such as endometriosis<sup>9</sup> and uterine fibroids, but the regulatory agency also permits Lupron’s use for a condition dubbed

“Gender clinics” in North America have gone from two or three in the mid-1990s to over four hundred.

“precocious puberty” (puberty before age eight in girls and age nine in boys). The drug’s pediatric website trumpets the tagline, “over 25 years of providing the suppression they need,”<sup>10</sup> but in reality, Lupron has been disastrous for this and other approved uses.<sup>11</sup> Prescribing Lupron or other GnRH analogs for gender dysphoria is an off-label application. In 2020, Utah Representative Brad Daw—concerned about the 10,960 percent increase over a five-year period in Utah minors going through “female-to-male” medical transition—introduced a bill that would have required the state health department to at least “study the effects of hormone therapy and other medical treatment on transgender minors,” but the bill failed in a resounding fifty-five to seventeen vote.<sup>12</sup>

Lupron also has a colorful history of use as a “chemical castration” agent for sex offenders<sup>13</sup> and, weirdly, is a component of infertility treatments, even though it is contraindicated during pregnancy due to the risk of fetal harm.<sup>14</sup> Fertility clinics use the GnRH analog to switch off the pituitary in women undergoing in vitro fertilization, with the rationale that it allows doctors to “take over control” of the woman’s ovulation cycle.<sup>15</sup>

Registered nurse Lynne Millican, who was given Lupron for infertility, became an activist and founded the Lupron Victims Hub<sup>16</sup> after the drug disabled her and destroyed her career, leaving her with impaired gastrointestinal functioning, chronic lymphadenopathy, severe osteoporosis, a “dissolving” jaw, muscle and nerve pain, chronic fatigue and memory problems.<sup>11</sup>

Millican’s experience is far from unique. According to a *Kaiser Health News* investigation, many adults, especially women, report that taking Lupron as a kid “ruined their lives or left them crippled.”<sup>17</sup> As of September 2022, the FDA—which has ignored numerous petitions calling for Lupron’s recall—had received more than thirty-one thousand reports linking the drug to serious adverse events, including death.<sup>18</sup> In mid-2022, the FDA belatedly added warnings to Lupron and other GnRH analogs of an increased risk of “pseudotumor cerebri,” also called “idiopathic intracranial hypertension”<sup>19</sup>—a “dangerous surge of spinal fluid pressure in the brain” that can cause prob-

lems such as permanent vision loss.<sup>20</sup> Scarcely reassuring for the masses of young people taking Lupron or other GnRH analogs, the drugs are also notorious for causing heart and bone problems as well as mental health issues. (“Emotional lability” is listed as a possible psychiatric side effect.<sup>21</sup>) There is suggestive evidence that GnRH analogs affect cognitive functioning, with two studies pointing to a “substantial” drop in IQ scores.<sup>22</sup>

The corporate track record of Lupron’s manufacturers is hardly comforting. In 2001, Lupron’s then-manufacturer TAP Pharmaceuticals (a joint venture between Abbott Laboratories and Japan’s Takeda Pharmaceutical) paid what was at the time the highest criminal and civil fine ever—eight hundred seventy-five million dollars—after admitting to fraudulent marketing and violations of the False Claims Act.<sup>23</sup> Currently, the drug belongs to the portfolio of AbbVie (an Abbott Labs spin-off), which not only successfully fended off a major lawsuit<sup>24</sup> but has resorted to a range of unsavory tactics to mask or downplay the drug’s risks.<sup>23</sup>

Given the overwhelming demand for “puberty blockers,”<sup>25</sup> it’s a safe bet that the American kids and parents clamoring for them know little of the drugs’ dangers and believe the falsehood that the chemical intervention is “safe, effective and completely reversible.”<sup>20</sup> On the contrary, retired U.S. endocrinologist and OB/GYN Dr. David Redwine, who reviewed extensive in-house data from the manufacturers, found information in one of the earliest studies—never published—that over 62 percent of endometriosis patients given Lupron “had not regained baseline estrogen levels by one year after stopping Lupron.”<sup>26</sup> In Britain, the National Health Service (NHS), which has offered puberty blockers to children as young as nine or ten,<sup>27</sup> now admits the drugs’ long-term effects are unknown and no longer describes them, as it previously did, as “fully reversible.”<sup>20</sup>

## CROSS-SEX HORMONES

“Puberty blockers” tend to be a gateway drug, leading children, sometimes starting as young as twelve,<sup>28</sup> to begin more powerful hormone therapy—estrogen for gender-dysphoric boys, testosterone for gender-dysphoric girls. Shrier cites a clinical trial in which “100 percent of children put on puberty blockers proceeded to cross-sex hormones.” In the UK, researchers at Tavistock’s Gender Identity Development Service describe cross-sex hormonal treatment as “a main aspect of [the] gender dysphoria health care pathway.”<sup>29</sup>

As explained in a 2016 report in *Translational Andrology and Urology*, the medical establishment has become dramatically more permissive when it comes to green-lighting hormone therapy. In the past, guidelines developed by the World Professional Association for Transgender Health (WPATH) and the Endocrine Society recommended that individuals try out a one-year “social transition” before starting hormone therapy.<sup>30</sup> That is no longer the case—now, both organizations “recommend that patients transition socially and with medical therapy at the same time.”

In the U.S., Planned Parenthood is one of the leading dispensers of cross-sex hormones, doling them out “like candy”—sometimes at the very first appointment—in hundreds of clinics across the nation.<sup>31</sup> A report in *The Federalist* describes Planned Parenthood’s seeding of a “school-to-clinic” pipeline through its role as a sex education contrac-

tor—where its curricula emphasize “gender fluidity and transition”—and through its operation of school-based “wellbeing centers.”<sup>31</sup> *The Federalist* also notes Planned Parenthood’s historical willingness to provide “sensitive care” to minors without parental consent, and points out that transitioning without parental knowledge is more likely in states that have deemed “gender-affirming care” to be “medically necessary.”

In September 2022, California Gov. Gavin Newsom signed into law a “transgender sanctuary” bill likely to encourage transgender medical tourism by minors from out of state; the governor characterized laws passed by other states to protect minors from irreversible medical interventions as “an act of hate.”<sup>32</sup> Groups protesting the new California law pronounced it “drastic overreach”—amounting to “a massive exemption to all existing laws on child custody and on the respect for other states’ jurisdictions”—and also suggested it “creates a very dangerous incentive for children to run away from their homes and other states if they have a disagreement with their parents over the issue of gender distress.”<sup>33</sup>

Cross-sex hormone therapy has two fundamental goals: to suppress or minimize the individual’s innate secondary sex characteristics, and to promote the development of sex characteristics of the opposite sex—or, as gender clinics prefer to phrase it, characteristics “consistent with the individual’s gender identity.”<sup>34</sup> However, while this strategy is put forth as a remedy for mental distress,<sup>29</sup> it has far

less rosy physical and emotional implications. Shrier points out that the youth who proceed from “puberty blockers” to cross-sex hormones are “almost guaranteed” to end up infertile, with sexual development and the potential for orgasm perhaps “foreclosed for good.”

Among the facts generally unknown to youth who embark on cross-sex hormone treatment is the “dirty little secret” that the hormones are addictive, altering the brain and “distort[ing] one’s ability to make decisions.”<sup>35</sup> Among girls, testosterone—trendily referred to as “T” and, according to Shrier, administered at dosages “ten to forty times greater than their bodies would normally bear”—can initially feel like a “joyride.” As Shrier evocatively describes the initial experience, “[I]n the place of mental sharpness, [testosterone] offers the compensatory gifts of mood elevation and a satisfying spurt of heedlessness. A newfound sense of bravado, but also punchiness, descends.” Body and facial hair emerge after only a few months; over time, other physical changes set in, including voice deepening, development of acne and possibly male-pattern baldness, rounding of the nose, squaring of the jaw and enlargement of the clitoris potentially “to the size of a baby carrot.” In large part, these changes are permanent.

In the grips of the initial “euphoria,” girls may not mind the short-term memory loss or increased moodiness, irritability and aggression, but as time goes on, they discover other discomforts: vaginal atrophy, muscle aches, cramping and sweating. Most alarmingly, for

Among the facts generally unknown to youth who embark on cross-sex hormone treatment is the “dirty little secret” that the hormones are addictive.

#### BEHIND THE SCENES, SOME POWERFUL PLAYERS

Many powerful players are involved in funding and championing the kid-focused “transgender” agenda, including foundations and “[g]overnments, corporations, politicians, medical institutions and schools, banks, pharma, tech, the media, and Hollywood.”<sup>73</sup> The Centers for Disease Control and Prevention (CDC) is also in the mix of influential players, offering youth a series of transgender resources that include a “digital LGBTQ+ center” called Q Chat Space, run in partnership with Planned Parenthood. The site—brought into question by lawmakers writing to CDC director Rochelle Walensky in July 2022—has built-in features that make it easy for young people to hide it from their parents.<sup>74</sup>

The World Professional Association for Transgender Health (WPATH), an international nonprofit, plays a prominent role in the medical arena through its dissemination of “Standards of Care” and “Ethical Guidelines” for the treatment of individuals with gender dysphoria. WPATH promotes the medical necessity of “hormone therapy, surgery, facial hair removal, interventions for speech and communication modifications, and behavioral adaptations.”<sup>34</sup> In a 2019 investigative report, a Canadian researcher noted that all WPATH committee members involved in the development of the Standards of Care had significant conflicts of interest.<sup>75</sup> The WPATH committee chairman, for example, holds an endowed academic chair in sexual health funded by Jennifer (born James) Pritzker, “the world’s only known transgender billionaire.”<sup>76</sup> Pritzker gives money to WPATH and a wide range of gender-focused academic and professional institutions. In addition, other members of the Pritzker family—one of America’s richest—have invested extensively in the surgeries and drugs that comprise the gender dysphoria armamentarium.<sup>67</sup>

A survey assessing “gender-affirming chest surgeries” among twelve- to seventeen-year-old adolescents found that the procedures jumped by 389 percent from 2016 to 2019, nearly all of them mastectomies (98.6 percent).

both “female-to-male” and “male-to-female” individuals, cross-sex hormones come with a heightened risk of mortality-increasing adverse events such as cancer,<sup>36,37</sup> blood clots<sup>38</sup> and cardiovascular problems.<sup>39</sup>

Expressing worry about the rush to prescribe cross-sex hormones, in 2016 a UK expert advocated a more cautious wait-and-see approach, stating, “If you wait until puberty has got a little way along, a fair proportion of the children change the clinical presentation and feel more like straightforward lesbian and gay kids. They don’t seek social role change any more and will end up with no need for lifelong medical intervention, surgery and with no loss of natural fertility should they want children.”<sup>28</sup>

#### TOP TO BOTTOM

The popularity of surgical interventions—both “top” (chest) and “bottom” (genitals)—has skyrocketed alongside pharmaceutical therapies. In 2021, market researchers at Grand View Research reported a “U.S. sex reassignment surgery market size. . . valued at USD 1.9 billion” and predicted a compound annual growth rate of 11 percent by 2030.<sup>40</sup> According to a 2019 study, “top” surgery—occurring at rates reported between 8 and 25 percent—is about twice as frequent as genital surgery (reported for 4 to 13 percent) for “female-to-male” and “male-to-female” populations combined.<sup>4</sup> A survey assessing “gender-affirming chest surgeries” among twelve- to seventeen-year-old adolescents found that the procedures jumped by 389 percent from 2016 to 2019, nearly all of them mastectomies (98.6 percent).<sup>41</sup>

The Grand View Research report noted the dominance of the “female-to-male” market segment, in part thanks to “continuous innovations in metoidioplasty [the surgical creation of a “neophallus”], phalloplasty [a method of creating a “penis” using large skin grafts], scrotoplasty [creation of a “scrotum”], and chest reconstructing.” Another “advanced and innovative surgical solution” the analysts expect to contribute to market growth is a procedure that reduces the size of the Adam’s apple (called a “tracheal shave” or “chondrolaryngoplasty”). As proponents of this and other forms of “facial feminization” surgery enthuse, “the brow lift,

scalp advancement, nose reshaping, temporo-mandibular joint shave, and cheek implants are all possible.”<sup>42</sup>

Among “lower surgeries,” according to Healthline, metoidioplasty is a “routinely performed” procedure, with four possible options as to how to carry it out.<sup>43</sup> The first, called a “simple release,” frees the clitoris from surrounding tissue but leaves the urethra and vagina alone. A “full metoidioplasty,” in contrast, not only releases the clitoris but additionally uses a tissue graft from inside the cheek “to link the urethra with the neophallus”; if so desired, full metoidioplasty can also involve removal of the vagina (vaginectomy) and insertion of scrotal implants. A third alternative is “ring metoidioplasty,” where the skin graft comes from the inside of the vaginal wall, rather than the cheek, and is “combined with the labia majora in order to connect the urethra and the neophallus.” (Healthline touts one advantage of this option—only having to heal “at one site as opposed to two.”) Finally, “Centurion metoidioplasty” releases and uses ligaments that run up the labia “to surround the new penis, creating extra girth.”

As extensively detailed by Johns Hopkins Medicine, phalloplasty uses a large skin graft from the arm, leg or torso—including “the skin, fat, nerves, arteries and veins”—to create a “penis.”<sup>44</sup> Commenting on size, Johns Hopkins helpfully notes that thinner patients “will have a penis with less girth,” while fatter patients with more graftable tissue to spare will end up with a “thicker penis.” The hospital’s comprehensive definition of phalloplasty also includes potential surgery to lengthen the urethra; create a tip for the “penis”; install testicular implants and create a “scrotum” to protect them; remove the vagina, uterus and ovaries; and place erectile implants. The choice of procedures will be dictated by the patient’s wishes regarding “penis” function—with emphasis on urethral lengthening if standing urination is important, the choice of a skin graft site “with good nerve innervation” if sensation is at the top of the list, and implantation of an erectile prosthetic if penetrative sex and maintaining an erection are the priority.

On the list of pre-phalloplasty topics “to discuss with your physician,” Johns Hopkins recommends reviewing the patient’s desire for



a hysterectomy. Although traditional hysterectomies have been declining, there are indications that hospitals are interested in reversing that trend by branching out into “gender-affirming” hysterectomies, including in minors.<sup>45</sup> Hysterectomy is not a low-risk procedure, however, and as described by Children’s Health Defense, the risks “are especially pronounced for women who have their reproductive organ(s) removed at younger ages.”<sup>45</sup> Nevertheless, according to one study, 14 percent of those undergoing a “female-to-male” transition have had a hysterectomy, and another 57 percent “want one in the future.”<sup>44</sup>

For those aiming for a “male-to-female” metamorphosis, procedures may include removal of the testicles (orchiectomy) and “penile inversion vaginoplasty” (PIV), in which the penis and scrotum are “disassembled” and then “reassembled” into a vulva and vagina, “creating aesthetically feminine, sensate external genitalia, and a vagina capable of receptive intercourse” as well as “gender-congruent urinary function, that is, seated urination.”<sup>46</sup> Preparation for PIV typically includes “scrotal-perineal hair removal”;<sup>46</sup> clinicians warn that “failure to perform preoperative or intraoperative hair removal can. . . result in a hairball, which can be a nidus [breeding ground] for debris and infection.”<sup>47</sup>

## FINANCIAL INCENTIVES

In *Irreversible Damage* and in a 2019 article Shrier wrote for the *Wall Street Journal*, she compares the prevalence of “rapid onset gender dysphoria” in girls (a term coined by social scientist Lisa Littman<sup>48</sup>) to “social con-

tagions” such as cutting and bulimia, but draws attention to one key difference: this particular social contagion “gets full support from the medical community.”<sup>49</sup> And one of the driving reasons for this support, as health care institutions barely take the trouble to dissemble, is that body-altering drugs and surgeries are good for the financial bottom line.

A September 2022 article in the *Tennessee Star* spells out this point, quoting the physician who helped persuade Vanderbilt University to open a transgender clinic in 2018; as the doctor emphasized in a talk that year, “These surgeries make a lot of money”—also noting that because the procedures are complex and labor-intensive, lucrative follow-up is guaranteed.<sup>50</sup> In October 2022, the Vanderbilt clinic responded to scrutiny by some of Tennessee’s lawmakers by announcing it was temporarily “pausing” the surgeries for minors.<sup>51</sup> Around the same time, Tennessee’s attorney general announced his intention to investigate allegations of illegal conduct at the clinic.<sup>52</sup>

Many studies confirm the fact that increased insurance coverage for “gender-confirming surgery” is contributing to more demand for the procedures.<sup>4</sup> Over the 2016–2019 period, the Nationwide Ambulatory Surgery Sample survey found that the vast majority of adolescents who had “gender-affirming chest surgeries” indeed had insurance coverage for the procedure, either private (61 percent) or public (17 percent).<sup>41</sup> According to the survey, the median cost of “top” surgery, adjusted for inflation, was about thirty thousand dollars. In 2017, *Newsweek* estimated

As the doctor emphasized in a talk that year, “These surgeries make a lot of money.”

## JOHNS HOPKINS—A LONG-TIME PLAYER

In 1966, Baltimore’s Johns Hopkins Hospital established the nation’s first “gender-affirming surgery” clinic, called the Gender Identity Clinic.<sup>77</sup> The clinic operated for thirteen years and then closed in 1979, and it was not until 2017 that Johns Hopkins reentered the fray with its Center for Transgender Health. Johns Hopkins’ early performance of “gender-affirming” surgery lent a “mainstream sort of legitimacy to gender affirmation that hadn’t been granted to it yet,” according to one medical historian, but that imprimatur went back to sleep in 1979 until Johns Hopkins apparently regrouped around the twenty-first century’s transgender agenda.<sup>2</sup>

The inaugural director of the 1960s clinic, plastic surgeon John Hoopes, reportedly viewed “genitourinary reconstruction on transgender patients as an opportunity to further his own field,” but a decade later, he left the clinic and raised questions about “long-term clinical data regarding the efficacy of surgical procedures.”<sup>72</sup> He also requested that the operations “not be performed under the auspices of the Division of Plastic Surgery.” According to the medical historian (writing in 2022), the “poor technical outcomes”—and the clinic’s association with sexologist John Money, whose opinions on incest and chemical castration of prisoners had generated controversy—were contributors to the clinic’s 1979 demise.<sup>2</sup> No one talks about “poor outcomes” today, however, and Johns Hopkins has regained its rank as one of the most prominent players in sex reassignment surgery.<sup>40</sup>

A growing number of young women are going public with their regret, sharing their “cautionary tale” so that other girls will think twice.

that the cost of “female-to-male” procedures could be as high as fifty thousand dollars.<sup>53</sup>

Government support is helping drive the market. The Affordable Care Act (“Obamacare”) established coverage specifically for “transgender” care, and the Biden administration has announced expanded coverage for “gender-affirming care” for federal employees and their families beginning in 2023.<sup>54</sup> However, Grand View Research notes that private insurers are also increasingly willing to cover removal of organs like the testicles, uterus, fallopian tubes and ovaries.<sup>40</sup> One-fourth of Fortune 500 companies “offer transition-related care to employees,” including through major insurers like Blue Cross Blue Shield and Aetna.<sup>54</sup> This “improving reimbursement scenario” is, according to the market research firm, “anticipated to positively impact the market growth during the forecast period.”

#### REGRETS

In the face of the enthusiastic and monolithic media coverage of “transgenderism,” individuals who change their minds—called “detransitioners”—get short shrift, but their numbers are reportedly increasing. In 2017, a Serbian urologist told *Newsweek* he was encountering increased requests for “reversal” surgeries, particularly among natal males “who want their male genitalia back.”<sup>53</sup> One such man, who went through “male-to-female” surgery and then “opted to become a man again,” commented, “I don’t think there’s anyone born transsexual. Areas of their human brain get altered by female hormones.”

A growing number of young women are also going public with their regret, sharing their “cautionary tale” so that other girls will think

twice. Describing her rapid trajectory, a seventeen-year-old named Chloe told a media outlet how she decided she was transgender when she was twelve—a decision heavily shaped by trans “influencers” she found online—then began taking “puberty blockers” and testosterone at age thirteen, underwent a double mastectomy at age fifteen and regretted all of these decisions by age sixteen.<sup>55</sup> Although surveys highlight rates of regret ranging from 1 to 11 percent, detransitioners—who often experience intense ostracism for their reversal decisions—“claim that the numbers are much higher and that people are afraid to speak out.”<sup>56</sup> Tucker Carlson of Fox News predicts that a decade from now, “there will be thousands of vocal victims.”<sup>57</sup>

Detransitioners and a growing number of experts increasingly point out that gender dysphoria may be the wrong diagnosis—and hormones and surgery the wrong solutions. As a clinical psychologist who underwent “male-to-female” transition puts it, “doctors may be defaulting to medicalization as a remedy for other personal or mental-health factors.”<sup>55</sup> Among the “transgender” and “gender-diverse” teens who participated in the Nationwide Ambulatory Surgery Sample for the 2016–2019 period, psychiatric comorbidities were common, with more than one in five (21 percent) reporting anxiety and 16 percent reporting depression.<sup>41</sup> After going public, a UK detransitioner described being in communication with hundreds of young people, nineteen and twenty years old, “who have had full gender reassignment surgery who wish they hadn’t, and their dysphoria hasn’t been relieved, they don’t feel better for it.”<sup>56</sup>

Questions about whether surgery has become a panacea are not even new. A Swedish study that conducted long-term follow-up, from

#### AUTISM AND GENDER DYSPHORIA

In 2020, following up on various studies linking autism and gender dysphoria, UK researchers confirmed the link in a much larger study population.<sup>78</sup> The research indicated that people with gender dysphoria were six times as likely to be autistic, and also more likely to report autism traits, compared to their non-gender-dysphoric counterparts. The reverse was also true, with autistic people being more likely to be “gender diverse” than neurotypical individuals. In 2022, a meta-analysis in the *Journal of Autism and Developmental Disorders* reiterated the probable link between the two.<sup>79</sup> Unfortunately, commentators have used such studies to make a cheerful case for “neurodiversity” and “gender diversity,”<sup>80</sup> rather than asking tough questions about whether common environmental exposures—nutrition, vaccines, electromagnetic radiation, endocrine-disrupting chemicals and other factors—might have something to do with the exponential rise of both autism and gender dysphoria.

1973 through 2003, of “transsexual” persons who underwent sex reassignment surgery reported that after the surgery, the risks of mortality, suicidal behavior and psychiatric morbidity were considerably higher than for the general population<sup>58</sup>—in a word, the surgically altered individuals’ experience was one of “lifelong mental unrest.”<sup>59</sup>

## THE PUSHBACK

Tucker Carlson has described gender ideology as “incoherent,” but notes that those who dare to say something about it immediately get attacked for being “on the other side.”<sup>57</sup> Nevertheless, many prominent figures have dissented from the medicalized orthodoxy, particularly when it comes to “puberty blockers.” For example, Dr. Redwine, an expert on Lupron’s failure as an endometriosis drug, has expressed the opinion that Lupron’s off-label use for gender dysphoria is “controversial and seems questionable.”<sup>60</sup> Dr. Jane Orient, executive director of the Association of American Physicians and Surgeons, describes as “unethical experimentation” the use of Lupron in “gender-confused children” who have “no capacity to comprehend [the drug’s] long-term consequences.” For boys who take Lupron, Orient says, “It does not turn a male child into a female child, only into a eunuch who will lose his full potential for growth and strength.”<sup>61</sup> In the UK, Dr. David Bell, who retired after emerging as a whistleblower at the Tavistock Centre’s gender clinic, disputes the interchangeable use of gender dysphoria and transgenderism. Discussing “puberty blockers,” Bell told *The Guardian*, “The body is not a video machine. You can’t just press a pause button. You have to ask what it really means to stop puberty.”<sup>62</sup> In Sweden, psychiatrist Dr. Christopher Gillberg describes pediatric transition as “possibly one of the greatest scandals in medical history” and has called for “an immediate moratorium on the use of puberty blocker drugs because of their unknown long-term effects.”<sup>63</sup>

Another individual unafraid to speak up is Dr. Michelle Cretella, executive director of the American College of Pediatricians, who has repeatedly called for “serious scientific research into the potential environmental causes of gender dysphoria and the risks—both physical and

psychological—of medical transition.”<sup>64</sup> Writing in 2021 in a lay Catholic publication called the *Academy Review*, Dr. Cretella bluntly stated, “The suppression of normal puberty, the use of disease-causing cross-sex hormones and the surgical mutilation and sterilization of children constitute atrocities to be banned; they are not healthcare.”<sup>65</sup> For Cretella, teen and young adult hysterectomies, surgical castration and penectomies add up to nothing less than eugenics—that is, the intentional sterilization of emotionally troubled youth.

In 2018, a mother using the pen name of “worriedmom” agreed that there are disturbing parallels between the eugenics movement of yore, which led to the “coerced sterilization of unfit individuals,” and the medicalized treatment of transgender youth today, which virtually guarantees sterilization in those who take “puberty blockers” and cross-sex hormones and/or remove their natal sex organs.<sup>65</sup> The writer pointed out: “as applied, both. . . result in the sterilization of people who are unable to give meaningful consent to the procedure.” She also took note of the mainstream media’s “blind spot” on the topic of destroyed fertility and quoted a medical anthropologist as saying, “The absence of the discussion of sterilization of children as a major ethical challenge. . . is striking.”


Investigative journalist Jennifer Bilek, who has extensively studied the money behind the “transgender project,”<sup>66</sup> asks, “[W]hat could possibly explain the abrupt drive of wealthy elites to deconstruct who and what we are and to manipulate children’s sex characteristics in clinics now spanning the globe. . . ?”<sup>67</sup> Whether the answer is profit, “the pleasure of seeing one’s own personal obsessions writ large” or “the human temptation to play God”—or all of the above—Bilek finds the agenda deeply troubling. Equally disturbing are recent legal trends, including legislative attempts to pass laws that “hold parents criminally liable for refusing to treat their children as a different sex from the one they were born into,”<sup>68</sup> including classifying such refusals as felonies, and contentious custody battles that penalize or sideline parents who object to their children’s medical transition.<sup>69</sup>

Nevertheless, parents, detransitioners and

There are disturbing parallels between the eugenics movement of yore, which led to the “coerced sterilization of unfit individuals,” and the medicalized treatment of transgender youth today.

legislators are pushing back to protect minors. In Oklahoma, lawmakers voting in September 2022 to distribute federal dollars stipulated that university health care institutions accepting the money “will have to limit how they practice transgender medicine on children under the age of 18”; the lawmakers prohibited “intervening in the development of certain sexual characteristics,” “surgically altering a child’s appearance to match anything but the gender they were born with” and “the use of medical therapies or using medicine to treat gender dysphoria.”<sup>70</sup> Florida’s Department of Health (FDOH) likewise questions federal guidance, stating that “encouraging mastectomy, ovariectomy, uterine extirpation, penile disablement, tracheal shave, the prescription of hormones which are out of line with the genetic make-up of the child, or puberty blockers, are all clinical practices which run an unacceptably high risk of doing harm.”<sup>71</sup>

Taking a step back into philosophical territory, one writer analyzes the situation this way [emphases in original]: “The notion that people know what they need and ought to be allowed to have it is a central principal and value in the consumer capitalist mosh-pit of human exploitation which we live in today. . . . The truth is we don’t know what we need: we have been cultured and conditioned to want all the wrong things and to turn to the ruling power structures to get them . . . . All these solutions that are offered, as means to autonomy and self-empowerment, in fact lead to the opposite: increased dependency on the Dream State that is selling us its manufactured imago of being.”<sup>72</sup>

Ultimately, another writer suggests, “When ‘the tumult and shouting dies,’ it proves not easy nor wise to live in a counterfeit sexual garb.”<sup>73</sup> His conclusion is that while cosmetic surgery and cross-sex hormones can “affect appearances” and “stunt or damage some outward expressions of our reproductive organization,” they cannot bring about the actual transformation that turns “one sex into the other.”

## REFERENCES

1. “Gender dysphoria diagnosis.” American Psychiatric Association, n.d. <https://www.psychiatry.org/psychiatrists/cultural-competency/education/transgender-and-gender-nonconforming-patients/gender-dysphoria-diagnosis>

2. Putka S. What killed the first gender-affirming surgery clinic in the U.S.? *Med-Page Today*, Oct. 5, 2022.
3. The Gender Mapping Project. <https://www.gendermapper.org/>
4. Nolan IT, Kuhner CJ, Dy GW. Demographic and temporal trends in transgender identities and gender confirming surgery. *Transl Androl Urol*. 2019;8(3):184-190.
5. Gologowski N. Gender confirmation surgeries are rising, and so is insurance coverage: study. *HuffPost*, Feb. 28, 2018.
6. Rider GN, McMorris BJ, Gower AL, et al. Health and care utilization of transgender and gender nonconforming youth: a population-based study. *Pediatrics*. 2018;141(3):e20171683.
7. Shrier A. *Irreversible Damage: The Transgender Craze Seducing Our Daughters*. Washington, DC: Regnery Publishing, 2020.
8. Mayo Clinic Staff. Pubertal blockers for transgender and gender-diverse youth. Mayo Clinic, Jun. 18, 2022.
9. Part 1 – Darcy Spears News Report on Lupron Depot – (KTVN, Las Vegas). [https://www.youtube.com/watch?v=Q\\_k8GyWT6rY&t=16s](https://www.youtube.com/watch?v=Q_k8GyWT6rY&t=16s)
10. [https://www.lupronpedpro.com/?cid=ppc\\_ppd\\_lupronpedhcp\\_ggl\\_brnd\\_10975](https://www.lupronpedpro.com/?cid=ppc_ppd_lupronpedhcp_ggl_brnd_10975)
11. Millican L. Lupron: a nightmare produced in Abbvie. RxISK, Feb. 18, 2014. <https://rxisk.org/lupron-a-nightmare-produced-in-abbvie/>
12. Richards C. Utah House rejects bill to study effects of hormone therapy on transgender minors. *Standard-Examiner*, Mar. 11, 2020.
13. Lee JY, Cho KS. Chemical castration for sexual offenders: physicians’ views. *J Korean Med Sci*. 2013;28(2):171-172.
14. <https://www.drugs.com/pregnancy/leuprolide.html>
15. <https://www.drupalpani.com/knowledge-center/articles/lupron>
16. <http://lupronvictimshub.com/>
17. Jewett C. Women fear drug they used to halt puberty led to health problems. *Kaiser Health News*, Feb. 2, 2017.
18. <https://fis.fda.gov/sense/app/95239e26-e0bc-42d9-a960-9a5f7f1c25ee/sheet/45beeb74-30ab-46be-8267-5756582633b4/state/analysis>
19. Arnold J. FDA slaps warning on puberty blockers. *The Daily Signal*, Jul. 28, 2022.
20. Buttons C. FDA warns of brain swelling and permanent vision loss found in children taking puberty blockers. *The Post Millennial*, Jul. 25, 2022.
21. [https://www.lupronpedpro.com/?cid=ppc\\_ppd\\_lupronpedhcp\\_ggl\\_brnd\\_10975](https://www.lupronpedpro.com/?cid=ppc_ppd_lupronpedhcp_ggl_brnd_10975)
22. Hayes P. Commentary: Cognitive, emotional, and psychosocial functioning of girls treated with pharmacological puberty blockage for idiopathic central precocious puberty. *Front Psychol*. 2017;8:44.
23. Millican L. They say Lupron is safe. Hormones Matter, Aug. 31, 2022. <https://www.hormonesmatter.com/they-say-lupron-safe/>
24. Steinberg J. Abbott, AbbVie beat appeal in Lupron bone, joint injury suit. *Bloomberg Law*, Jul. 11, 2022.
25. Van Maren J. The puberty blocker “Lupron” given to kids is the same drug used to chemically castrate pedophiles. *The Bridgehead*, May 30, 2022.
26. Robbins J. Why puberty blockers are a clear danger to children’s health. *The Federalist*, Dec. 14, 2018.
27. Barnes H. The crisis at the Tavistock’s child gender clinic. BBC, Mar. 30, 2021.
28. Lyons K. UK doctor prescribing cross-sex hormones to children as young as 12. *The Guardian*, Jul. 11, 2016.
29. Costa R, Colizzi M. The effect of cross-sex hormonal treatment on gender dysphoria individuals’ mental health: a systematic review. *Neuropsychiatr Dis Treat*. 2016;12:1953-1966.
30. Unger CA. Hormone therapy for transgender patients. *Transl Androl Urol*. 2016;5(6):877-884.
31. Eckert J, Mull ES. Planned Parenthood profits big from getting kids hooked on transgender hormones through the school-to-clinic pipeline. *The Federalist*, May 10, 2022.
32. Mays M. Newsom signs bill protecting transgender youths and families fleeing red-state policies. *Los Angeles Times*, Sept. 29, 2022.
33. Brown J. New California transgender law endangers parental rights worldwide, legal group warns: “Drastic overreach.” Fox News, Oct. 4, 2022.
34. Yun Y, Kim D, Lee ES. Effect of cross-sex hormones on body composition,

- bone mineral density, and muscle strength in trans women. *J Bone Metab.* 2021;28(1):59-66.
35. Heyer W. Cross-sex hormones are steroids and addictive. *The Daily Signal*, Dec. 3, 2021.
  36. Ferreira C, Fraga J, Antunes C, et al. Serous borderline tumor in transgender female-to-male individuals: a case report of androgen receptor-positive ovarian cancer. *Case Rep Radiol.* 2021;2021:8861692.
  37. Asscheman H, Giltay EJ, Megens JAJ, et al. A long-term follow-up study of mortality in transsexuals receiving treatment with cross-sex hormones. *Eur J Endocrinol.* 2011;164(4):635-642.
  38. Blood clot risk factor occurs in more than 10% of transgender men using testosterone. *Endocrine News*, Feb. 2021.
  39. Nota NM, Wiepjes CM, de Blok CJM, et al. Occurrence of acute cardiovascular events in transgender individuals receiving hormone therapy. *Circulation.* 2019;139(11):1461-1462.
  40. <https://www.grandviewresearch.com/industry-analysis/us-sex-reassignment-surgery-market>
  41. Monaco K. Gender-affirming chest surgeries increase by nearly 5x in teens. *MedPage Today*, Oct. 17, 2022.
  42. Hubbard TM. The most common transgender surgery: female to male. *Trans News*, Sept. 15, 2022.
  43. Clements KC. Metoidioplasty. Healthline, Sept. 18, 2018.
  44. Liang F. Phalloplasty for gender affirmation. Johns Hopkins Medicine, n.d.
  45. Children's Health Defense Team. "Affirming" or harming? Hospitals' promotion of hysterectomies for girls elicits public outrage. *The Defender*, Aug. 31, 2022.
  46. Bruce LK, Morris MP, Swanson M, et al. Post penile inversion vaginoplasty clinical examination: considerations and techniques. *Plast Reconstr Surg Glob Open.* 2022;10(5):e4338.
  47. Pariser JJ, Kim N. Transgender vaginoplasty: techniques and outcomes. *Transl Androl Urol.* 2019;8(3):241-247.
  48. <https://littmanresearch.com/>
  49. Shrier A. When your daughter defies biology. *The Wall Street Journal*, Jan. 6, 2019.
  50. Berry S. Vanderbilt's gender clinic doctor: trans surgeries "make money for the hospital." *The Tennessee Star*, Sep. 21, 2022.
  51. Rose A. Vanderbilt transgender health clinic suspends gender-affirming surgery for minors. CNN, Oct. 9, 2022.
  52. Gooch K. Tennessee attorney general vows to investigate claims against VUMC transgender health clinic. *Becker's Hospital Review*, Sept. 21, 2022.
  53. Borrelli L. Transgender surgery: regret rates highest in male-to-female reassignment operations. *Newsweek*, Oct. 3, 2017.
  54. Weisner M. Federal health plans to expand gender-affirming care coverage for 2023. *Federal Times*, Oct. 7, 2022.
  55. Schlott R. "I literally lost organs": Why detransitioned teens regret changing genders. *New York Post*, Nov. 13, 2022.
  56. Ciancio S. What percentage of transgenders regret surgery? Human Life International, Jul. 7, 2021.
  57. Tucker Carlson: This should be a crime—it's dark and horrifying. <https://www.youtube.com/watch?v=ljimp0e10Fs>
  58. Dhejne C, Lichtenstein P, Boman M, et al. Long-term follow-up of transsexual persons undergoing sex reassignment surgery: cohort study in Sweden. *PLoS One.* 2011;6(2):e16885.
  59. Anderson RT. Sex reassignment doesn't work. Here is the evidence. The Heritage Foundation, Mar. 9, 2018.
  60. <https://le.utah.gov/interim/2020/pdf/00002340.pdf>
  61. Berry S. FDA: Thousands of deaths linked to puberty blockers. *Breitbart*, Oct. 2, 2019.
  62. Cooke R. Tavistock trust whistleblower David Bell: "I believed I was doing the right thing." *The Guardian*, May 2, 2021.
  63. Cretella M. Deconstructing transgender pediatrics. *The Academy Review*, Issue 1, June 2021. [https://www.jahlf.org/wp-content/uploads/2021/07/Online-Copy-of-The-Academy-Review-wecompress.com\\_.pdf](https://www.jahlf.org/wp-content/uploads/2021/07/Online-Copy-of-The-Academy-Review-wecompress.com_.pdf)
  64. Cretella M. I'm a pediatrician. Here's what you should know about a new study on transgender suicide. *The Daily Signal*, Sept. 18, 2018.
  65. worriedmom. The sterilization of trans kids: pesky side effect, or modern-day eugenics? 4ThWave-Now, Jan. 26, 2018.
  66. Bilek J. Who are the rich, white men institutionalizing transgender ideology? *The Federalist*, Feb. 20, 2018.
  67. Bilek J. The billionaire family pushing synthetic sex identities (SSI). *Tablet*, Jun. 14, 2022.
  68. Blaff A. Virginia Democrat to introduce bill to prosecute parents who refuse to treat child as opposite sex. *National Review*, Oct. 14, 2022.
  69. Emmons L. Exclusive: Father of 11-year-old speaks out as New York hospital, courts attempt to medically transition his child. *The Post Millennial*, Oct. 3, 2022.
  70. Maranon R. OK lawmakers offer millions to university hospital systems with transgender care restriction. *Fox News*, Sept. 28, 2022.
  71. Sutton S. Florida Department of Health pushes back against federal stance on child gender reassignment. *WPTV*, Apr. 20, 2022.
  72. Horsley J. The rise of the dream-state: trans agendas, gender confusion, identity & desire (part 1 of 3). *Auticulture*, May 31, 2017.
  73. Bilek J. Foundations are setting the transgender agenda and targeting children. *The American Conservative*, Jun. 1, 2021.
  74. Wise T. CDC's Q Chat site uses your tax dollars to target teens for sex changes, polyamory, even witchcraft. *CBN News*, Oct. 14, 2022.
  75. @LisaMacRichards. Bias, not evidence dominates WPATH transgender standard of care. *Canadian Gender Report*, Oct. 1, 2019. <https://genderreport.ca/bias-not-evidence-dominate-transgender-standard-of-care/>
  76. <https://www.forbes.com/profile/jennifer-pritzker/?sh=48c1a06f5808>
  77. Magrath WJ. The fall of the nation's first gender-affirming surgery clinic. *Ann Intern Med.* 2022;175(10):1462-1467.
  78. Dattaro L. Largest study to date confirms overlap between autism and gender diversity. *Spectrum*, Sept. 14, 2020.
  79. Kallitsounaki A, Williams DM. Autism spectrum disorder and gender dysphoria/incongruence. A systematic literature review and meta-analysis. *J Autism Dev Disord.* 2022 May 20.
  80. Rozsa M. Autism and gender dysphoria are linked, according to a study. *Salon*, Nov. 9, 2022.

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# Homeopathy Journal

## HOMEOPATHY AND HORMONAL BALANCE

By Anke Zimmermann, BSc, FCAH

Once upon a time. . . as some readers may know, I was kindly invited to speak at the 2022 Wise Traditions Conference in Knoxville, Tennessee. I was unable to attend, however, as I was refused entry into the U.S. for not being injected with the Covid jabs.

Instead, a little drama ensued at a certain Canada-U.S. land border crossing on my way to Seattle. I was pulled over by the guards and confronted by a heavily bearded, red-headed specimen of the male persuasion in his late forties, who proceeded to interrogate me with suspicious eyes as if I were an unscrupulous smuggler of dangerous contraband, and then angrily stormed outside to search my entire car and luggage with great zeal.

As I watched this exceptionally handsome man—there is a silver lining to everything—throw his little tantrum, I felt a mixture of curiosity, amusement and disbelief. Here I was, a sixty-year-old white female, driving a silver Toyota Matrix with a little pink ribbon attached to the antenna so I can find my oh-so-generic car in a parking lot; how much more threatening can it get?

Detained for over an hour inside the station, I overheard the other guards, all male, laughing about the various excuses people give for not getting the jabs or not having their documentation with them.

Little did they realize that I knew a little secret about the jabs and what the injections might end up doing to the guards' bristling, testosterone-fueled masculinity—but I'm getting ahead of myself.

### WHAT ARE HORMONES?

Hormones are chemical substances released by various endocrine glands in the body, which help to control and coordinate many bodily functions. Both our nervous system and hor-

monal systems are required to maintain an internal environment necessary for survival, including such niceties as body temperature, blood glucose levels and reproductive function.

The glands involved in controlling these and many other functions include the hypothalamus, pineal, pituitary, thyroid, parathyroid, thymus, adrenals, pancreas, ovaries and testes. These glands communicate with each other as well as with all our organs and cells in very complex and beautiful ways, not unlike musicians playing in a symphony orchestra, who listen carefully to each other but also are guided by a conductor.

Now, you may ask, where is the “conductor” in our body? In homeopathy, we would think of the vital force—the invisible life force or energy field—as the conductor. Homeopathic remedies always address this vital force, rather than any particular condition. However, hormonal imbalances can be part of distinctive symptom patterns, which can point to many fascinating homeopathic remedies. For the purposes of this article, I will mainly focus on imbalances involving the reproductive system, including premenstrual syndrome (PMS), abnormal menstrual cycles, menopause, masculinity—and the lack thereof—and the controversial topic of gender confusion or dysphoria.

### HORMONAL IMBALANCES

Several factors can have a negative impact on the delicate balance of our endocrine system, including environmental and natural toxins, nutritional factors and stress.

Many chemicals, called endocrine disruptors, may mimic or interfere with the body's endocrine system. They include ingredients used in plastics, such as bisphenol A (BPA) and phthalates, as well as dioxins, used in the production of herbicides and in paper bleaching, flame retardants, polychlorinated bisphenols, medications and more. These chemicals may contribute to reproductive impairment, including infertility, cognitive deficits, cancer and other negative effects.<sup>1-4</sup> Moreover, through epigenetic mechanisms, these environmental toxins may have transgenerational influence,<sup>5,6</sup> which may be contributing to human sperm counts falling by over 50 percent worldwide over the past fifty years.<sup>7</sup>

More recently, researchers have linked spike protein from coronavirus disease and the mRNA injections to endocrine damage in both men and women, including abnormal bleeding, miscarriages and infertility.<sup>8-10</sup>

Women are about 50 percent more likely to suffer from anxiety and mood disorders between puberty and menopause, and estrogen has been widely studied as being a contributing factor through its effects on neural circuits, neurotransmitter levels and the endocannabinoid system.<sup>11</sup>

Stress can affect hormonal balance and lead to disruption of the normal menstrual cycle.<sup>12,13</sup> Prolonged exposure to stress can lead to complete reproductive impairment with loss of ovulation and menstruation.<sup>14</sup>

#### SEPIA OFFICINALIS

The finding that homeopathic remedies could be helpful in addressing hormonal concerns dates back to the discoveries of Dr. Samuel Hahnemann (1755–1843), the founder of homeopathy. He had an artist friend who was quite unwell and unresponsive to the remedies the good doctor had already tried. One day during a visit, Hahnemann observed his friend dipping a paintbrush into some sepia ink (the ink of the cuttlefish) and then shaping the brush to a point with his lips. In a flash, Hahnemann wondered if the ink was inadvertently poisoning his brush-sucking friend; he proceeded to make a remedy from the inky juice and cured his friend—and the extremely valuable homeopathic remedy *Sepia* was born.<sup>15</sup>

*Sepia* is a fascinating remedy with a strong affinity for the hormonal system, and especially malfunctions caused by overwork and exhaustion. It is predominantly a female remedy and may be needed after hormonal changes such as following childbirth and during menopause.

Working women with young children who have become worn out and irritable from lack of sleep and too much responsibility are prime prospects for this remedy. The woman's PMS is out of control, her kids are too much, her husband has become just another annoying kid whose head she wants to bite off—and forget about sex; her libido is gone, and she does not want to be touched. Her mood may be as black and gloomy as the squid ink. The shimmering play of healthy emotions and creativity has been lost to emotional flatness and indifference, and during her period she may feel as if her uterus might fall out. She often feels better from hard exercise or dancing. *Sepia* can return a mother to her children and a wife to her husband.

In men, *Sepia* may be indicated for similar states—a general flatness, burnout with irritability, lack of motivation as well as low libido and possibly impotence.

#### LACHESIS MUTUS

*Lachesis mutus*, made from the venom of the giant South American bushmaster snake, is another fascinating homeopathic remedy with a colorful history. Constantine Hering, a student of Hahnemann's, became interested in venom remedies as potential armaments against rabies. While stationed in Surinam, South America, he obtained an injured bushmaster snake, fearlessly milked its venom onto some milk sugar and prepared it into a homeopathic remedy.

During the process, he accidentally inhaled some of the powder and fell into fever with delirium and manic excitement. He woke up the next morning feeling lucky to be alive. He immediately asked his wife: “What did I say and do?” As his faithful collaborator, she had taken excellent notes during that fateful night, which then gave us another wonderful homeopathic remedy, *Lachesis*! Intolerance to tight clothing around the neck is one of the important symptoms of this remedy. For the rest of his life, Hering could not tolerate tight collars.

*Lachesis* is almost the opposite of *Sepia*. Whereas *Sepia* is cold and lethargic, *Lachesis* is hot and excitable with intense emotions and smoldering sexuality. The Netflix series *Love Is Blind: Brazil* reminds me of *Lachesis*, with the contestants showing plenty of physical assets, dripping with bling, covered in tattoos, intertwining tongues at the least provocation; you get the idea!

Persons requiring the *Lachesis* remedy may

#### REMEDIES TO CONSIDER FOR HORMONAL IMBALANCES

Please note that many other remedies might be indicated in people affected by hormonal imbalances. It is always best to consult a professional homeopath for individualized advice.

**SEPIA:** Worn-out and exhausted from too much responsibility; superwoman, working women with children; too many children or children too close together; low or no libido; aversion to partner; better with hard exercise or dancing; after hormonal changes, childbirth, menopause; uterine prolapse.

**LACHESIS:** Hot and excitable; liable circulation, hot flashes; jealous, talkative; left-sided symptoms; left-sided ovarian pain; abnormal uterine bleeding, possibly associated with Covid vaccines; often worse after sleep.

**FOLLICULINUM:** Symptoms between ovulation and menses; pain around ovulation, ovarian cysts, polycystic ovary syndrome (PCOS); hormonal imbalance after oral contraceptives; any health problems due to oral contraceptives; loss of or lack of sense of self; ailments after domination by parents or partners or political forces.

**PULSATILLA:** Open, soft and malleable types; easily feels abandoned and forsaken; prominent remedy in PMS, menstrual disorders; disorders during pregnancy; may crave creamy foods, butter, ice cream.

**SILICA:** weakened constitution; bad effects of vaccines and other injections; may be helpful for spike protein removal; possibly helpful in hormonal changes due to Covid injections.

*Pulsatilla* is yet another remedy with a profound affinity for the hormonal system.

suffer from abnormal uterine bleeding, spotting, hot flashes during menopause and heart palpitations. Left-sided ovarian pain and ovarian cysts may point to *Lachesis* as well. This can be a good remedy for women with abnormal bleeding associated with the Covid vaccines. Other snake venom remedies may also be helpful for abnormal bleeding associated with Covid injections, as covered in a previous article of mine.<sup>16</sup>

Individuals taking *Lachesis* may be red-headed, and the remedy can also be associated with competition, jealousy, suspicion and even paranoia (maybe my overly suspicious, red-headed border guard needed it!). It may be indicated for hormonal turmoil caused by feeling threatened by a younger, prettier or more accomplished rival. The person wants attention and can become quite manipulative and even cunning, wielding sharp words to inject venom. They may use mockery, sarcasm and ridicule with great proficiency. The comedian Russell Peters personifies *Lachesis* to me. He literally makes a living by insulting his audience; it is both hilarious and disturbing to watch.

#### PULSATILLA NIGRICANS

*Pulsatilla* is yet another remedy with a profound affinity for the hormonal system. The remedy is prepared from the windflower, also known as meadow anemone or pasque flower. The name windflower suggests changeability, which is a prominent characteristic of *Pulsatilla* symptoms in addition to softness. It is primarily a feminine remedy, but when a man needs *Pulsatilla*, he is generally a more soft and gentle individual.

The person may be easily moved to tears and prone to feeling abandoned. Research has shown that women are about twice as sensitive to feeling abandoned as men,<sup>17</sup> which may be one reason this remedy is often helpful for premenstrual symptoms as well as for problems during and after pregnancy, when a woman may feel more vulnerable and more in need of support. She may weep easily and desire reassurance. She is open, malleable and easily influenced. In Caucasians, blonde hair and blue eyes may be more common for this type.

*Pulsatilla* is one of the main remedies for almost all forms of menstrual problems, from PMS and menstrual cramps to pregnancy-related disorders to menopausal hot flashes. The woman may be fond of creamy foods, butter, whipped cream and cheese, as well as ice cream and other cold foods. She may develop indigestion from fatty foods and pork.

#### FOLLICULINUM

A few months ago, I was contacted by the mother of a thirteen-year-old boy because he had developed a condition known as gynecomastia, the development of breasts in a male. This is usually due to a hormone imbalance between estrogens and androgens. It is most common in older, obese men because testosterone can be converted to estrone, a weak estrogen, in adipose tissue. That potbelly does more than stretch t-shirts; it also helps to grow breasts! Of course, that extra estrogen also reduces libido and may induce impotence.

The boy's mom was a student of homeopathy and had already tried a few remedies with

#### FDA (MIS)GUIDANCE THREATENS ACCESS TO HOMEOPATHIC MEDICINES [homeopathychoice.org/write-congress/#/26](https://homeopathychoice.org/write-congress/#/26)

In December 2022, the FDA finalized a guidance document categorizing all homeopathic medicines as “unapproved new drugs” and therefore “illegally” marketed. This does NOT mean that we will be losing access to all homeopathic medicines overnight. However, it DOES mean that the FDA is claiming authority—for the first time and through a policy document—that the agency can remove homeopathic medicines from the market at any time without notice.

Americans for Homeopathy Choice is pushing back! They have built a fantastic grassroots team—Homeopathy Action Team (HAT)—which is building relationships with members of Congress. Their goal is to introduce and pass a bill that will protect our long-term access to homeopathic medicines. Please consider signing up for their email and text alerts so that you can join the HAT team and get any important action alerts. For texts and emails: [Homeopathychoice.org/text](https://Homeopathychoice.org/text) or if you prefer just email: [homeopathychoice.org/free-membership/](https://homeopathychoice.org/free-membership/)



moderate success. The buds had retreated but reappeared a couple of times. Then she told me about the mood swings this young man had in addition to the breast buds, and I asked: “Have you ever taken the birth control pill?” Yes, the mom had taken the pill for about ten years before conceiving her son. This history made me think of the homeopathic remedy *Folliculinum*, which is made from oestrone, a synthetic form of estrogen. Her son took it, and the breast buds as well as the mood swings quickly resolved.

Synthetic hormones were discovered in the late 1930s, and by June 1961, the Food and Drug Administration (FDA) had approved oral contraceptives for human use.<sup>18</sup> Since then, hundreds of millions of women around the world have taken the pill, with many adverse effects on their bodies, their children’s bodies and the environment. Oral contraceptives work by suppressing ovulation, so that eggs are not released to be fertilized. The body is tricked into feeling that it is pregnant.

*Folliculinum* may be useful for many symptoms between ovulation and menses, including PMS with huge mood swings and excessive noise sensitivity, irritability, breast tenderness, nausea and headaches.<sup>19</sup>

There may also be pain and discomfort around ovulation, spotting, ovarian cysts and polycystic ovaries. Changes after being on the pill may be relieved with *Folliculinum*, such as the cycle not returning to normal and difficulty conceiving after being on the pill.

*Folliculinum* also can be helpful for women who have suffered at the hands of dominating or abusive parents or partners. There may be mental confusion with an inability to make decisions. These states are not surprising when we consider what artificial hormones are doing to the body—suppressing normal function and causing confusion. “Am I pregnant or not?” “Am I a woman or not?” “Why is no baby coming?”

A recent study examined how being on hormonal contraceptives affected the level of stress perceived by women during the Covid “pandemic.” Interestingly, women who were taking oral contraceptives during that time—or even those who had taken them in the past—reported increased distress during the pandemic relative to naturally cycling women and men.<sup>20</sup>

Could the dominating and suppressive effects of both the hormonal contraceptives and the world situation have been synergistic?

And could gender confusion and dysphoria be related to the use of oral contraceptives in the person’s ancestors, and/or perhaps related to residual effects of oral contraceptives in our water supply? If fish are any indication, the answer may be yes. Several reports have described intersex fish in waterways downstream from sewage treatment plants but not upstream.<sup>21</sup>

This is a conversation that needs to take place. And maybe children affected by gender dysphoria or confusion would benefit from *Folliculinum* before their bodies are permanently rearranged with more artificial hormones and surgery.

Melissa Assilem, a well-known homeopath who wrote extensively about *Folliculinum*, stated: “I have used *Folliculinum* with both girls and boys in their teenage years where the symptoms were feeling drained, slow and unable to identify with their selfhood.” Assilem further observed: “People who need it have no sense of personal authority and have never learned to say ‘no.’ They feel someone else is in control. *Folliculinum* can break the controlling link.”<sup>22</sup>

This may be an important remedy for our time.

## SILICA


*Silica* is a homeopathic remedy derived from silicon dioxide, found in nature as quartz, flint, sandstone and many other minerals. Silicon is the most abundant of all the elements in the Earth’s crust, next to oxygen. *Silica* as a homeopathic remedy is often used after vaccination as it can help to remove foreign substances from the body. Jeremy Sherr, a well-known homeopath, has reported very positive results from using *Silica* post-mRNA injections.<sup>23</sup>

A friend of mine told me that he had developed heavy perspiration from the slightest effort since taking his two Covid injections and a booster more than a year ago. In addition, somewhat embarrassed, he confessed that his testicles had shrunk significantly since then. This was not something I had read about anywhere, and despite asking several experts, I could not find any research on the topic. However, Dr. Ste-

Could gender confusion and dysphoria be related to the use of oral contraceptives in the person’s ancestors, and/or perhaps related to residual effects of oral contraceptives in our water supply?

phen Malthouse, an outspoken Canadian medical doctor and freedom fighter, kindly provided this input: “I do not have an article on hand, but the distribution study for Pfizer did show that the mRNA markers went to the testes where the spike proteins would create inflammation. That would account for shrinking of testes, as induration sets in. Histology of cardiac muscle after the shots does show significant fibrosis and loss of normal cells, as well as infiltration with spikes and lymphocyte reactivity in the region.”


Just as the Covid vaccine trials did not monitor women’s menstrual changes, men’s changes in testicular volume likely were also overlooked. That being said, *Silica* might be a helpful remedy in this circumstance.

To return to the story of the border guards, little did they know that the injections they obviously all took might have been wreaking havoc in their nicely padded pants while they were laughing at me and other Covid jab avoiders. And so, although I don’t wish anyone ill, a little mischievous part of me enjoys—just a little, tiny bit—the idea of the shrunken gonads of heavily armed men throwing tantrums that would make a three-year-old blush! 

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## REFERENCES

1. La Merrill MA, Vandenberg LN, Smith MT, et al. Consensus on the key characteristics of endocrine-disrupting chemicals as a basis for hazard identification. *Nat Rev Endocrinol.* 2020;16(1):45-57.
2. Sirohi D, Al Ramadhani R, Knibbs LD. Environmental exposures to endocrine disrupting chemicals (EDCs) and their role in endometriosis: a systematic literature review. *Rev Environ Health.* 2020;36(1):101-115.
3. Wen X, Xiong Y, Qu X, et al. The risk of endometriosis after exposure to endocrine-disrupting chemicals: a meta-analysis of 30 epidemiology studies. *Gynecol Endocrinol.* 2019;35(8):645-650.
4. Kortenkamp A, Scholze M, Ermiler S, et al. Combined exposures to bisphenols, polychlorinated dioxins, paracetamol, and phthalates as drivers of deteriorating semen quality. *Environ Int.* 2022;165:107322.
5. Anway MD, Cupp AS, Uzumcu M, et al. Epigenetic transgenerational actions of endocrine disruptors and male fertility. *Science.* 2005;308(5727):1466-1469. Erratum in: *Science.* 2010;328(5979):690.
6. Guerrero-Bosagna C, Skinner MK. Environmental epigenetics and effects on male fertility. *Adv Exp Med Biol.* 2014;791:67-81.
7. Levine H, Jørgensen N, Martino-Andrade A, et al. Temporal trends in sperm count: a systematic review and meta-regression analysis of samples collected globally in the 20th and 21st centuries. *Hum Reprod Update.* 2022 Nov 15;dmac035.
8. Lee KMN, Junkins EJ, Luo C, et al. Investigating trends in those who experience menstrual bleeding changes after SARS-CoV-2 vaccination. *Sci Adv.* 2022;8(28):eabm7201.
9. Clarke SA, Abbara A, Dhillon WS. Impact of COVID-19 on the endocrine system: a mini-review. *Endocrinology.* 2022;163(1):bqab203.
10. Zhang M. Endocrinologist forecasts more hormone-related diseases as spike proteins found to deplete endocrine “reserves.” *The Epoch Times,* Nov. 1, 2022.
11. Krolick KN, Zhu Q, Shi H. Effects of estrogens on central nervous system neurotransmission: implications for sex differences in mental disorders. *Prog Mol Biol Transl Sci.* 2018;160:105-171.
12. Ranabir S, Reetu K. Stress and hormones. *Indian J Endocrinol Metab.* 2011;15(1):18-22.
13. Cameron JL. Stress and behaviorally induced reproductive dysfunction in pri-  
mates. *Semin Reprod Endocrinol.* 1997;15(1):37–45.
14. Lachelin GC, Yen SS. Hypothalamic chronic anovulation. *Am J Obstet Gynecol.* 1978;130(7):825-831.
15. Hahnemann S. “Sepia” in *The Chronic Diseases: Their Peculiar Nature and Their Homoeopathic Cure.* Originally written in 1828 (retrieved from Homéopathe International, November 12, 2022). <http://homeoint.org/books/hahchrddi/sep.htm>
16. Zimmermann A. Homeopathy to help mitigate the effects of coronavirus “vaccines.” *Wise Traditions.* Spring 2022;23(1):53-59.
17. Gray J. *Venus on Fire, Mars on Ice: Hormonal Balance—The Key to Life, Love, and Energy.* Mind Publishing Company, 2010.
18. Kohn GE, Rodriguez KM, Hotaling J, et al. The history of estrogen therapy. *Sex Med Rev.* 2019;7(3):416-421.
19. Everett C. The homeopathic remedy: Folliculinum. Jul. 30, 2020. <https://cassieeverett.com/the-homeopathic-remedy-folliculinum/>
20. Brouillard A, Davignon LM, Fortin J, et al. A year through the COVID-19 pandemic: deleterious impact of hormonal contraception on psychological distress in women. *Front Psychiatry.* 2022;13:835857.
21. Sexton R. Estrogen pollution: a potential human-health disaster. Beyond Today Blog, United Church of God, Aug. 14, 2008. <https://www.ugc.org/beyond-today/blogs/estrogen-pollution-a-potential-human-health-disaster>
22. Assilem M. *Matrional Remedies of the Humanum Family: Gifts of the Mother.* Melissa Assilem, 2009.
23. Sherr J. COVID-19 Updates [webinar]. <https://tqfs.official.academy/>



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# Technology as Servant

## HYDRAULIC FRACTURING: TO FRACK OR NOT TO FRACK, THAT IS THE QUESTION

By James Kirkpatrick

By the mid-2000s, it looked to many as a certainty that the United States' days as a major hydrocarbon-producing power were in the rear-view mirror. The Malthusian predictions of Shell geoscientist Marion King "M. King" Hubbert seemingly had come to fruition. In 1956, he famously predicted that U.S. oil production would peak between 1965 and 1970, before beginning an irreversible and terminal decline regardless of price and drilling activity. The world would reach the same production plateau and terminal decline inflection point by the mid-1990s, according to Hubbert.

It should be noted that "peak oil" was not at that time a new concept. The first public decrees began when the Pennsylvania oil fields began to run dry in the 1880s. Similar flare-ups of peak oil alarmism occurred in the 1920s, the 1940s and the 1960s, and continue to the present day. Yet each time, the same combination of factors has proved these prognostications to be illusory. In fact, when an oil deficit results in high prices, high prices incentivize experimentation and technology development; then, new tools result in increased production, the shortage becomes surplus and prices subside. This pattern has repeated at least five times in the past one hundred fifty years.

### THE DEMAND-PRODUCTION GAP

In 2008, U.S. crude oil production had fallen to five million barrels per day (bpd)—representing approximately 5 percent of total global production—down about 50 percent from the Hubbert predicted peak of 9.6 million barrels per day in 1970. Production of crude oil's hydrocarbon cousin, natural gas liquids (NGLs), remained virtually unchanged at roughly 1.5 million bpd over this same time frame. (NGLs are molecules that are a gas at ambient conditions but a liquid when refriger-

ated or pressurized. These molecules—ethane, propane, butanes and pentanes—are produced from oil or gas, usually separated and sold as stand-alone products.) Combined production of liquid petroleum (crude oil plus NGLs) had fallen from 11.1 million bpd in 1970 to 6.5 million bpd by 2008.

During this time frame (1970–2008), U.S. consumption (demand) of liquid petroleum products increased from roughly fifteen million bpd to twenty million bpd, with the difference between demand and domestic production widening to almost fifteen million bpd. All of the difference was supplied through imports, some of it via interconnecting pipelines from Canada, but most of it via waterborne imports from the Middle East, Russia or the former Soviet Union (USSR), Mexico, Venezuela and West Africa. By 2008, OPEC's market share had risen to 45 percent of all global crude oil production, up from its nadir of less than 30 percent in the early 1980s. (OPEC market control in the early '80s was driven by several factors, including the 1979 Iranian Revolution, the Iran-Iraq War and a surge in production from Alaska's North Slope, the UK-Norway North Sea, West Africa and the USSR.)

The picture on the U.S. natural gas side of the hydrocarbon equation was no less bleak. In 2005, U.S. dry natural gas production averaged roughly fifty billion standard cubic feet per day (scfpd), declining about ten billion scfpd from the early 1970s. Note that comparing different units or forms of energy can be confusing, as solid-liquid-gaseous forms of energy are all measured differently. In energy-equivalent terms, fifty billion scfpd of natural gas works out to roughly 9.1 million barrels of oil equivalent per day (boepd).

Over that period, natural gas demand was growing. Environmental regulations had

By the mid-2000s, it looked to many as a certainty that the United States' days as a major hydrocarbon-producing power were in the rear-view mirror.

By July 2008—the high-water mark of the energy scarcity situation of the mid-2000s—the international price of oil had reached \$145 per barrel.

dent the “cheapness” of coal, and many utility providers had identified natural gas as the environmentally “cleanest” substitute for the much maligned coal. To counter the dynamic of falling production and growing demand, the U.S. had constructed, or was constructing, eight liquefied natural gas (LNG) import terminals, capable of regasifying almost ten billion scfpd of natural gas. It was expected that LNG imports would comprise 25 percent of U.S. natural gas demand by 2015, with likely supply coming from Qatar, Russia, Indonesia, Trinidad & Tobago and Algeria.

By July 2008—the high-water mark of the energy scarcity situation of the mid-2000s—the international price of oil had reached \$145 per barrel (\$175 per barrel in 2022 inflation-adjusted terms) and the U.S. natural gas price had reached \$12.70 per million BTU (\$75 per barrel in energy-equivalent terms—one barrel of oil equivalent equals 5.7 million BTUs). These record-level energy prices were driven by a multitude of factors, including stagnant production in the U.S., surging demand from China and India, and the fallout from the second Persian Gulf War. For the U.S., the situation looked particularly unappealing, portending a future where all incremental energy usage—and, by historical correlation, future GDP growth—would require “funding” in large part through imported energy from halfway around the world.

#### A NEW PARADIGM

As the paradigm of energy scarcity took hold in the mid-2000s and influenced the collective geopolitical conventional wisdom of the day, something transformative was occurring, literally and figuratively, just below the surface. A close look at official statistics started to show that, counterintuitively, U.S. natural gas production was growing, when all other hydrocarbon production in the U.S. was declining. From 2005 to 2008, U.S. dry natural gas production had increased from fifty to fifty-five billion scfpd, an increase of 10 percent. Most of this unexpected increase in production was coming from a new type of drilling and production technique from a previously discounted type of geologic formation. The new technique would come to

be known as “unconventional drilling”—and later, hydraulic fracturing or fracking—and the formation type, high-density rock, would be known as shale.

It helps to understand a bit about the geologic process that forms the basis of the modern oil and gas industry, a process that involves the continual movement of Earth’s tectonic plates. As the oil and gas conversion process occurs, it changes form into liquid and eventually to gas. Through geologic migration, these fluids travel upwards into porous rocks, usually sandstone or carbonates. These, along with sedimentary shale, become what is known as oil and gas “source rocks.” Eventually, some of this oil will migrate to the surface through “oil seeps” or be exposed through earthquakes and other plate tectonic movements. Every now and then, a much denser or non-porous rock, such as ionic salt or granite, forms or moves into place above the source rock, forming a seal—the caprock—that traps the oil and gas in place in what are called reservoirs.

The modern oil and gas industry involves the search for and exploitation of these ancient source rocks and the unique places where the source rocks’ organic bounty has been trapped in a geologic safe. For the first one hundred fifty years of the oil era (1850–2000), the name of the game in the oil industry was using geologic knowledge to find either the source rocks or the caprocks, drill thin vertical holes in the ground from the surface to the reservoir and liberate the oil or gas kept in place by the caprock. As an example, most of the major early oil discoveries in the U.S. occurred by drilling into salt domes that had formed on the U.S. Gulf Coast. Salt domes are the ideal caprock structure for oil and gas formations. But although the focus on identifying and accessing these reservoirs was the logical thrust of the oil and gas industry for the past century and a half, it does lend itself to a constant irritating question: would it not be more efficient to directly drill and tap the original source or sedimentary rock?

This had been a curiosity of geologists and petroleum engineers since the beginning of the oil industry but always thwarted by a couple of inconvenient geologic truths. The first is that marine sedimentary shale layers tend to exist

in the ground as a type of layer cake, long-wide geological layers that are relatively thin, measuring only a couple of meters thick. A vertical straw wants to find glasses of oil, not baking sheets of oil. The second impediment was the fact that shale rock is dense and brittle, lending itself to a problem of low porosity. Even if you can access the source rock, oil and/or gas doesn't flow well because there aren't enough microscopic channels in the rock to facilitate good flow characteristics. Based on these two factors, for one hundred fifty years, shale formations represented unrealized potential but never resulted in much actual production from an oil and gas perspective.

#### THE BIRTH OF HYDRAULIC FRACTURING

Now let's return to that little mystery that started showing up in U.S. energy data circa 2005. Despite U.S. energy production reaching a modern low, natural gas production had started to unexpectedly grow. The answer to the mystery was that someone had cracked the shale code, and that someone was a gentleman named George P. Mitchell.

Most oil industry historians consider Mitchell an American businessman, energy entrepreneur and the grandfather of the American shale revolution. Born to Greek immigrants in Galveston, Texas in 1919, Mitchell started his own oil and gas drilling company, Mitchell Energy & Development, after graduating from Texas A&M in 1940 with a degree in petroleum engineering. However, most people have never heard of Mitchell Energy. Until the early 2000s,

Mitchell was more well known as a real estate developer and the king of the master-planned housing community, having developed the one-hundred-thousand-person suburb of Houston known as the Woodlands.

Being a small, under-the-radar, independent domestic producer—with a founder-owner who clearly saw the long game—likely contributed to Mitchell Energy's success in cracking the shale code. Unraveling the riddle of shale was not characterized by a single miracle breakthrough, however; rather, it involved a decades-long process of expensive trial and error, ultimately solved by integrating several existing technologies along with a couple of special refinements—such as the “special sauce” described below. The development process was also characterized by frequent fits and starts that heavily correlated with oil and gas price fluctuations. When the price rose high, everyone became interested in unlocking shale's perceived bounty; when the price inevitably collapsed, interest in shale subsided. This cycle repeated itself several times across the 1970s through the 1990s.

Though Mitchell Energy ended up as the company credited with the key breakthroughs, in reality, many companies had a hand in and contributed to the winning combination of technologies. Nonetheless, Mitchell Energy did have singular advantages, including being both owner-founded and privately owned (that is, not accountable to shareholders) and having an owner-founder who was patient. Said owner-founder, Mitchell, also put all his eggs into one basket—that basket being the only one the small company could afford. Its affordability derived

Most oil industry historians consider Mitchell an American businessman, energy entrepreneur and the grandfather of the American shale revolution.



Catherine Austin Fitts of Solari, Inc., in her keynote speech at our conference, inspires us to seek financial independence.

from the fact that no one else wanted the “basket” in question, a five-thousand-square-mile collection of shale rocks sitting about two miles below the Dallas-Fort Worth area and encompassing much of Northeast Texas—a formation known as the Barnett Shale.

Geologists had recognized the hydrocarbon potential of the Barnett Shale formation for many decades, with geologic estimates of natural gas in place of an astonishing thirty trillion standard cubic feet (approximately 5.5 billion barrels of oil equivalent). However, the challenge was that both the top and bottom of the formation were comprised of thin, dense (that is, impermeable) layers of shale rocks. Shale made up both the source rock and the caprock, with no reservoir rock in between. These types of formations are known in the industry as “tight rock” or “tight oil/gas” formations, and the United States happens to have the most of them in the world, geologically speaking. The tight rocks of the Barnett Shale remained unsolved and economically unviable until the 1979 Iranian Revolution spiked the price of global hydrocarbons. This gave George Mitchell his first—but not last—window of opportunity.

Mitchell Energy drilled the first well in 1981, a conventional vertical drilled well with a first-generation nitrogen foam “frack,” but it did not produce commercially viable quantities of hydrocarbons. And so began the Moby Dick

phase of the Mitchell Energy story in the Barnett Shale, with Mitchell playing the Ahab role, always convinced that he could get more out of his Barnett Shale wells and the seemingly fruitless quest to turn shale into a whale.

Over the next twenty years, Mitchell and his team experimented a lot. Through a scientific process of trial and error, they ended up cracking the shale egg by combining several technologies into each well: horizontal (or directional) drilling, downhole drilling and hydraulic fracturing.

## HORIZONTAL OR DIRECTIONAL DRILLING

Originally known as “slant” drilling, horizontal or directional drilling has existed as a technique for enhancing oil production and has been used in the oil patch since at least the late 1870s. At that time, it started out as several degrees off vertical, but by the 1940s, it had advanced to full horizontal or ninety degrees through advancements in specialty steel manufacturing, rotary drill bit technology and operator technical expertise.

The first truly horizontal oil well was drilled in Texon, Texas in 1929. This technology then saw sporadic usage across the globe for the next fifty to sixty years, but was considered niche and only practiced by a handful of specialty drilling operations.

## THE DRILL BIT

A suite of technologies developed since the 1950s greatly enhanced the control, maneuverability and diagnostic capabilities of the “drill bit.” This, in combination with the computer processing revolution, transformed the data sophistication of the oil patch. I’ve personally heard the technological leap best described through the following anecdote: “Today if you buried a house two miles underneath Texas, we have the drilling rigs to ring the front doorbell.”

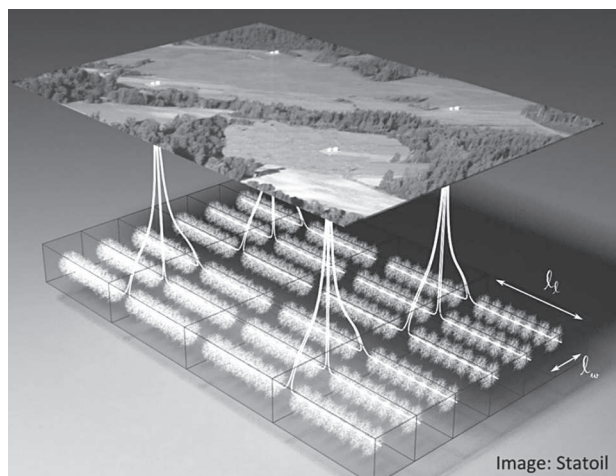


FIGURE 1. Perforated pipes below the surface of the ground.

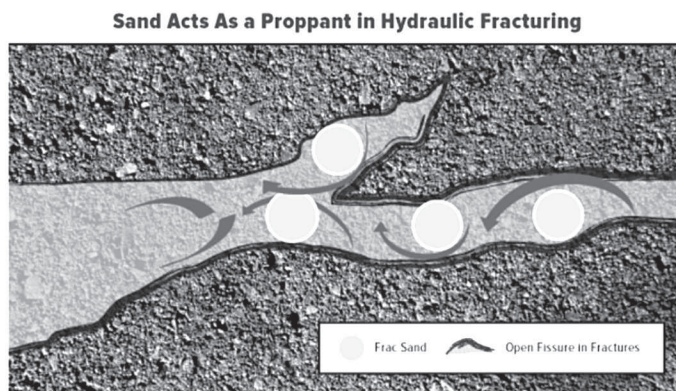


FIGURE 2. Sand acts as a proppant in hydraulic fracturing.

## HYDRAULIC FRACTURING

Using nitroglycerin and other explosives at the bottom of oil wells to fracture the rocks and “enhance” oil production is a drilling technology with a historic lineage dating back to the 1860s. However, modern hydraulic fracturing was not developed until the 1950s. It received a major boost during the energy crisis of the 1970s and was further refined in subsequent decades.

Today, after the horizontal drill pipe is laid, the horizontal pipe is perforated or punctured at set intervals (see Figure 1). At the surface, a slurry mixture is prepared of 98 to 99 percent fresh water and sand; this is also known as “proppant” (see Figure 2). This mixture is pumped to extremely high pressures (greater than 2500 psig) and then injected into the well. The high-pressure water-sand mixture acts as a hammer when it reaches the rock face two miles below the earth, fracturing the rock apart and then creating long fissures that allow the oil and gas to flow. The sand functions as a wedge to keep these newly created fissures open to allow the oil and gas to continue to flow. After this initial fracturing, often done in up to twenty-five to fifty stages along the horizontal section of the pipe, the hydraulic fracturing is stopped. Once this happens, flow is reversed; the fracking fluid is reversed to the surface, followed by oil and gas from the newly created artificial well. Although 99 percent of the hydraulic fracturing solution is water and sand, the remaining 1 percent is probably the most controversial element of the process, as it involves a mixture of chemicals. The chemicals perform two main functions as well as a host of secondary ones.

The first main function is to increase the viscosity of the initial hydraulic water punch in an effort to make the initial hammer strike as forceful as possible. The second primary function involves an additive that aids in uniformly distributing and keeping the sand in suspension. The main additive used to do this is guar gum, made from the guar plant found in India, which commonly also is used as a processed food stabiliz-

ing agent. Other additives in the slurry include corrosion inhibitors, freeze point depressors and a viscosity-reducing agent that allows the water slurry to spread farther and create microfissures after the initial high-viscosity punch.

## THE SPECIAL SAUCE AND THE SHALE BOOM

After fifteen years of experimenting in the Barnett Shale, in 1997, a Mitchell Energy engineer named Nick Steinsberger suggested adding the “special sauce” to create what is known today as “slick water hydraulic fracturing.” Engineers had already experimented with this recipe and had achieved some success in the adjacent Cotton Valley sandstone of East Texas. This proved to be the final step in cracking the shale code, as it not only reduced costs by 25 percent but also increased gas production enough to recoup the costs of drilling the well.

Using the techniques pioneered by Mitchell Energy, production from the Barnett Shale exploded, increasing sixteen-fold between 2000 and 2008 to almost four billion scfpd, making it the largest onshore gas-producing field in the U.S. at the time. And as the global economy descended into a full-blown financial crisis in late 2008, the lessons learned by Mitchell Energy began to spread throughout the industry. All of a sudden, throughout the United States and Canada, the new techniques developed in North

TABLE 1. U.S. energy production comparison, 2008-2022.

SHALE REVOLUTION IMPACT ON US ENERGY PRODUCTION				
	UOM	2008	2022	% Change
Crude Oil Production	Million BPD	5.0	11.9	138.0%
NGL Production	Million BPD	1.8	5.9	227.8%
Natural Gas Production	Million BOEPD	10.1	17.9	77.2%
Natural Gas Production	Billion SCFPD	55.2	98.1	77.7%
Total HC Production	Million BOEPD	16.9	35.7	111.2%
US Refined Product Demand	Million BOEPD	19.5	20.4	4.6%
Crude Oil Imports	Million BPD	9.8	6.3	-35.7%
Crude Oil Imports Ex / Canada	Million BPD	7.8	2.8	-64.1%
Crude Oil Exports	Million BPD	0.03	3.5	11566.7%
Refined Product Exports	Million BPD	1.8	5.9	227.8%

Source: US Energy Information Agency (EIA)

Texas were prompting a second look at shale resources (see Figure 3). Moreover, companies rapidly adopted what had started as a process for extracting natural gas from shale rocks for other shale formations that were primarily oil-bearing. These included companies such as Continental Resources (led by Harold Hamm) and EOG (Enron Oil and Gas), a spin-off subsidiary that ended up being the only surviving component of the now-defunct energy giant.

In the fifteen years since the experimentation and tinkering pioneered by Mitchell Energy in the Barnett Shale, the breakthroughs have fundamentally changed the U.S. energy landscape. (See Table 1 for a comparison of U.S. energy production in 2008 and 2022.) In fact, other than the Internet, fracking may be one of the technological developments that has brought the most benefit to the U.S. economy and individual citizens over the past twenty years. The doubling of U.S. energy production has also had profound impacts on the global economy at large.

In broad terms, as a result of the shale revolution, the U.S. has transformed from having some of the most expensive energy in the world to some of the cheapest. This has reduced the U.S. petroleum trade deficit by upwards of three hundred billion dollars per year. It also saves households fifteen to twenty billion dollars per year in energy costs. Other benefits include the creation of two to three trillion dollars in stock market value for the companies directly involved in shale production; the addition of fifty to seventy-five thousand high-paying manufacturing jobs to the U.S. economy; and the creation of a manufacturing chain to support unconventional drilling.

There are also a number of other second- and third-order benefits attributable to the U.S. shale revolution. First, the U.S. has become a large exporter of crude oil, turning U.S. oil pricing from import parity to export parity and improving the cost basis (that is, the price that consumers pay

at the pump) for all U.S. refining and U.S. refined products, excluding the Northeast and the West Coast.

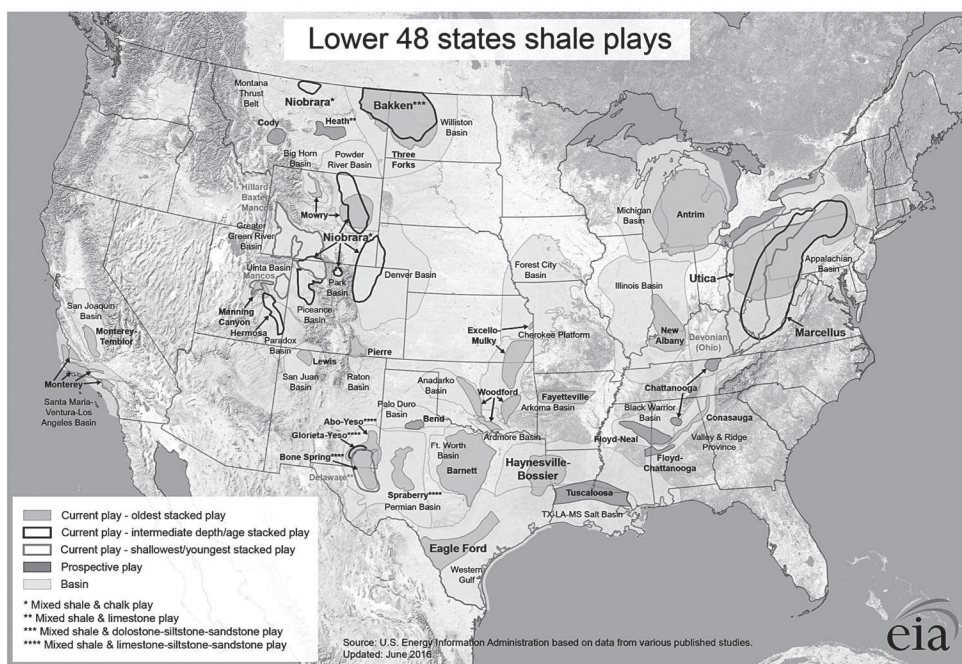
Second, the U.S. has become the largest exporter of hydrocarbons in the Western Hemisphere. Almost all of Latin America is dependent on U.S. product exports to some degree.

Third, the shale revolution resulted in the construction of ten to twenty world-scale petrochemical projects in the U.S., driven by affordable energy and cheap molecules. Prior to the shale revolution, all of these would have been constructed in the Middle East or Asia.

Fourth, this same effect has been felt in U.S. fertilizer production. As many new facilities have been constructed, U.S. production has increased by 50 percent, and imports of fertilizers have fallen in half.

Finally, the shale revolution dramatically reduced U.S. energy production CO2 emissions to pre-1990 levels. This is because the oversupply and low price of natural gas drove many utilities to replace coal-fired power generation with natural-gas-fired generation; this was done on the basis of cost, versus environmental compliance (see Figure 4).

FIGURE 3. Location of shale formations in the continental U.S.





## THE CHALLENGES

Despite overwhelming economic, environmental and energy security benefits, the process of tight oil drilling—hydraulic fracturing—is not without its detractors and issues. Most of the negative attention directed against hydraulic fracturing comes from the hard environmental movement; although their tactics tend to shift around, their core philosophy is that any increase in hydrocarbon production is undesirable. Because unconventional drilling techniques increase hydrocarbon production, the process is, by their definition, bad.

As is often the case in such matters, the reality is a bit more nuanced and complicated. The issues with hydraulic fracturing generally fall into one of four categories: (1) cementing failures at the well head; (2) “flowback” issues; (3) flaring or venting issues; and (4) traffic issues. All of these are solvable and manageable with existing techniques and practices.

The second category refers to the storing and processing of the “flowback” that occurs after the hydraulic fracturing is complete, when the flow reverses from down the well back to the surface. Management of “flowback” and the issue of well head cementing are the two challenges that have garnered the most media attention. If these are not done properly, both can result in groundwater and aquifer contamination. Hydrocarbon contamination into groundwater is what results in the highly circulated Internet

videos of individuals lighting the water coming out of their sink faucets on fire.

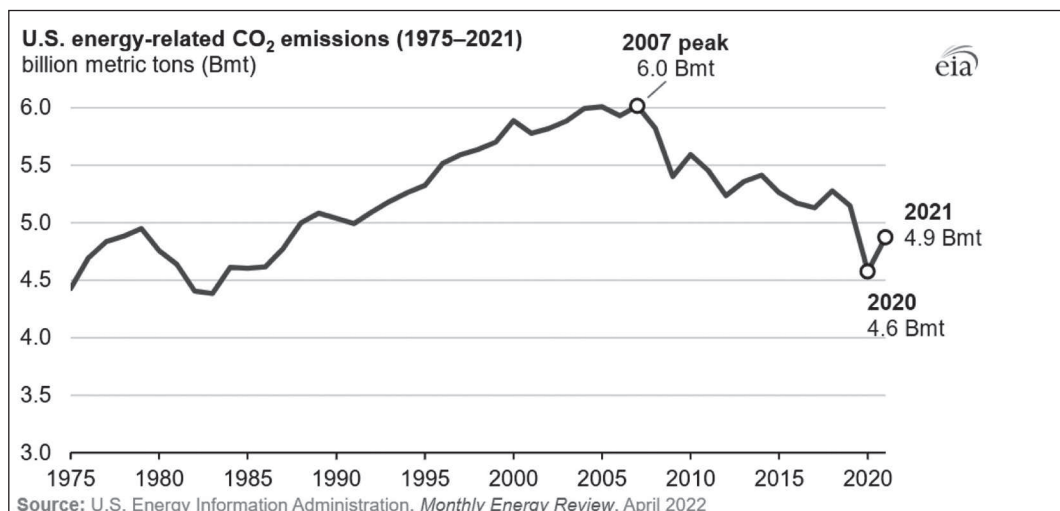
In 2008, the U.S. had eighteen thousand oil and gas wells that produced more than one hundred barrels per day of oil. (The total number of oil and gas wells in the U.S. producing at least one barrel of oil per day was a much larger number, closer to nine hundred twenty-five thousand.) By 2020, this number had increased by over 300 percent to almost fifty-seven thousand oil and gas wells producing more than one hundred barrels per day. More wells being drilled results in more holes having to be cemented. Although all oil and gas wells require cementing, the sheer increase in cementing jobs with all the new wells increases the probability of a poor cementing job and some type of surface-level contamination (see Figure 5).

The third issue refers to flaring or venting after the well is complete. When a well is hydraulic fractured and production begins, the resulting hydrocarbon flow is often (almost always) mixed flow, containing crude oil or condensate (very light crude oil), volatile liquids (NGLs) and gas. Each type of flow requires similar but separate infrastructure to deliver the hydrocarbon type to market. When natural gas prices were low (2008–2020), the infrastructure cost to deliver the gas to market often did not meet economic thresholds and as such was often burned directly at the well head using a burner known as a flare. Price and federal- and state-level environmental restrictions often drive recovery of this gas eventually, but not initially.

Although a well itself has a relatively small above-ground footprint, the process of drilling and hydraulically fracturing the well comes with a lot of traffic and can give rise to local congestion. Often, the process involves heavy trucks that are hauling pipe, cement, water and equipment to the well head, as well as drilling rigs and the hydraulic fracturing pressure pumping trucks. All of this can create a large increase in local traffic, often on single-lane, poor-quality and remote roads.

On the other hand, one of the reasons that hydraulic fracturing was

FIGURE 4. U.S. energy-related CO<sub>2</sub> emissions (1975–2021).



able to take off so quickly was that most of the resource basins are located in low-population-density areas, many outside of western Pennsylvania and the Dallas-Fort Worth area, where the initial environmental problems occurred. West, East and Central Texas, North Dakota, northern Colorado, Wyoming and Arkansas are all low-population-density areas (see Figure 3).

### A DIFFERENT BUSINESS MODEL

There are a couple of additional points to make regarding unconventional drilling practices, which are fundamentally different from traditional hydrocarbon wells in several respects. First, individual unconventional wells are relatively small. Good wells produce only one to two thousand barrels per day, whereas good traditional wells typically produce in excess of ten thousand barrels per day. Second, individual onshore unconventional wells have very little geologic risk but a much higher degree of completion or manufacturing risk. Finally, unconventional shale wells have much steeper decline rates than traditional wells; in other words, the loss of production over time is greater in unconventional than traditional wells.

All of this is to say that the business model around unconventional production is fundamentally different than the traditional oil business model. It requires drilling many times more wells, each of which produces less. The key to success is repeatability, making the process

more akin to a complex manufacturing process than a geologic treasure hunt.

### WATER CHALLENGES

In addition to well head cementing challenges, the large number of wells being drilled and the use of water in the drilling process leads to the second main engineering-environmental challenge with the hydraulic fracturing process—managing the water cycle around wells. In addition to using a large amount of water, hydraulic fracturing has the second-order challenge of managing that water when it returns to the surface, post-hydraulic fracturing (see Figure 6).

The average hydraulically fractured well uses about two million gallons of water (or about three Olympic-sized swimming pools per well). This scale of water usage is a big number—a real resource challenge—and is prone to heavy political and environmental scrutiny. Ten thousand hydraulic-fractured wells per year would result in an increased water demand of twenty thousand million gallons of water per year. This represents about 5 percent of total U.S. fresh and saline water withdrawals, estimated at three hundred fifty to four hundred thousand million gallons per year by the U.S. Geologic Service.

In the early days of hydraulic fracturing, companies procured the water from the local or regional municipality, and often initially stored the polluted hydraulic flowback water in open-air pits before it was vacuumed up and sent away for disposal. Disposal consisted of either dropping the contaminated water off at a regional or municipal facility for treatment, or drilling a water well and disposing of the water underground. All of this created numerous knock-on-effect problems. Temporary open-air pit storage of hydrocarbon-contaminated water can lead to weathering (usually scents and odors) and, through rainfall or poor containment, can leak and mix with drinking water sources. Further, the need to continually drill wastewater disposal wells is not only expensive but can lead to micro-quakes, as wastewater wells are often

FIGURE 5. Hydraulic fracturing well head.

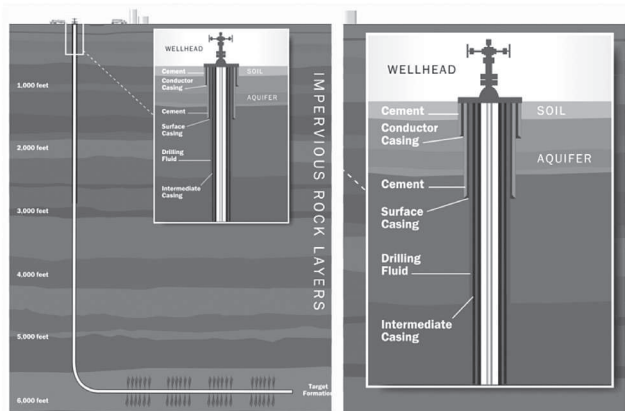
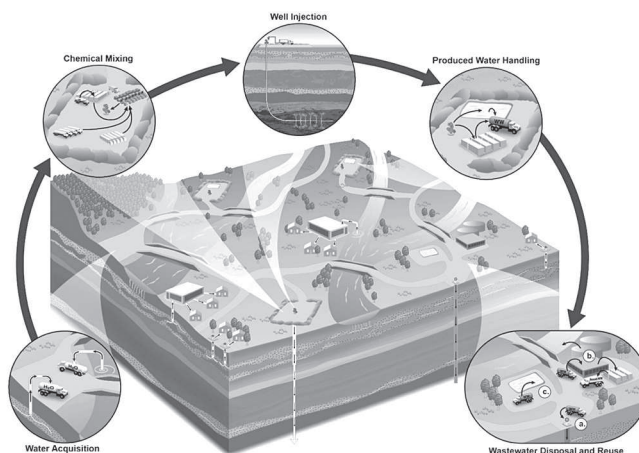


FIGURE 6. Hydraulic fracturing and water management.



## WHY THE U.S.?

A frequent question asked about the U.S. shale revolution is, why did this unique suite of technologies get combined in the U.S., and why has the U.S. become the epicenter of shale drilling? Similar resource basins exist across the planet in places such as Russia, China, Argentina, Australia, Libya and Central Europe. The answer is often reductively simplified to “U.S. ingenuity and entrepreneurial spirit,” but this obscures the actual factors, which are in my opinion more interesting. They include the following:

**MINERAL RIGHTS LAWS:** The U.S. is one of the few places in the world where private landowners possess the mineral rights underneath their land. (This excludes federally owned land.) The importance of this is that it entitles private landowners to receive production royalties when companies drill oil and gas wells on their property, which in turn has provided a powerful steroid to the rapid proliferation of unconventional drilling. This has allowed private landowners, particularly in Texas and North Dakota, to financially participate in the rapid increase in production, but also has provided the acreage necessary for the shale drilling revolution.

**TECHNICAL EXPERTISE:** With few exceptions, the U.S. is the unquestioned leader in drilling expertise and engineering know-how. This is based in part on the extensive history of U.S. drilling activity. Since the start of the Oil Era (1850), roughly half of all the oil and gas wells drilled in the world are located in the U.S. It should not be surprising that most of the global oil service companies (Baker Hughes, Halliburton, National Oilwell Varco) are U.S.-based companies.

**CAPITAL ALLOCATION:** Unconventional drilling is capital-intensive, requiring a sizable up-front investment and tolerance for slower cash recovery as the well produces. This requires a stable and efficient capital formation system willing to take risks on potential capital recovery. Similar to the private-public hybrid model regarding mineral rights, the U.S. has such a system, and it is probably the most successful capital allocation system the world has ever known. Many of the other countries that have similar shale resources don't have anything close to the U.S. capital markets.

**FRESH WATER:** The U.S. has it, but many other prospective shale drilling basins do not. The lack of water significantly changes the economics of shale drilling. China offers the prime example of the freshwater constraint in that China has large potential shale basins and high technical expertise, but is among the most water-constrained regions in the world.

**INFRASTRUCTURE:** In the same vein as the U.S.'s prolific drilling history, the U.S. had the largest oil and gas transportation and processing infrastructure in the world even before the shale revolution. Much of this infrastructure had been under-utilized, so it proved invaluable in absorbing the first ten or so years of shale production growth, and it greatly reduced the capital requirements to bring shale production to market. As an example, almost all of the LNG import terminals that were constructed in the mid-2000s to regasify foreign LNG have been repurposed as LNG export terminals in the past ten years, allowing export of surplus U.S. natural gas. The conversion of import to export terminal reuses the marine berthing and storage assets; as such, facilities can be converted to an export terminal at a fraction of the cost of new greenfield construction.

drilled to a shallower depth than hydrocarbon wells. These micro-quakes are real, resulting in many media headlines and open speculation that hydraulic fracturing causes earthquakes, but they also have been heavily sensationalized. The earthquake phenomena seem to be closely associated with wastewater disposal wells, and they have happened only in large volume in Oklahoma (in other words, they are geologically specific). Most importantly, these micro-quakes are small. They register a negative number on the Richter scale—about one-one millionth the power of your typical San Andreas fault line movement—and are akin to the force of an

eighteen-wheeler passing you on the highway.

The oil drillers are well aware of the water challenges associated with unconventional drilling. Similar to the trial-and-error roots of the U.S. shale revolution and the excessive cost focus associated with any intensive manufacturing process, the shale drillers have evolved to meet the challenges of their environment. Today, a large percentage of the water used in hydraulic fracturing is subject to a closed recycle loop, particularly as drilling has been concentrated in a handful of geographic locations and as common infrastructure is built out. In the closed water loop model, shale drillers extract fresh water from purpose-drilled aquifer wells. They store flowback water in environmentally sealed tanks and send the flowback water to purpose-built water treatment plants that remove the water contaminants and recycle the flow for the next hydraulic fracturing job. The amount of recycled water being used varies by production and

by basin. At present, it is typically about 40 to 50 percent recycled, up from 10 to 20 percent ten years ago.

#### A QUESTION OF TRADE-OFFS

The shale drilling revolution in the U.S. has produced fantastic results, leading to a greater than 100 percent growth in U.S. hydrocarbon production in just over a decade. However, this rapid increase in energy production comes with trade-offs. Shale drilling through hydraulic fracturing is water-, equipment- and resource-intensive, and requires drilling a tremendous number of holes in the ground. If not done properly by responsible operators, water and air contamination hazards can occur and have occurred, though in small numbers relative to the number of wells drilled. Moreover, when issues arise, they tend to be resolved privately between the driller and the landowner, not in lawsuits or major legal actions. Hydraulic fracturing has never produced an accident equivalent to the Exxon-Valdez incident.

Nonetheless, social media—often pushed by the no-hydrocarbon contingent—have helped accidents achieve widespread notoriety. Those critics almost always fail to mention the widespread benefits received by the U.S. population at large from the doubling of domestic hydrocarbon production. Regions like New York, which have banned hydraulic fracturing, do not have a large amount of shale resources and were never going to be a center of drilling activity to begin with.

If you had asked any post-WW2 U.S. President, “Would you trade 5 percent of U.S. water for a doubling of U.S. energy production?”, every one of them would have taken that trade without blinking, even the more recent green-sympathetic presidents. Another way to think about the shale drilling revolution and the resource trade-off is to imagine a world where the key breakthroughs led by Mitchell Energy either failed to occur, failed to propagate or were halted mid-development by the no-hydrocarbon crowd. In that world, U.S. energy dollars would be sent overseas to

finance imports, rather than staying at home in the form of American company profitability and jobs. That world would also offer fewer high-paying, non-college-tuition manufacturing jobs in the U.S., would likely require (or lead to) an increasing level of military interventionism in the Middle East, would mean that almost all energy prices globally would be higher, would expose the U.S. to even more global energy volatility (such as the Russia-Ukraine War) and would cause head-to-head U.S.-China energy competition for the last available barrel. (Casual readers can make the connection; since 2008, U.S. interventionism in the Middle East has subsided substantially when compared to the 1990–2008 period.)

This, however, is not the world in which we live. I, for one, am grateful that the great U.S. strategic weakness of the 1970s to 2000s—imported foreign energy dependence—has been flipped on its axis. That great four-decade macroeconomic exposure has now become a fundamental geopolitical strength of the U.S., and it is all a byproduct of rocks no one wanted, persistence and a pinch of American ingenuity.



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

#### MAJOR SHALE-PRODUCING REGIONS OF THE U.S.

The major shale-producing regions of the U.S. can roughly be split into primarily oil, wet natural gas or dry natural gas. They include the following:

##### CRUDE OIL

- Permian: West Texas
- Bakken: Northwest North Dakota

##### WET GAS, NATURAL GAS AND NATURAL GAS LIQUIDS

- Eagle Ford: Central Texas
- Niobrara: Colorado and Wyoming
- Woodford: Oklahoma
- Utica: Eastern Ohio

##### DRY NATURAL GAS

- Barnett: North Texas
- Haynesville: East Texas
- Fayetteville: Arkansas
- Marcellus: Western Pennsylvania and West Virginia

# The Wise Traditions Pantry

## STEPPING OUT OF THE BOX: SWITCHING TO NUTRIENT-DENSE FOODS SAVES MONEY

By Crystal Labrake

It is a common scene in every grocery store: carts filled with processed foods. These items are generally quick and easy to heat and serve, and appear to be the cheapest types of food to purchase. Processed foods were a staple for my family throughout my childhood and continued until my early adulthood. Then, a friend taught me to cook using Rachael Ray's cookbooks. Five years later, another friend introduced me to the Weston A. Price Foundation, and now I take those same convenience-type meals and make them nourishing by cooking them from scratch using nutrient-dense foods.

With my large family, many people comment about how expensive my food budget must be because we choose to eat a Wise Traditions diet. My usual response is that processed foods are more expensive than homemade, nutrient-dense foods due to the direct negative impact on health. As food prices rise and more people try to cut costs, it seemed like the perfect time to assess the financial difference between processed foods and from-scratch meals. My goal was to create a monthly food plan, incorporating meals that could be made with either readymade processed-food or real-food ingredients, and compare the totals.

### MAKING A MEAL PLAN

I selected meals from my YouTube channel so that anyone who wants to try to cook from scratch for thirty days can use my how-to videos to cook each meal. Each of the meals had an equivalent processed-food option, and all of the meals could be made ahead of time as freezer meals for busy families. I calculated the meals' cost for a family of four, with breakfast, lunch and dinner all covered within the plan.

For breakfast options, the meals I chose were pumpkin oatmeal bake, pancakes, egg skillet and sourdough waffles. For dinners, the

selected meals were pizza pockets, Rice-A-Roni, black bean quesadillas, old-fashioned scalloped potatoes, chicken wild rice soup, barbecue sourdough skillet and beef stroganoff.

### CALCULATING THE TOTALS

For each recipe, I wrote down the needed ingredients and then created a complete grocery list for one month's worth of meals for a family of four. Next, I used the current prices at Walmart to calculate the grocery list's total cost for four different shopping categories: (1) 100 percent processed foods; (2) 100 percent unprocessed but non-organic foods; (3) 100 percent unprocessed foods but purchasing 50 percent organic ingredients; and (4) 100 percent unprocessed and fully organic. For the fourth category, Walmart did not offer all of the items on my shopping list in organic versions, so I also shopped at Azure Standard ([azurestandard.com](http://azurestandard.com)) and our local farmer's market.

The total cost to make a month's worth of meals using 100 percent processed foods came to \$480.54, or around \$120 per person per month. For budget comparison purposes, I tried to make sure the calculation was based on the number of boxes of processed food required to yield the same quantity as when making the equivalent recipe from scratch.

The next three categories all used the same ingredients, but differed in quality according to the proportion of non-organic versus organic. For these meals, I also used proper preparation methods, soaking or fermenting all grains and seeds. Learning how to prepare grains properly is one of the easiest steps you can add to your daily routine, no matter whether you are purchasing organic or non-organic grains. Meals made with properly prepared grains will fill up your family faster using less food, and they will be more nutrient-dense.

The total for the second category—from-scratch meals made from non-organic ingredients—came to \$345.68, or around \$86 per person per month. This number was the first big shocker because it proved that processed-food meals are more expensive than the same meals made from scratch.

When I calculated the cost of the same shopping list while buying 50 percent organic items, the results also were surprising, again adding up to less than the 100 percent processed-food shopping list. The total came to \$455.73, or approximately \$114 per person per month. This proved that meals made with 100 percent processed foods are more expensive than making the same meals using ingredients that are 50 percent organic. Of note, the cost difference between making the meals from scratch using 100 percent non-organic ingredients and making the meals from scratch

with ingredients that were 50 percent organic was only \$28 more per person per month.

Finally, when I took the same shopping list and shopped 100 percent organic—using a combination of ingredients purchased at Walmart, Azure Standard and a local farmer’s market—the total was \$623.45 or around \$156 per person per month. The difference between purchasing all organic versus 50 percent organic ingredients was around \$42 per person per month.

The totals for each category and the financial differences between categories were eye-opening! These are great statistics to have in mind when speaking to individuals about choosing to cook from scratch versus using processed foods, and also if you know someone who is considering starting to purchase organic foods.

## MEAL PLANNING

No matter which financial category your shopping habits fall into, there are some tips to keep in mind when incorporating homemade, nutrient-dense foods into your budget. First, one of the most effective budget savers is meal planning. Meal planning eliminates the urge to grab convenience foods or eat out at restaurants because you are unsure what to cook for dinner. The most cost-effective way to create a meal plan is to choose seven dinners and multiply all of the ingredients times four, which will create four weeks of dinner meals.

Another big budget saver is to take those recipes and make the serving count large enough to have leftovers for the next day’s lunch. This eliminates the need to purchase additional items to make things like sandwiches, wraps and other quick lunch items.

When choosing meals, try to select options that use some of the same ingredients—like sour cream, cheese or pantry staples like rice. This will allow you to buy these items in bulk, which is very cost-effective. Selecting breakfast meals like oatmeal bakes, pancakes, egg skillet and

MENU	COST PER MONTH FOR A FAMILY OF FOUR			
	100% Processed	Unprocessed, non-organic	Unprocessed, 50% organic	Unprocessed, 100% organic
Pizza Pockets	\$94.36	\$27.24	\$41.64	\$58.01
Rice-A-Roni (with chicken added)	\$47.04	\$36.30	\$39.89	\$77.25
Black Bean Quesadillas	\$48.56	\$41.17	\$43.85	\$63.97
Old-Fashioned Scalloped Potatoes	\$52.48	\$46.72	\$72.50	\$81.23
Chicken Wild Rice Soup	\$52.32	\$33.32	\$35.95	\$64.23
Barbecue Sourdough Skillet	\$43.20*	\$66.96	\$76.32	\$97.59
Beef Stroganoff	\$54.08	\$30.19	\$31.09	\$46.91
Pumpkin Oatmeal Bake	\$16.15	\$18.37	\$29.61	\$27.89
Pancakes	\$16.73	\$9.61	\$38.04	\$32.10
Egg Skillet	\$44.16**	\$18.44	\$25.78	\$44.97
Sourdough Waffles	\$11.46	\$17.36	\$21.05	\$29.30
<b>Total (and Per-Person) Cost</b>	\$480.54 (\$120.13)	\$345.68 (\$86.42)	\$455.73 (\$113.93)	\$623.45 (\$155.86)

\*Hamburger Helper chosen as a processed alternative because sourdough skillet are not sold in a box.

\*\*Egg burritos chosen as a processed alternative to the egg skillet meal.

waffles are all great choices because they can be made ahead of time and stored in the freezer; then, you simply warm them up for a quick, convenient and nourishing breakfast.

Once you have completed your meal plan, you can create a detailed shopping list. Combining ingredient totals allows you to purchase ingredients in bulk and have on hand all of the ingredients needed to make the selected meals.

### TRACKING FOOD COSTS

Saving your receipts can be an easy way to keep track of your current food costs. As you look through your saved receipts at the end of the month, take note of ingredients that could have been bought in bulk to save more money. Keeping a current price list will also help you select meals with more affordable ingredients to stay within your budget.

### BUYING IN BULK

Great items to buy in bulk include things like spices, dairy products like cheese, flour and grains. Moreover, opting to swap pasta dishes out for rice can make those meals more cost-effective. For example, organic brown rice is usually around three to four dollars a pound, whereas sprouted noodles are typically five to six dollars per pound. You can properly prepare the rice and even ferment it for added nutrition!

### STICK TO THE LIST


Before your first purchase, make sure to double-check your list. Last-minute and impulse items are the quickest way to blow a food budget. Spending just an extra fifteen dollars per week will add up to seven hundred eighty dollars per year of extra money spent on food items that were not necessary.

If you do buy extra snacks or make last-minute purchases, highlighting those items on your receipts can hold you accountable for the money

you spend in excess of the budgeted amount.

If purchasing food from a grocery store or big-box store, one strategy to keep non-essential purchases to a minimum and only buy what is on the list is to order online for curbside pickup.

### BUYING LOCAL

Most food items in large grocery stores travel thousands of miles from the original farms where they were grown and harvested. These foods will be more expensive and less nutrient-dense than the same foods purchased fresh from local farmers. Another benefit to purchasing fresh, local food is that you will be consuming foods that are in season and, therefore, in abundance, which means better prices! If you need help finding real food, get in touch with your local Weston A. Price Foundation chapter leader. In the meantime, I hope this article helps you achieve the best possible health. 

*Crystal Labrake (caballowhisper@hotmail.com) is the WAPF chapter leader for Yankton, South Dakota. For more information and access to over one hundred sixty videos teaching how to make nourishing, from-scratch, kid-approved meals, visit her YouTube channel Abundantly Blessed Homestead: youtube.com/results?search\_query=abundantly+blessed+homestead.*

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### INSPIRING SPEAKERS



Some of the many wonderful speakers at Wise Traditions 2022: Tom Cowan, MD, explains what doesn't make us sick and what does make us sick; Steve Campbell talks about cattle genetics; and Austin Durant demonstrates a recipe for lacto-fermentation.

# Wise Traditions Podcast Interviews

INTERVIEW WITH DAWN EWING

SHOULD I GET A ROOT CANAL?

Wise Traditions



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](http://holistichilda.com)) and follow her on Instagram: [@holistichilda](https://www.instagram.com/holistichilda).

HILDA LABRADA GORE: Dr. Dawn Ewing is the executive director of the International Academy of Biological Dentistry and Medicine (IABDM) and the author of *Let the TOOTH Be Known*. Reminding us that teeth are living organs, Dawn explains why it’s important to proceed with caution before any dental procedure, including root canals. She goes over what’s involved in a root canal procedure and why root canals, along with other hidden sources of infection, could be making you sick. She also discusses why conventional dentistry misses the mark when it comes to understanding how the teeth relate to the entire body, through meridians. Finally, she reviews the work Dr. Price did on root canals and describes how this valuable work has contributed to holistic and biological dentistry. Dawn, you had a patient come and see you who had tremors. Tell us the story.

DAWN EWING: This lady was referred to me from another office. In my practice, I use electrodermal screening (EDS) [a technique that measures the flow of energy, also known as bioenergetic stress testing]. Trying to test with her tremors was difficult to do with EDS, but we managed to get through it. What I found was an area where a tooth had been root canaled, and it was creating an electrical disturbance for her. She went back to a biological dentist, and she and the dentist agreed that they would remove the tooth.

She asked if I would be there the day of surgery, so I arranged to be there. On that day, I was drawing blood on her. Even that was difficult because her tremors were so strong. What was interesting to me is that the moment the tooth separated from the jaw itself—and it wasn’t even out of the oral cavity yet—her tremors stopped cold. I waited for a second, and then I tapped on her. I said, “Your tremors stopped,” which made the dentist and the assistant take notice. And then we all said, “Wow, that’s weird.”

I have seen it only once before in a child with a stainless-steel crown. The child had seizures that were not controlled with prescriptions. When the stainless-steel crown was removed, the seizures stopped. In the case of the woman with the tremors, I can’t tell you whether it was the metal crown on her tooth, or the toxins from the root canal, or the fact that the root canal was providing a dead space for electricity that can’t go through. She saw her neurologist and her rheumatoid specialist. What is interesting is that after eight weeks, she was off all prescriptions and she still had no tremors.

I wish that kind of outcome for every one of our patients. We can never promise anything, but moments like that keep a biological dentistry office going—and I mean “going” from the standpoint that we put in an incredible number of hours to further our education beyond what we got [in school] so that we can help people who feel like there’s no place for them to go. They’ve been told, “Just deal with it.”

HG: There is such a connection between our dental health, our oral health and our whole body’s health.

DE: All of your teeth go through different meridians, which are electrical connections that are invisible, but not imaginary. That’s important for people to understand. Many years ago, I heard the expression, “I’d give my eye teeth for that.” I didn’t know what it meant, even though when I started off in the dental world, I learned that the eye tooth is a cuspid. It has long, strong roots. I thought that expression meant, “I’d give one of my most stable teeth for that.” Now I know that the eye teeth are actually connected to the gallbladder, the liver and the eye. Who knew? Somebody knew, but it wasn’t me and it wasn’t anything I was taught in school. I learned it in my postgraduate integrated medicine studies.



HG: You said many biological dentists spend a lot of time furthering their education. How can you get this information if it isn't taught in regular dental school?

DE: It involves going through additional courses. The IABDM offers courses where we try to educate not just dentists but the staff as well. It's important that the dentists know about it, but if the staff doesn't know, it can become confusing for patients when they call and ask questions, and the receptionist says, "I don't know anything about that. I don't know anything about meridians." We certify everybody in the office and take them through information about fluoride, mercury toxicity, meridians, problems with root canals, cavitation—all kinds of stuff!

HG: My hope for this show is that it will educate those who are unfamiliar with these topics. But I want to back up, because sometimes the first time we hear about a root canal is when we're in the dentist's chair as a patient, and they're telling us, "You have an infection; you need a root canal." What is the general cause or reason given for root canals?

DE: You named one, which would be an infection called an abscess, where the nerve inside the tooth has died. There's gangrenous tissue. The way it tries to get out is to go through the tip of the tooth, whether it's a top tooth or a bottom tooth. That then creates pressure in the jaw, which translates into discomfort.

A second reason is that decay actually gets into the nerve of the tooth. When the dentist is removing the decay, if decay gets into the nerve, if they close it up, it's going to abscess soon. The dentist will usually suggest a root canal. It could also be because of trauma. The trauma might be that the dentist drilled too quickly or heated the tooth up. It could be that there was blunt trauma from a beer bottle hitting somebody in a front tooth, or trauma from a car accident. It could be from grinding one's teeth at night, traumatizing the tooth so much that it dies and the nerve dies. It could be because of pain.

A lot of times what people don't understand is that you can get "referred pain" [pain felt at a site distant from the site of origin]. You could have a toothache that is not because of the tooth at all. If you keep going back to the dentist and saying "This tooth hurts," the poor dentist

doesn't know what to do other than kill the tooth by doing a root canal—removing the nerve and the blood supply—so that your toothache goes away. But often, the toothache doesn't go away because the tooth is not the primary cause of that toothache; it's referred pain from something on that meridian that is causing the pain, or maybe it's another tooth hitting it, and it's causing pain for that tooth—but it's another tooth that is coming up or down because of an infection.

Root canals are also done, oddly enough, where people just want a perfect smile. A dentist will say, "I can make all your teeth nice and straight, and I can do it in one visit. We are just going to grind down all your teeth, and some of these we're going to grind so small that we are going to have to do root canals, and then we are going to crown them all, but you will look gorgeous when we are done." Sometimes even healthy teeth get root canaled in the name of a perfect smile. It's sickening.

HG: Some celebrities have had that done. It's so unfortunate—and literally sickening. One of the issues you and many biological dentists have with root canals is that they are not health-giving; rather, they are health-deteriorating,

DE: First, let me back up. I'm not a dentist. I started off in the dental world as a dental hygienist and then gave birth to a son who was autistic, and I could not figure out why because I don't have any fillings. I ended up going back to school to work on a PhD, and that introduced me to the world of naturopaths, so I went back to school for that. Ultimately—because I feel like an eternal student—I ended up with another

## Wise Traditions



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PhD in integrative medicine, which blends the world of dentistry and medicine together to look for root causes. No pun intended on that, but a lot of times it is a root or a dental issue.

HG: Speaking of the root cause, you've given us some reasons dentists might suggest we get a root canal. As patients, sometimes we act on the recommendations because we don't know any better. We think, "They are recommending a root canal. Many people have had one; why not do it?" I understand from my own research and other interviews that leaving a tooth that is dead in the body negatively affects the whole body. Will you explain that?

DE: Yes. First, let's make sure that you understand that a tooth is a living organ. An organ has its own lymphatics, nerve and blood supply. Think of it this way. You brush your teeth at night before you go to bed, and you run your tongue over your teeth, and they feel nice and slick, but what do they feel like when you wake up the next morning? It's slimy, and they stink because a tooth detoxifies while you sleep. It pushes its waste through the tubules of the tooth to the outside to be discarded. It's like what we do when we poop, so I call it "tooth poop."

When you are talking about an organ, imagine that I tell you I'm going to disconnect your heart, liver or kidney, and I'm going to let it sit there. Your heart is not beating anymore, but it is there. That would not be conducive to life. Is it still alive? No. I disconnected it. We are taught in school that we tell a patient that we are going to remove all of the flesh in the tooth, and that we are going to sterilize it. It is not possible, but that's what we are told. There will still be flesh in there, but we regurgitate what we are taught to the patient. Very well-meaning dentists are saying only what they were taught in school. If they haven't gone on to further their education, then they are still misinformed and promoting bad information. Things change in medicine. Once, we didn't know about *H. pylori*. There is a lot that has completely changed in dentistry and medicine.

HG: The root canal procedure is intended to clean out this tooth—this tooth that is posing a health problem with infections or other issues. But the issue is that they leave it in the body. Is that right?

DE: That is part of the issue. It's twofold. First, there is still flesh inside the tubules and there is no way to clean them out. You can't ozonate it; you can't laser it. It's still there. Envision that you have a dead cat on your kitchen countertop, and it starts to decay and ends up with maggots on it. I don't want maggots on my dead cat, so I ask someone to come in and ozonate it. All the maggots fall off, but two weeks later, I end up with new maggots.

What's going to happen with the tooth is you have dead flesh. You can't interfere with God's plan. There is dead flesh there. Bacteria were put on this planet to scavenge dead flesh. The bacteria end up in your body. The bacteria do not require a blood supply in order to move. If I bury a soup bone in the ground, bacteria will find the marrow in that soup bone and clean it out. There was no blood supply in the dirt.

The bacteria get inside your tooth and multiply in the dark, moist, warm environment. They start to be prolific. When you bite down on that tooth, there is so much bacteria in there that it pushes out through the end of the tooth, through little microfractures in the tooth, to the rest of the body in areas where we do have a blood supply, such as in the jaw bone itself. All of these bacteria are one issue.

For me, it's an electrical disconnect. If you have a lamp that works while it's plugged in, and then you cut the cord, the cord could still be plugged in but the lamp is not going to turn on. Let's say I make a phone call for an electrician, and he is on his way, but before he gets there, my dog poops on the cord right where the break is. It's not the bacteria in the dog poop that is the

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issue, it's the electrical disconnect. Your body is designed by its maker to deal with issues. Imagine picking up a phone to dial 911, and you don't get a signal. You are going through the motions, but you are never going to end up with an ambulance there.

HG: In our body, as you said, there are meridians where there are networks of electricity that are running from certain teeth to certain organs. They are communicating back and forth. If there is a "disconnect," as you are describing, because some of a tooth's flesh has been removed and the rest remains there, it is short-circuiting the system. What can that result in?

DE: Not enough electricity is getting to other needed areas. You could have a tooth that is causing a problem for your body. It could be as severe as cancer, or it could be as minor as constipation. Or vice versa, you could have a health issue that causes a problem for a tooth. For instance, I was taught years ago if you got decay, I should shake my finger at you and tell you that you are ignorant. "You don't know how to brush and floss. Let me show you how." But after all of my postgraduate education, now I look at what meridian the tooth is on where you have decay. If I start to see two or three teeth, and those are the only areas where you have decay, then I'm going to ask you questions like, "Do you poop twenty minutes after every meal?" "What? No, I poop twice a week." That's not good. It could be that the organ is not allowing enough electricity to come to those very specific teeth. The question stands, "Why do you have decay?" We can fix the decay, but if we have not gotten to the cause of the decay, then you are set up for new decay. People already hate going to the dentist.

HG: I think there is also a disconnect in our understanding that oral health affects the overall health of the body. This is where Dr. Weston A. Price comes in. Are you familiar with his work, and particularly with his work related to root canals? What were his conclusions?

DE: I am very familiar with his work because we reference it often. He was able to demonstrate repeatedly—we are not talking about once,

but over and over again—the organisms inside these root canaled teeth with the toxins that they exude. He realized that some of the toxins that come off are thioether and mercaptan, which are gases that come off of dying tissue and were nerve gases used in the world wars. If you are talking about a top tooth that has been root canaled and these gases are coming off, it's very close to the brain. He was able to demonstrate that those toxins spread bacteria throughout the body and can cause a host of diseases. It is only in the last ten or fifteen years that the dental industry recognized that particular bacteria can be directly related to cardiovascular disease—and they think that they came up with that! It's such a joke, because Weston Price was doing this research in the 1920s—about a hundred years ago.

HG: I read about an experiment he did—keep in mind that this was a different era—a man had kidney trouble which was related to a particular tooth. Dr. Price took that tooth out, and I believe the man's issues resolved. He put the tooth under a rabbit's skin to see what would happen, and the rabbit got kidney issues and died. He took that same tooth, cleaned it up and put it under another rabbit's skin. The same thing happened. The kidney was related to that tooth.

DE: And related to the toxins that were in there. Nowadays, we have a great test through a company called DNA ConneXions (dnaconnexions.com); most biological dentistry offices will offer that test for patients. When a root canaled tooth is removed, we are able to send it off and find out what bacteria, viruses, fungi or parasites are living inside that tooth. Like I said, when the patient chews and exerts pressure on that tooth, filled with bacteria, some of it is going to gush out into healthy areas that have blood, and the blood can then carry the bacteria to other areas of the body.

I used to have an infectious disease doctor in Houston. Every time she was going to amputate somebody's leg because of osteomyelitis in a knee, she would send them to me, and I would find a root canal that was an issue. She thought she had come up with this theory on her own. I applaud the fact that she was at least looking at it.

If you are talking about a top tooth that has been root canaled and these gases are coming off, it's very close to the brain.

When the patient chews on that tooth, filled with bacteria, some of it is going to gush out into healthy areas that have blood, and the blood can carry the bacteria to other areas of the body.

People need to know that Dr. Price was washing this tooth with soap and water each time. It's not that he was just sticking the same grungy tooth under the rabbit skin. It was done thirty different times in rabbits. Years later, you have George Meinig—a past president of the American Endodontic Association who was a root canal doctor in charge of the organization of root canal doctors—who came upon Dr. Price's research and then repeated it. He found out, "This is not good."

HG: You were saying earlier that conventional dentistry does not acknowledge that root canals are a problem. Why is that?

DE: Here in the United States, we are taught to save the tooth at all costs. If a tooth comes out, they believe, another tooth will start to tip your entire jaw and your bite will be off. Here we are all about cosmetics; we would have you believe that you are going to fall apart and die [if we remove the tooth]. Other countries take out teeth that are infected, and the people don't die.

I was trained to save the tooth at all costs. I went to the University of Texas Dental Branch, and we didn't learn anything about blood work. It was when I went to school to be a naturopath that I learned about blood work. There, I am looking at someone's blood work, and I think, "I don't understand, this person's neutrophils are high and their lymphocytes are low." Obviously, they have a bacterial infection, but I have ruled out urinary, upper respiratory and sinus infections, and for the life of me, I can't figure out where the bacterial infection is. In those moments when I'm quiet—which is not often—a still voice in my head says, "Ask them if they have any root canals." I ask, and they certainly do. I could literally timeline their lab tests; the blood work looks great until a particular year, and from then on, there was this bacterial infection. When I ask, "When did you get it done?" I find a perfect match. There was a tooth abscess and then a root canal, but it never removed the bacterial infection.

Often, these people are living with chronic low-grade bacterial infections. Many are prone to diabetes, and the chronic infection can make their hemoglobin A1C go up. They don't really

have diabetes, but their hemoglobin A1C is so high, that's what their doctor knows to tell them. "Your hemoglobin A1C is fifteen. That's crazy. You're diabetic." When you have those root canaled teeth removed and clean up those infections, their hemoglobin A1C goes to five.

It's like a woman who has gestational diabetes. She has gestational diabetes because her pancreas cannot keep up with her weight and what is going on with her body. When the baby is delivered, she loses weight, and nobody marks on her chart, "By the way, she's diabetic." It gets forgotten. Our body is designed to tolerate a lot, but these chronic low-grade infections are something your body is dealing with every day.

HG: My concern is for the person reading this who thinks, "I had a root canal. Now what?"

DE: I don't like for people to just blatantly take out teeth. You will find a dentist who will want to take out a tooth, and most are conditioned not to, so they will argue with you, "Let's send you to an endodontist and get it retreated." Dentists who are willing to take out a tooth, will more than likely put an implant in. There are a host of issues with implants as well. You need to see a functional physician or an integrative physician. Dentists are trained to do a specific job, which has to do with the teeth.



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They could take out a root canal tooth, but they are just going to drop something else in. When you place a titanium implant, it is very similar to putting a fork in an electric socket and bending it around, sticking it in the bottom part. It could short out that circuit in your home; in the body, it can short out the meridian. When you place a zirconia implant, it's like having a stalled car in one lane of traffic when there are eight lanes. There's still one lane blocked. It's not as big a burden, but it is a burden.

Often, these people have multiple teeth on the same meridian that have died because they have never addressed the root issue and it has caused teeth to die. When they start putting in implants, now they have electrical disconnects. Think of that implant as one of those little plastic things you stick in an outlet so your kids and grandkids don't put a penny in the outlet. It is glued in permanently because your implant doesn't come in and out.

I often have to discuss with a patient the importance of having the physician be the one to say, "I see that you have eight teeth missing. Coincidentally, they are all on the same meridian. You have issues with this meridian. I'm not going to allow you to have implants at all. We are going to go with a removable partial, or we are going to ask to look at bridgework until we get you healthy enough that you can give up a little bit and then have an implant placed in healthy bone." There are so many things that are involved with a good implant. One is having good vitamin D status. A dentist doesn't check things like that. Get your physician involved, but not a traditional physician, because they don't get it. They don't get this information in school. It's all postgraduate stuff.

HG: What about the person who hasn't had a root canal yet, but whose dentist has suggested it? What are the alternatives?

DE: Why are they suggesting it? Is there an active infection that's documented that maybe you don't feel? Is it because they want to crown a tooth and put a bridge in, and they need to remove a lot of tooth structure in order to do that? What are your options? You have to evaluate what reason they give. Sometimes, it's referred

pain, and they don't know what else to do, and you're complaining. That's what they were trained to do. It might be that you go to see a holistic MD who says, "You have a thyroid issue, and this tooth is related to the thyroid." If you only remove this tooth, another tooth that happens to be on the same meridian is going to start hurting. Or is the tooth dead? If it's dead, there is no "Lazarus"; we have not figured out a way to rejuvenate a tooth that is dead.

There are times when I will suggest a root canal. For instance, take the example of a young woman who is in a car accident; she breaks off a front tooth and her wedding is next Friday. It would be more traumatic for her to have a tooth missing for her wedding images than to have a root canal and some cosmetic work done to get her through that time. Afterwards, however, we know we are going to reevaluate and schedule her for whatever is required.

HG: It sounds like it's going to take some stepping back and assessing your overall health before going ahead with any procedure.

DE: I recently presented a case that was a good example. A gentleman who was almost fifty had never had decay in his life. All of a sudden, he has a tooth that has abscessed, and another tooth that has a cavity. They are on opposite sides of his mouth—one is on the top and one is on the bottom—but they are on the same meridian. When I finished doing testing, six of the eight teeth that were on the thyroid meridian showed that the thyroid was a huge block preventing electricity from going to specific teeth. I said, "What's going on with your thyroid?" At first he said "Nothing," but then he said, "That's not true. Before Covid, probably in December 2019, my doctor tried to tell me there was something going on. I think he said there was a nodule, but I haven't followed up to have it checked out." I'm thinking, "He probably has thyroid cancer because it had to be something huge that would disconnect energy that significantly." If you have made it to age fifty and you've never had decay, chances are you are going to make it through the rest of your life, short of maybe having a stroke and not being able to brush and floss. I gathered all the information so that I could show

Often, these people have multiple teeth on the same meridian that have died because they have never addressed the root issue and it has caused teeth to die.

it to very conventional people. Again, we can take out the tooth or root canal it, we can fix the other area of decay and send him away, but we are doing him a disservice if we don't get him in the hands of a physician who understands the connection. It takes a team approach.

HG: It also takes seeing people who aren't in the conventional system, and especially in the conventional dentistry system. Mercury, for example, is a known toxin, but it's been used for decades to fill cavities. Fluoride is in our toothpaste and in our water, ostensibly to prevent tooth decay, but it's a neurotoxin. It could be that the conventional dental community is mistaken about root canals as well.

DE: It comes back to what you are taught in school. Going to a state-run university, I expected everything that I was being taught was the gospel, that it was true and factual, and that there was scientific backing. However, there is very little scientific backing on root canals. Very little research has been done on them and how they affect the body. Sometimes, there is research done that gets squashed. For instance, Boyd Haley was involved with doing research showing the toxicity of the materials that are placed inside the tooth, only to have his company bought out by an undisclosed person for a large sum of money. He was excited, only to have the new owner completely destroy all of the research. He came to find out it was the company that was dealing with the making of the materials that were being put in teeth because they found out that his research was not going in their favor. It was interesting talking to him. He's got a major chip on his shoulder about that entire process and how it went down.

HG: They bought it to wipe out what he was finding.


DE: Correct. We are taught something, and we need to go in with open eyes and say, "What I know now as the truth could change." Trust me, it's going to change, and sometimes very drastically—one hundred eighty degrees. Years ago we were told, "Eggs and butter are bad. Eat margarine." Look at where we are now. Eggs are good and butter is great. It's all about the people you hang out with. I have also learned that when you are reading, even when it's research material, you have to ask, "Who was doing the funding?" A lot of times, the numbers get manipulated. And the researchers are hired by somebody, and they are backed by a particular company. You can twist anything and get it on PubMed.

HG: Speaking of studies, we were talking about resources earlier. Can you share a couple of books people might read to open their eyes about dental health?

DE: They can go to our website (IABDM.org). We've got lots of podcasts and things there where we try to educate both dentists and lay people. I also wrote a book, *Let the TOOTH Be Known*. Dr. Blanche Grube wrote a great book, *Chew on this. . . but don't swallow*, that is about mercury. Felix Liao has written several great books about the airway, with the most recent one being *Licensed to Thrive*. When I started in dentistry,

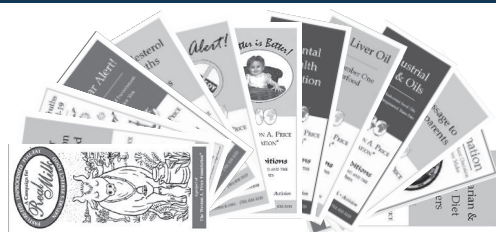
we were taught to take out bicuspids in an effort to push your kids' teeth back quicker and have them have a straight bite. God thought their jaw should be so long, and we decided it should be shorter. We have created an entire generation of people who have sleep apnea and snore because their tongue can't fit in their mouth. The book by Liao is a great book. Then there is a brand new one, *The Garbage Collector: Root Canals, Disease and What the Dental Profession Refuses to Acknowledge*, by Robert Gammal, a dentist in Australia. It's a great reference book. Everybody should have it; especially biological offices should have it.

HG: If a person could do just one thing to improve his or her health, something that may or may not be related to dental health, what would you recommend?

DE: I'd love to say something like, "Take care of your teeth." I think if there's one thing, it's to breathe. We forget to breathe. We also don't breathe correctly, unless we take yoga classes or voice lessons. We just don't give enough credence to breathing. 

*This was Wise Traditions Podcast episode 395.*

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# All Thumbs Book Reviews

***Irreversible Damage: The Transgender Craze Seducing Our Daughters***  
By Abigail Shrier  
Regnery Publishing

When independent journalist Abigail Shrier published *Irreversible Damage* in 2020, the reaction from the legacy media was identical to the reaction that greeted Robert F. Kennedy, Jr.'s *The Real Anthony Fauci* the following year: resolute silence. In some influential corners, there were actually demands for censorship and book banning. Even so, *The Economist* (hardly known for its bold stance on social issues) rated *Irreversible Damage* one of the “best books of the year,” and active grassroots promotion by parents who had witnessed the transgender craze “up close” turned it into a quiet bestseller.

Shrier traces these events in a brief 2021 foreword to the paperback edition, while pointing out that “additional confirmation that the book’s claims were correct” keeps on coming, including of her principal assertion that the majority of teens involved in what she calls an “epidemic of trans identification” are now girls.

Shrier admits that she was not planning on entering the world of “transgender politics” when she wrote a free speech article for the

*Wall Street Journal* a few years back titled “The Transgender Language War,” but when readers—parents of daughters caught up in tumultuous gender identity crises—began contacting her with their stories, her journalistic curiosity was piqued.

In addition to Shrier’s lively prose, one of the features that makes *Irreversible Damage* a riveting read are her efforts (to the tune of almost two hundred interviews) to understand the “trans” story from multiple vantage points. She shares not just the perspectives of unhappy daughters and their parents, but also of other key players in the transgender ecosystem—for example, YouTube “influencers,” therapists and school officials. Nonetheless, the drama at the book’s core is a family drama—one of shocked and traumatized parents and often high-achieving daughters suddenly become both literally and emotionally unrecognizable.

In one of the book’s later chapters, Shrier shares stories of young women who regret their “trans” detour—“detransitioners” who have taken the time to reflect on the intense all-or-nothing pressure that urges instant life-changing medical intervention, a force that many of them deem “cult-like.” One of Shrier’s respondents thoughtfully remarks, “There are varying de-



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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.
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# All Thumbs Book Reviews

... there are “vanishingly few gatekeepers,” and little to no sense of caution and restraint among the doctors and other professionals who offer these interventions.

degrees of dysphoria, but there are not varying degrees of treatment. . . . [W]hy is it for trans, the first move when somebody has dysphoria is to be like, ‘You need hormones.’” Changing one’s mind, we learn, takes courage because those who re-embrace their natal biology tend to become instant pariahs among those who formerly celebrated their transition. As these stories also poignantly illustrate, transgender decisions often worsen rather than improve the anxiety and depression they were supposed to improve. Another respondent told Shrier, “There’s so much depression, self-harm, and drug abuse in the trans community. They’re all goddamn miserable.”

In a chapter titled “The Dissidents,” Shrier shares the perspective of professionals who have a more nuanced view of gender dysphoria and its potential remedies. Many, however, have paid a steep price for their open-mindedness—suffering “ostracism, deplatforming, and public censure” or even losing their jobs. For example, one of the world-famed experts Shrier talked to “does not believe adolescent girls who suddenly identify as trans in adolescence necessarily have gender dysphoria at all.” (He posits that while a subset may go on to live transgender or gay lives, a sizable contingent may have “a kind of faux gender dysphoria, which they have identified as

the locus of their unhappiness.”)

Shrier’s chapter on “the transformation” is one of the most sobering, delving into the nitty-gritty of the chemical and medical interventions that have become readily available. After wending her way through the dangers of so-called “puberty blockers,” testosterone, and “top” and “bottom” surgical options, Shrier shows that there are “vanishingly few gatekeepers,” and little to no sense of caution and restraint among the doctors and other professionals who offer these interventions. The result, sadly, can be “a lifelong medical dependency, the introduction of profound health risks, and a succession of dangerous surgeries with unpredictable long-term results.”

Shrier ends with some concrete advice for parents but acknowledges that her top recommendation will make many of them “balk” or “groan”: “Don’t get your kid a smartphone.” She also shares half a dozen other “don’ts,” all of which revolve around holding firm and retaining parental authority as a bulwark against the institutions—including schools, hospitals and even churches—that have let girls down. This timely and engrossing book may not be a joyful read, but it is an important one. A big thumbs-up.

Review by Merinda Teller

## THE APRICOT LANE FARMS COOKBOOK By Molly Chester with Sarah Owens, Avery Books

If you’re looking for a beautiful coffee-table book full of Wise Traditions-friendly recipes, look no further. Molly Chester, together with her husband John, have created a place of beauty at Apricot Lane Farms in California, with pastured animals, vegetable gardens and biodynamically raised fruit trees. Her book provides seasonal recipes together with gorgeous photographs—the perfect way to introduce a casual guest to our way of eating!

Molly’s introduction explains the importance of dietary fundamentals: raw dairy, carefully extracted olive and avocado oils, ghee, lard, bacon fat, natural sweeteners, properly prepared grains, raw vinegar and sea salt. An interesting inclusion to this list is naturally fermented miso, used as a flavoring. Original and creative recipes include pickled persimmons, cassava and coconut flour tortillas, sourdough sandwich loaf, jalapeño kraut, harissa, peach barbeque sauce, spaghetti squash coins, smoky potato and greens tacos and zucchini fritters. The section on pastured meats includes many delightful recipes for chicken, eggs, lamb, beef (including beef liver) and pork.

And then there are the desserts! Strawberry coconut ice cream, plum crisp and avocado honey ice cream. In fact, the book ends with a stunning collection of avocado recipes, since the Chesters grow thirteen different varieties of avocado on their farm. A finger-licking thumbs up!

Review by Sally Fallon Morell



# All Thumbs Book Reviews

***The Perfect Poison:  
The Story that Big Food and Its Friends  
at the FDA Don't Want You to Know***  
Written and published by  
Adrienne Samuels, PhD

Dr. Jack Samuels suffered from serious health problems that included symptoms similar to Alzheimer's disease. At one point he learned that he was very sensitive to MSG and it helped to avoid it. However, even when he carefully avoided anything with MSG on the label, he still had relapses. This was a mystery until he learned that products containing MSG or MfG (manufactured free glutamate) don't always show them on the label. He and his wife spent their lives researching this subject and learned how the world really works.

Major food producers like Stouffer's and Pepperidge Farm would even label products as having no MSG when, in fact, they did. Other products hide the MSG under harmless-sounding names like "natural flavors," hydrolyzed vegetable or soy protein and sodium caseinate, to name a few.

When Jack first began to testify before Food and Drug Administration (FDA) committees, he was excited, thinking they would do something about this. Soon, he learned that the FDA and other government regulatory agencies were not watchdogs; they were lapdogs of the industries they were supposed to be regulating. "Government regulation" is an oxymoron. Jack and his wife also noticed that everywhere they went to testify, industry trolls were there to undermine their testimony. They were also victims of dirty tricks. For example, when they arrived at a place where they would be testifying, they would find their hotel reservations canceled.

Silly me; I was once under the impression that censorship was a relic of the dark ages and I thought we didn't do that in these more enlightened times. Then a few years ago, of course, censorship busted out in the open, especially

on platforms like Facebook and Twitter. After reading Adrienne Samuels' book and other sources, I have come to understand that censorship never really went away. It just got a little more clever, staying behind closed doors and out of sight from the general public. Rather than burning books, for example, major publishers would see to it that books containing forbidden information were never published to begin with. In 1991, *60 Minutes* did a show on MSG. There was considerable uproar, especially in the glutamate industry. No news media outlet has touched the subject since then. Agencies like the FDA have, at best, pretended to appreciate new information brought to their attention, and then buried it. Freedom of Information Act requests are ignored. Human nature never changes.

The glutamate industry controls which studies are done and which conclusions are reached by donating big dollars to the American Dietetic Association, the Mayo Clinic, University of California Berkeley, AARP and various popular magazines. Industry-backed studies are consistently at odds with independent studies. One of the ways they cheat in their studies is by using aspartame in the placebo, which has similar side effects to MSG.

Jack and Adrienne came in contact with a lab testing company and asked the lab representatives about doing some testing for them. One of the first questions asked was what results they would like. In other words, labs can test anything and come up with any result you want. No problem.

This book is very educational and very relevant to the many people who are sensitive to MSG or who want to understand how the world really works. The thumb is UP.

Review by Tim Boyd



Major food producers would even label products as having no MSG when, in fact, they did.

# All Thumbs Book Reviews



## ***“Cause Unknown”: The Epidemic of Sudden Deaths in 2021 and 2022***

**By Edward Dowd  
Skyhorse Publishing**

Carl Sagan is not my favorite scientist, but Mr. Dowd includes a quote before page 1 of *“Cause Unknown”* and I can’t pass it up without comment: “If we are not able to ask skeptical questions. . . to be skeptical of those in authority, then we are up for grabs for the next charlatan—political or religious—who comes ambling along. It wasn’t enough, Jefferson said, to enshrine some rights in a constitution or a bill of rights. The people had to be educated, and they had to practice their skepticism. . . otherwise, we don’t run the government, the government runs us.”

Keep reading that until you get it. If we blindly accept everything authorities tell us, we are not educated, and if we are not educated, we are slaves of government. Without disagreement, science not only stagnates, it degenerates into an intolerant cult. We are seeing that today, and we should also see that it is never in the best interests of power-hungry governments to have an educated population.

Ed Dowd is educated and has an impressive track record as a BlackRock fund manager who grew a fund from \$2 billion to \$14 billion. He knows how to crunch numbers and understands what they mean. Looking at multiple sources of data on all-cause mortality over the last few years, he noticed a disturbing “signal” in the

data. Others have noticed, too, but I don’t know of anyone who has pulled the data together and analyzed them in as much detail as he has.

When insurance giant OneAmerica announced a 40 percent increase in all-cause mortality in the eighteen to sixty-four age group, there was barely a ripple of media reaction. For context, a 10 percent increase would represent a rare, once-in-two-hundred-year event. We haven’t seen a 40 percent spike like this since animals paired up by twos for an extended cruise on Noah’s shiny new boat. I may be exaggerating slightly, but this is a catastrophe of biblical proportions. As Dowd puts it, the sixty thousand excess deaths among millennials—over just one year—are roughly the equivalent of another Vietnam war. Other sources of data, including the Society of Actuaries Research Institute and the CDC itself, are confirming the same alarming signal.

Strikingly, the people who are dying should not be dying in large numbers. Dowd fills several pages with data and pictures of young athletes who died under very unusual circumstances. Authorities have tried to normalize this by fabricating the label “SADS” (Sudden Adult Death Syndrome). SADS explains nothing but makes it sound like you know what is going on—“Oh yeah, that’s just SADS.”

With an airtight case showing skyrocketing death rates, we can ask why this is happening. Again, there are plenty of clues. One clear sign that something is fishy is when authorities start changing definitions—such as the definition

The most cited study on the topic of sudden death in young athletes was done in 2006 at the Division of Pediatric Cardiology, University Hospital of Lausanne, Switzerland. Experts there looked at sudden cardiac death in athletes under 35-years old, between the years 1966 and 2004.

After a systematic review of the literature, the Lausanne Study determined there had been 1101 such cases—over a period of 38 years. That’s an average of about 29 per year. These days, we’d be grateful to see even a single month with only 29 such events. In fact, since June 2021, there hasn’t been even one month with fewer than 29 such deaths; there were 90 reported in December 2021 alone, and about the same the month after that.

<https://pubmed.ncbi.nlm.nih.gov/17143117/>

Taken from “Cause Unknown” *The Epidemic of Sudden Deaths in 2021 and 2022* by Edward Dowd

# All Thumbs Book Reviews

of a vaccine. Here's another sign: You ask the FDA for their data on the so-called "vaccines," and they tell you they will get back to you in fifty-five years, which they quickly amend to seventy-five years. These are data morally and legally owed to the taxpayers who paid for the studies. When authorities say they will get back to you long after you are safely dead, do you think there is a problem? What about when the CDC sets up a new system called v-safe to monitor vaccine safety but does not care to share those data with the public—do you think there is a problem?

Joe Biden got fully vaxxed and got Covid. Twice. Jill Biden got fully vaxxed and got Covid. Twice. Ditto for the prime minister of Canada, Anthony Fauci and Pfizer's CEO. Do you think there is a problem? The VAERS system shows more deaths after Covid "vaccination" than deaths for all other vaccines combined for the last thirty years. Do you think there is a problem? There was a sudden shift in excess deaths from older people to younger people following Covid vaccine mandates in 2021. "Do you think . . . ?" Denmark thinks so and has stopped all Covid shots for people under the age of fifty. (I guess they don't care about anyone over fifty.)

Dowd also looks at disability statistics from the Bureau of Labor Statistics, where again, we see a big increase among working-age people in 2021 and 2022. I will not go into the details of what those disabilities look like, but if you do, you will see there are worse things than death.

Dowd noticed a slight increase in the death rate in 2020 but not very much, and most of it was among older people with serious comorbidities. This makes one wonder why there was such a panic about Covid. One big factor was a computer model generated by the infamous British epidemiologist Neil Ferguson. Let's look at Ferguson's track record in making predictions. For Covid in Taiwan in 2020, he predicted one hundred seventy-nine thousand deaths; the ac-

tual number was ten. Back in 2001, he predicted one hundred fifty thousand animal deaths from foot-and-mouth disease; the actual number was two hundred. In 2002, he predicted one hundred fifty-six thousand human deaths from mad cow disease; one hundred seventy-seven was the actual number. In 2005, he predicted up to two hundred million human deaths from bird flu. The actual number? Two hundred eighty-two, over six years. In 2009, he predicted sixty-five thousand UK swine flu deaths; the actual number was forty-five. This makes me wonder why anyone was still listening to this festering twit in 2020, but they did, and here we are.

This brings us to the bottom line. Mr. Dowd is more restrained in his book than I will be here. This horrific holocaust is not an accident and is not due to incompetence. The original outbreak in late 2019 was far from dramatic, yet in 2020, mandates and lockdowns swept the world in a matter of a few months. What was the response to the far more dramatic morbidity and mortality in 2021 and 2022? Governments and their media muppets have been almost completely silent. Clearly, they know what is going on and why, and they don't see a problem. "Nothing to see here; move along and please die quietly."

Sadly, the book contains many photos that put faces on this disaster. The dust jacket is also covered with pictures of beautiful young people. There are numbers, charts and graphs. There are also QR codes giving references for every piece of information. I don't have a smartphone, so that didn't do much for me, but for others, there you go. This is one of the best books I've read in the last year. It is an easy thumbs UP.

Review by Tim Boyd

Governments and their media muppets have been almost completely silent. Clearly, they know what is going on and why, and they don't see a problem.

# All Thumbs Book Reviews



***The Coronation:***  
***Essays from the Covid Moment***  
**By Charles Eisenstein**  
**Chelsea Green Publishing**

In college, I had friends who highlighted entire paragraphs of assigned textbooks. I'd roll my eyes. If you highlight everything, I thought, how can you tell what's most important? And yet, while reading *The Coronation*, I found myself highlighting portion after portion of this book. I was moved by the eloquent way Eisenstein described the years 2020–2022. While I imagine some readers might become impatient with Eisenstein's verbosity, I found myself drawn in by his insightful analogies and illustrations.

*The Coronation* is a compilation of essays written over the past two years. It shines a spotlight on the tumultuous time we experienced. Offering insights on what's really been at play during the pandemic, Eisenstein notes it was not just about machinations for power, nor was it just about fear, though fear (particularly of sickness and death) was a tool used by those advocating restrictions and vaccinations.

Eisenstein takes a deep dive into what led to the dis-ease and near-collapse of society as we knew it. While we may have initially attributed the division, ostracism and fear to a novel "virus," he points out that what we went through was the inevitable result of a broken societal system that could no longer be sustained.

Using an agricultural analogy, he describes how conventional agriculture—dependent on large-scale monocrops and artificial inputs like pesticides and fertilizers—"worked" for a little while but is now clearly degrading the soil, polluting our food and jeopardizing our health. In the same way, our society believes and promotes the ideas that bigger is better; nature must be subjugated or improved on; technological advancement is the best way forward; and medicine will save us. These premises have led to a worldview and society that are sick, in the

multiple meanings of the word. They have led to an unsustainable approach to health, rather than the approach described by Dr. Weston Price: "Life in all its fullness is Mother Nature obeyed." Sooner or later, something had to give.

When a seed dies, something new sprouts. Manure, which is waste, ends up nourishing the earth in surprising ways. The change from "normal" to the so-called "new normal" is, therefore, not to be feared but to be observed with wonder. It is an invitation to step into our new place—or as Eisenstein puts it, into our own "coronation" as sovereign beings. But the process itself is far from comfortable, no matter how poetic Eisenstein may make it sound. As a matter of fact, his book may be quite unsettling for those who have regarded the past two years through a black-and-white, good-versus-evil paradigm. He does not lend credence to notions that Bill Gates is evil incarnate, a *Star Wars*-like villain. He doesn't see malevolence lurking behind pharmaceutical executives either. He regards them as human beings—flawed and convinced that what they are doing is best for humanity.

He also has a disconcerting take on viruses, or at least one that challenges the WAFP perspective that there is no virus. He says, "To believe that hundreds of thousands of virologists have spent the last 50 years studying a hallucination, one must think that they are corrupt fools unable to see the obvious. Viewing them that way prevents communication, learning, and a mutual quest for truth." At the same time, becoming "sovereign" means rejecting old paradigms and embracing our humanity and the humanity of those around us. The real pandemic, Eisenstein suggests, is "dehumanization." When we lose sight of our common humanity and get swept up by rhetoric, we all lose. Charles calls us to a new, better path—one that leads us to love others and to usher in the beautiful world our hearts know is possible. For this reason, this book and its vision deserve two thumbs up.

Review by Hilda Labrada Gore

Our society believes and promotes the ideas that bigger is better; nature must be subjugated or improved on; technological advancement is the best way forward; and medicine will save us.

# All Thumbs Book Reviews: Children's Books

## **A Prairie Boy's Winter** (Ages 5-12)

**By William Kurelek, Houghton Mifflin Co.**

This very endearing picture book is dedicated to “everyone who ever spent a winter on the prairies—and for all the others who wonder what it was like.” The author wanted to portray his own life experiences of growing up on a farm in the 1930s, and that is exactly what he does; with his gentle illustrations and descriptive writing style, he instantly draws the reader into life on a prairie. Each page is like a miniature chapter, describing a specific chore or event that takes place in a family's life: calling the pigs to feed, hauling hay, skiing behind the hayrack, making an ice rink and many others! The nostalgia for the wholesome activities and hard work ethic that take place on a family farm will warm the hearts of both children and parents. Not everything always goes smoothly on a farm, however, and this is portrayed in pages about watering cows when things are frozen and hauling firewood for both food and warmth. But the family members make the best of their surroundings and work hard together as they await the coming of spring.

## **Apple Tree Christmas** (Ages 5-12)

**By Trinka Hakes Noble, Sleeping Bear Press**

This sweet tale is about a small family that lives in one end of a barn. Life is charmingly simple for them, tending to their livestock and the barn's upkeep, but their favorite family activity is to harvest their beloved apple tree each year. Not only does the tree provide plentiful apples, which they divide up and use in all sorts of ways through the winter, but it is also a playground for the two daughters, Katrina and Josie, who spend countless hours swinging from and sitting on its branches. Tragically, just before Christmas, a blizzard destroys the tree, and it must be chopped up for firewood. Katrina and Josie are grief-stricken, and although their parents try their best to keep up their spirits, the girls find that they can't even be excited as they prepare for Christmas. However, an unexpected and unforgettable surprise awaits them on Christmas morning! Very vibrant

and warm illustrations accompany this lovely and wholesome story of love and self-sacrifice.

## **Ox-Cart Man** (Ages 5-12)

**By Donald Hall**

**Illustrated by Barbara Cooney**

**Puffin Books**

A New England farm family gathers everything that they have grown, harvested, made and collected for the past year to sell at the nearest market to get them through the next year. Apples, homegrown potatoes, handmade mittens, wool from the sheep; all of the family's goods are packed up on the ox-cart, and the father walks several days to town to sell it all and buy new goods. Once he reaches Portsmouth Market, he sells all that he came with, including his ox and cart, and uses the coins to purchase new things for the home: a kettle for his wife, a carving knife for his son, an embroidery needle for his daughter and supplies for the farm. When he returns home, the cycle begins anew as the family makes candles, plants and carves and shears sheep for the following year. Barbara Cooney illustrates this lovely story of simplicity and resourcefulness, and her color and detail make one feel present in each scene. It is beautiful to witness the seemingly lost art of self-sufficiency and living off the land, presented to children in a very simple and appealing manner through Donald Hall's writing style.

Reviews by Katy Vander Woude



### BREADMAKERS

Maureen Diaz and Courtney Queen prepare delicious sourdough bread for the Wise Traditions conference.



# Tim's Video Reviews

Glyphosate diminishes EZ water at every concentration. It basically dehydrates, and it might kill by dehydration.

*EZ Water - What Is It, Why Do I Need It and How Do I Make It?*

**Dr. Gerald Pollack, Ari Whitten**  
**The Energy Blueprint**

<https://www.youtube.com/watch?v=XE4gFbvGwK4>

Water sounds like such a simple subject, and few consider whether it does more than just dilute minerals to the proper concentration and keep soft tissue from turning to dust. Exactly what does water do in a living body?

Dr. Gerald Pollack has accumulated evidence that water is much more complex than we realize and plays an active, integral role in cell function. He points out a few flaws in the conventional thinking about how a cell works. The sodium-potassium pump, for example. The amount of energy it takes is around thirty times what the cell could possibly muster just to run that pump. There are hundreds of supposed pumps in the cell membrane, if not thousands. The amount of energy that's required is astronomical compared to what the cell could possibly produce. There is something wrong with conventional thinking. . . again.

What's inside the cell? Besides water, there are proteins, nucleic acids, plus other solids. The surfaces of these components are mostly hydrophilic (water-loving). They cause water to become structured in ways that give rise to properties we are just beginning to understand. Pollack calls this structured water "EZ water." These properties provide a workable alternative mechanism to the pumps that require too much energy.

Normal water is chaotic. It takes energy to order the water (EZ). Where does the energy come from? To build structured water in your body, infrared light is useful. Where does infrared light come from? Roughly half of the radiation from the sun is in the infrared wavelength. Healthy cells have negative electrical charge. If you do not have enough EZ water, the negative charge diminishes, and so does your health. I wrote this review while I was at the beach. Pollack provides two reasons why the beach is good for you. One, as mentioned,

is that you get plenty of infrared light from the sun. The other is that the earth is negatively charged. So, walking on sand—and especially wet sand, which is more conductive—recharges your cells.

As is usually the case with new ideas that don't neatly fit into existing scientific boxes, most scientists don't think much of Pollack's theories and research. Pollack has a good philosophical outlook on the controversy surrounding his theories. He knows the tendency in science is to want to stick to the status quo, which, ironically, is not very scientific. He points out that Lord Kelvin said nothing heavier than air will ever fly. A couple of years later came the Wright brothers. Albert Szent-Györgyi, the father of modern biochemistry, said the only time he knew he was onto something really significant was when the response was polarizing. Leading experts almost always hate new ideas. New ideas contradict old ideas held by experts, which can raise questions about the value of their expertise. They don't seem to like that.

Dr. Pollack is well aware of the work of Dr. Masaru Emoto and thinks Emoto was on to something. Water stores information and crystallizes in different ways when frozen, depending on what kind of thoughts it is exposed to. However, Emoto was not very scientific with his research, so it needs to be continued with more careful methodology.

Are certain kinds of water better for health? We don't know. No studies have been done. There is no money in that. The NIH will never fund water research because they are too busy doing "gain-of-function" research.

Pollack has looked at ayurvedic agents that have a positive effect on EZ water. He has also looked at the negative effects of glyphosate, which diminishes EZ water at every concentration. It basically dehydrates, and it might kill by dehydration. The evidence that has been produced by so many groups and compiled by Stephanie Seneff suggests that this could be a real problem.

This is an excellent, fascinating video. For that ever-shrinking subset of people who like to read, there is even a transcript at [theenergyblueprint.com/ez-water/](http://theenergyblueprint.com/ez-water/). The thumb is UP.

## Debunking the Nonsense

By Jacob Diaz, Mike Donio, Dr. Jordan Grant,  
Mike Stone and Alec Zeck

<https://www.youtube.com/watch?v=nPSViaPCGrM>

Here is another video from a group of people who didn't get the memo that we are not supposed to question the sacred narrative. They have been spending a lot of time listening to others who also did not get the memo, like Dr. Tom Cowan, Dr. Stefan Lanka and company. They also read that subversive book titled *The Contagion Myth*. If you are familiar with those sources, you see where this is going.

The key question, of course, is: do viruses exist? The video takes a careful look at a study that claims to isolate SARS-CoV-2. It even says that in the title of the study, so it must be isolated, right? After a careful look at the methodology, it becomes clear to anyone who can think past a sixth-grade level that nothing has been isolated.

Virology in general suffers from a fundamental problem. The teaching of the scientific method is apparently missing from the education of virologists. Step one of the scientific method is to form a hypothesis: "I think X causes Y." If you can't prove "X" exists, then you're done right there. Anything beyond that is nonsense. If you are a virologist, then you just keep going building castles in the air that are loaded with more of the same.

These shenanigans lead to all kinds of chaos, as we've seen over the last few years. If you presume to question this pseudoscience, one of the popular responses is, in a nutshell, "You're not a virologist, so shut up." This is a favorite of the guys in this video. It's the old ad hominem attack—when you don't have a good answer to give a critic, change the subject and attack their character or intellect instead, or make unflattering speculations about their mothers. Here, we have left the field of science and entered the realm of an intolerant cult.

The makers of this video go on to present pictures from studies that claim to show what the virus looks like. Then, they present pictures from other studies—some from well before Covid was said to exist—showing

identical particles. It seems the virologists have tried to slip one past us and redefine old, known particles as a new virus. The video also recounts Stefan Lanka's experiments, which disprove the whole approach to identifying viruses.

Then we come to the Rosenau experiment, where researchers tried to prove that the so-called Spanish flu was contagious. Not only did the experiment fail; it proved the opposite. The flu was not contagious. The video goes on to cover other attempts made mainly in the first half of the twentieth century to show contagion for the flu and chicken pox—attempts that failed as well. Disturbingly sadistic animal studies were equally unsuccessful.

The point is made that virologists are just doing what they are taught. I agree up to a point. Programming or brainwashing is very effective when started at a young, impressionable age. It can be hard to unprogram yourself. I'm still working on it. Some people just can't do it at all.

Anyway, why is all this important? If we don't get to the root of the fraud and find a way to reprogram those who are reprogrammable, we will get to play this game over and over until they run out of Greek letters, muppet names and whatever else they come up with for names of "variants." If you like face diapers, stifling economy-killing lockdowns, sluggish supply lines, social isolation, sickening shots, skyrocketing suicide and widespread severe cerebral dysfunction, then this is a splendid scam. (Say that sentence out loud with a lisp.) My singularly subversive thumb is UP. ☺☺☺



Speaker and exhibitor Curtis Cost with his book *Vaccines Are Dangerous*.



Peggy Sutton and Allison Stewart of To Your Health Sprouted Flour Company.

# Vaccination Updates

VACCINES—UNSAFE SINCE THE VERY BEGINNING

By Kendall Nelson, Director, *The Greater Good*

The word “vaccine” originates from the Latin word *vacca* for “cow.” According to legend, the term was coined after Dr. Edward Jenner’s 1796 experimentation with smallpox inoculations. To test his hypothesis that people who contracted cowpox could not get smallpox, he exposed a young boy to disease matter from lesions on the hands of a dairymaid said to be infected with cowpox. Allegedly, the child developed cowpox. Jenner later deliberately exposed him to smallpox, and when the boy did not develop the disease, Jenner proclaimed his cowpox inoculation a success.<sup>1</sup>

Jenner’s vaccination program became compulsory in several countries worldwide and as a result, vaccinated populations experienced unprecedented smallpox epidemics that harmed and killed thousands of people. With vaccination, the outbreaks were no longer small and isolated. Conversely, smallpox deaths plummeted in countries that forbade the vaccinations or rescinded the laws, especially in places that implemented nutrition and sanitation improvements.<sup>2</sup>

Throughout the history of smallpox vaccines, many people from all walks of life spoke out against them, including doctors as well as the spiritual leader, Mahatma Gandhi. In support of these sentiments, studies and official declarations confirmed that smallpox vaccines were ineffective and dangerous.<sup>2</sup> The vaccines have been linked to epidemics of the childhood illness dubbed “hand, foot and mouth disease,” brain and spinal cord inflammation (encephalomyelitis), neurological disorders—including epilepsy, peripheral nerve damage (polyneuritis) and multiple sclerosis—and death.<sup>2</sup>

## A SACRED COW

Strangely enough, with the birth of the first impure vaccines christened after a cow came the belief that vaccines are the “sacred cow” of medicine. One cannot ignore the irony. Despite their failure from the outset, a consensus prevails among the medical community and the public at large that vaccines are unilaterally “effective and safe.” For some, vaccination has become a religion. Those who question the efficacy and safety of vaccines are viewed as heretics, with entities like the World Health Organization (WHO) even pronouncing so-called “vaccine hesitancy” a major global health threat.<sup>3</sup> The vaccine religion persists even though the efficacy and safety of vaccines have never been adequately studied nor proven. Jenner did not conduct proper research on the first inoculations in 1796, and authorities do not study them correctly today, despite advances in technology and medical knowledge.

Instead, vaccine trials are “defective by design.”<sup>4</sup> Medicine considers randomized, double-blind placebo-controlled trials the “gold standard”;

such trials compare two groups of people who are alike except for one factor. In the case of vaccines, that comparison should be between those who receive the vaccine and those who receive an inert placebo. However, the vast majority of vaccine safety trials use comparison groups whose participants either receive other vaccines or false (non-inert) “placebos” that contain aluminum or other toxic adjuvants.<sup>5</sup> No clinical trial studying the safety of vaccines given to infants and toddlers has ever used a neutral placebo.<sup>6</sup> Without a harmless placebo, it is impossible to determine true cause-effect relationships between the vaccine and the observed outcomes.

Vaccine clinical trials are fraught with other methodological problems as well. Consider the fact that most pre-licensure clinical trials exclude the participants who would be most at risk of serious adverse events—such as pregnant women or children with cancer or diabetes—but after licensure, the same vaccines are routinely administered to those vulnerable groups. Another concern involves the fact that most safety studies last only weeks, with adverse events sometimes monitored for as little as a few days.<sup>7</sup> Often, manufacturers also limit the number of participants in vaccine trials. For example, the pre-licensure trials for Gardasil, a vaccine that is supposed to prevent human papillomavirus (HPV), appears to have studied fewer than twelve hundred girls under age sixteen, and it is unclear how long they were followed.<sup>8</sup>

Post-licensure monitoring studies are also derisory.<sup>4</sup> Thousands of independent studies demonstrate the dangers of vaccines. However, buttressed by grossly flawed, biased and self-interested science, manufacturers and government agencies persist in asserting that vaccines are completely safe. Dr. Marcia Angell, former editor-in-chief of the *New England Journal of Medicine*, famously said in 2009, “It is simply



no longer possible to believe much of the clinical research that is published or to try and rely on the judgment of trusted physicians or authoritative medical guidelines.”<sup>9</sup>

Doctors, researchers, medical societies and other organizations also have an infuriating habit of categorically dismissing vaccine injuries, claiming they are “one in a million.” The data show otherwise. A meticulous machine cluster analysis of health data collected from over three hundred seventy-six thousand individuals who received a total of 1.4 million doses of forty-five vaccines showed that an astonishing one in thirty-eight doses (2.6 percent) resulted in injuries.<sup>10</sup> The federal government’s own Vaccine Adverse Event Reporting System (VAERS) likewise shows that temporal associations between vaccine administration and subsequent deterioration in health are *real and not rare*. Established by Congress as a post-marketing surveillance system under the National Childhood Vaccine Injury Act of 1986 (the “1986 Act”), VAERS receives adverse event reports from vaccine manufacturers, health care professionals and the general public. Over the past thirty-plus years, VAERS has accumulated over half a million reports, with an average of twenty thousand to thirty thousand new case records added yearly over the last decade.

Over the past two years, the number of injuries reported to VAERS has surged, with Covid shots contributing to more injuries and deaths than all other previous vaccines combined.<sup>6</sup> As of mid-November 2022, VAERS displayed more

than 1.4 million adverse events following Covid “vaccination,”<sup>11</sup> including more than thirty-two thousand reported deaths.<sup>12</sup>

VAERS is a passive surveillance system, and underreporting is its most significant limitation. According to a Department of Health and Human Services study, the database captures fewer than 1 percent of all vaccine-related adverse reactions and deaths.<sup>10</sup> There is also evidence of illegal deletion of adverse events from the database.<sup>13</sup> Moreover, the government’s own National Vaccine Injury Compensation Program (NVICP) puts the lie to the claim that vaccines are unilaterally safe. Since 1988, this program has paid out almost five billion dollars to children and adults injured or killed by vaccines (or their families)<sup>14</sup>—and that figure represents awards to only one out of three petitioners.<sup>15</sup> Most people are unaware of the program, for which a three-year statute of limitations exists to file a claim.<sup>16</sup>

#### A CRIMINAL MODEL

Over the years, manufacturers of drugs and vaccines have paid out extraordinary sums in criminal penalties and settlements for failure to report safety problems, falsification of safety studies, other forms of research fraud, bribery, kickbacks and false advertising. Merck’s efforts in the early 2000s to suppress evidence of safety problems with its arthritis medication Vioxx represent a prime example, with the company paying billions of dollars to governments and individuals to resolve thousands of lawsuits

Well before the Covid shots, every manufacturer of pediatric vaccines had pled guilty to fraud.

#### ONGOING FRAUD

Countless parents of autistic children can attest that their children were perfectly healthy before going to the pediatrician’s office to be vaccinated. One of the biggest ongoing frauds has to do with the CDC’s assertion that the vaccine-autism link has been thoroughly studied and the denial of any correlation between the two. These claims largely rely on sixteen industry-funded studies that considered only one vaccine (MMR) and one vaccine ingredient (mercury-containing thimerosal). Against this handful of epidemiological studies meant to disprove the vaccine-autism hypothesis, there are now at least one hundred sixty independent research papers that support a link.<sup>94</sup> Senior CDC scientist Dr. William Thompson helped blow the whistle on the government’s fraudulent claims of vaccine safety when he exposed the fact that CDC withheld data in a 2004 study—one of the sixteen—with the express intention of misleading the public about the vaccine-autism link. The manipulated study showed that the risk of autism was 340 percent higher for African American boys who got the MMR vaccine before age three.<sup>95</sup> Thompson confessed to Dr. Brian Hooker that he and his colleagues had been instructed to destroy documents, but because he believed discarding the reports was illegal, he privately kept hard copies and later turned over some ten thousand CDC files to Congressman Bill Posey.<sup>96</sup> Thompson’s documents proved that for twelve years, the CDC had been covering up vaccine injury, including brain, central nervous system and immune system damage caused by toxins used as preservatives, emulsifiers and adjuvants in childhood vaccines. The CDC has refused to allow Thompson to testify in court.

related to its actions. Well before the Covid shots, every manufacturer of pediatric vaccines had pled guilty to fraud.<sup>17</sup>

Government agencies are little better, with rampant conflicts of interest. In May 2022, the nonprofit government watchdog organization Open the Books described three hundred fifty million dollars in secret payments made by pharmaceutical companies or other payers to scientists and leaders at the National Institutes of Health (NIH) from 2010 to 2020, including Dr. Anthony Fauci, Dr. Francis Collins and hundreds of others.<sup>18</sup> What's more, the conflicts of interest of researchers who publish the studies cited as proof of vaccine safety—who generally owe their funding to government or pharmaceutical sources—are never mentioned.

It is the job of the U.S. Food and Drug Administration (FDA) to approve vaccines. Remarkably, though, the FDA does not conduct any safety trials of its own. Instead, vaccine clinical trials are carried out by the manufacturers, who enjoy several different layers of protection from liability for their products. These include the 1986 Act as well as the 2011 U.S. Supreme Court decision in the case of *Bruesewitz v. Wyeth*, which blocked the legal right of vaccine-injured persons to hold drug companies liable for design defects or failure to make approved drugs safer.<sup>19</sup> In the case of emergency use authorization (EUA) Covid-19 injections, manufacturers are immune from liability under the Public Readiness and Emergency Preparedness (PREP) Act. According to U.S. law, if you are injured by an EUA vaccine, you cannot sue.<sup>20</sup>

The Centers for Disease Control and Prevention (CDC) is in charge of recommending vaccines for the childhood and adult schedules and monitoring post-marketing safety. This is akin to the fox guarding the hen house.<sup>21</sup> What most people fail to recognize is the fact that the CDC is not an independent government agency. It is a for-profit organization<sup>22</sup> with dozens of vaccine patents, and it sells more than four billion dollars of vaccine products annually.<sup>23</sup> If the CDC were to raise safety concerns about a particular vaccine, that would affect its bottom line. Remember, CDC is the same corrupt health agency that killed a vaccine safety commission proposed by Children's Health Defense founder Robert F. Kennedy, Jr. after Pfizer gave President Trump a one-million-dollar contribution.<sup>24</sup>

## DUBIOUS OR NON-EXISTENT SCIENCE

Since the days of Jenner, vaccine programs have assumed that injecting foreign substances into the human body is a protective means of preventing disease. Vaccine scientists pin their evidence for this assumption on vaccines' ability to stimulate antibody (protein) production in the recipient, but antibody production has proved to be a poor proxy for the far more complex detoxification and regeneration systems that nature provides to keep people healthy.

A growing body of independent research shows that vaccines and their ingredients can have synergistic effects and thus result in exponentially more significant toxicity when combined.<sup>25,26</sup> In nature, our bodies do not readily encounter multiple disease agents simultaneously, yet we are told that our children will be okay when we inject them with many toxins in a single pediatric visit. CDC has never studied the effects of administering multiple vaccines simultaneously, including to infants.

Neil Z. Miller, author of the book *Miller's Review of Critical Vaccine Studies*, has commented: "The safety of CDC's childhood vaccination schedule was never affirmed in clinical studies. Vaccines are administered to millions of infants every year, yet health authorities have no scientific data from synergistic toxicity studies on all combinations of vaccines that infants are likely to receive. National vaccination campaigns must be supported by scientific evidence. No child should be subjected to a health policy that is not based on sound scientific principles and, in fact, has been shown to be potentially dangerous."<sup>27</sup>

In his 2016 article titled "Combining childhood vaccines at one visit is not safe,"<sup>27</sup> Miller demonstrated that there is a "dose-dependent association between the number of vaccines administered simultaneously and the likelihood of hospitalization or death" following an adverse reaction; moreover, the younger a child is at the time of the adverse reaction, the higher the risk of hospitalization or death. Earlier, Miller showed a linear relationship between the number of vaccine doses administered and the percentage of hospitalizations and deaths reported to VAERS, with younger infants significantly more likely than older infants to be hospitalized or to die after receiving vaccines.<sup>28</sup>

Vaccine scientists and policymakers promote a "one-size-fits-all" approach for vaccine dosage and the vaccine schedule. Variables such as age, sex, weight, genetics, family history and medical history are not considered, nor are vaccine recipients screened for allergies, prior reactions, illness or other contraindications. As Barbara Loe Fisher, president of the National Vaccine Information Center, says, "This mandatory one-size-fits-all approach to vaccination is a de facto state-sanctioned selection of the genetically and biologically vulnerable for sacrifice."<sup>29</sup>

## TOXIC INGREDIENTS

The human body is designed to encounter toxins and pathogens through inhalation and ingestion, not via injection. When vaccine ingredients are injected directly into the body, they bypass natural protective filters, making their way into the bloodstream, organs, bones and brain.<sup>30</sup>

What are some of the vaccine ingredients injected into children at pediatric visits? Known ingredients include neurotoxic heavy metals such as mercury (in the form of thimerosal); aluminum adjuvants; gene DNA fragments; carrier proteins; metallic particles of varying sizes; other nanoparticles; the herbicide glyphosate; antibiotics such as neomycin; squalene; polysorbate 80; and carcinogenic formaldehyde; as well as unknown ingredients and contaminants.<sup>31</sup> To quote Dr. Richard Moskowitz, MD, “The CDC’s repeated assurances that all of these ingredients are safe are hardly persuasive or even credible since they have failed to provide any evidence of the slightest attempt to investigate them.”<sup>30</sup>

Let us examine two key offending ingredients, thimerosal and aluminum. Before 1999 when Congress and the public pressured the U.S. Public Health Service and the American Academy of Pediatrics to phase out thimerosal, children received large amounts of mercury in their vaccines. Those born in the 1990s were typically injected with up to two hundred thirty-seven micrograms of mercury by their second

birthday and over sixty micrograms at a single doctor’s visit. When public health authorities launched new recommendations for thimerosal-containing influenza vaccines, they essentially negated the “phase-out” of mercury-containing vaccines said to have been completed in 2003.<sup>32</sup> Additionally, pharmaceutical companies still use thimerosal to impede bacterial growth during the manufacturing process for certain vaccines.<sup>33</sup>

In America, the acceptable limit of mercury in drinking water is two parts per billion (ppb), and a liquid with two hundred ppb is considered toxic waste. Nevertheless, infant influenza vaccines can contain twenty-five thousand ppb of mercury, and several adult flu vaccines contain fifty thousand ppb—despite the consistent finding from in vitro and animal studies “that even low doses of thimerosal are active against brain cells and that thimerosal’s toxic effects are cumulative.”<sup>31</sup> As evidenced by over one hundred eighty studies, mercury-containing vaccines significantly increase the risks of adverse neurodevelopmental outcomes, including speech and sleep disorders, developmental delays, autism and attention deficit disorder as well as premature puberty.<sup>2</sup>

Aluminum adjuvants are added to many vaccines to hyperstimulate a response in the recipient. Like mercury, aluminum was grandfathered into the vaccine program without any human safety testing by the FDA. Infants and children are at particular risk from aluminum’s neurotoxic effects, which include the destruction of neurons necessary for proper cognitive and motor functions. Aluminum in vaccines has been associated with a multitude of ailments, including autoimmune and neurological damage,

#### AGGRESSIVE VACCINE SCHEDULE = POOR OUTCOMES

Before the rollout of the experimental Covid shots, children received seventy-two doses of sixteen different vaccines by age eighteen.<sup>97</sup> Fifty-three of those vaccines are administered before age six, making the U.S. vaccine schedule one of the most aggressive in the world.<sup>98</sup> The number of vaccines recommended for children has tripled since 1980—and with the increase has come skyrocketing childhood disease and disability. As of more than a decade ago, upwards of 54 percent of American children suffer from one or more chronic illness.<sup>99</sup> One in twelve children is disabled due to a chronic illness, and one in four takes routine medication.<sup>6</sup> Statistics on specific conditions provide an equally dismal portrait:<sup>100</sup>

- As of 2010, one in two American adolescents (49.5 percent) had been diagnosed with at least one type of mental disorder (anxiety, behavior, mood or substance use disorders).<sup>101</sup>
- One in six children (17 percent) in the U.S. has at least one developmental disability or developmental delay.<sup>102</sup>
- One in seven children (15 percent) has eczema.<sup>103</sup>
- One in seven students ages three to twenty-one (15 percent) receives special education services.<sup>104</sup>
- One in ten children (10 percent) has asthma.<sup>105</sup>
- About one in ten children has been diagnosed with attention-deficit/hyperactivity disorder (ADHD).<sup>106</sup>
- One in thirteen (8 percent) has at least one food allergy.<sup>107</sup>
- One in twenty (5 percent) children under five has a seizure disorder.<sup>108</sup>
- An estimated one in twenty-nine children (3.5 percent) ages three to seventeen had been diagnosed with autism spectrum disorder (ASD) as of 2020, with a reported 53 percent increase in ASD in children since 2017.<sup>109</sup>
- Roughly one in every two hundred eighty-five children will receive a cancer diagnosis before they turn twenty.<sup>110</sup>

While vaccines are not the sole reason for these abysmal statistics, studies show that developed nations that require the most vaccines tend to have the worst infant mortality rates. Thirty-three nations have better infant mortality rates than ours.<sup>111</sup> No government studies have ever compared the health of fully vaccinated children to unvaccinated children, but independent studies show that unvaccinated children are far healthier.<sup>112,113</sup> One groundbreaking study of homeschooled children found that partially or fully vaccinated children had significantly higher odds of developing chronic illnesses, eczema, neurodevelopmental disorders, autism, attention-deficit/hyperactivity disorder and learning disabilities.<sup>114</sup>

amyotrophic lateral sclerosis, chronic fatigue and sleep disturbances. A recent CDC-funded study linked aluminum in vaccines to a 36 percent higher risk of persistent asthma.<sup>34</sup> Clinical studies demonstrate that aluminum in vaccines can trigger neuron death and motor and memory deficits such as those seen in Gulf War syndrome.<sup>35</sup> In addition, aluminum is a primary causative factor in dementia and Alzheimer’s disease.<sup>36</sup>

There is a significant correlation between the number of aluminum-containing vaccines children receive and the rate of autism spectrum disorder (ASD). Western countries that mandate the most aluminum-adjunct-containing vaccines for preschool children have the highest rates of autism.<sup>37</sup> World-renowned aluminum expert Dr. Christopher Exley, PhD, conducted autopsy studies in 2017 in which he found some of the highest-ever-recorded quantities of aluminum in the brains of autistic individuals, some of whom were in their twenties or younger when they died.<sup>38</sup> Exley’s findings have shocking implications for today’s generation of children who receive five thousand micrograms of aluminum in vaccines by eighteen months, and over five thousand additional micrograms if they receive all recommended boosters as well as the HPV and meningitis vaccines.

In addition to the long list of toxic vaccine ingredients, some “live virus” vaccines use aborted fetal cell lines in the manufacturing process. The measles-mumps-rubella (MMR), chickenpox and shingles vaccines are grown in cell lines that include WI-38 (cell cultures from a female fetus aborted in 1964) and MRC-5 (cell cultures from a fourteen-week male fetus aborted in 1966). Using these cell lines to grow vaccines poses ethical and religious concerns for many people. The method also may be dangerous. For example, research points to a causal relationship between human-DNA-containing cell lines and autism prevalence.<sup>39</sup>

The four most widely used Covid-19 shots across the globe—Pfizer/BioNTech, Moderna, Janssen/Johnson & Johnson (J&J) and Oxford/AstraZeneca—all used or use abortion-derived fetal cell lines during their research, development, production and/or testing stages. For example,

the manufacturing process for Pfizer’s Covid-19 injection includes the use of the HEK293T human embryonic cell line.<sup>40</sup> The J&J injections are grown in a continuous “immortalized” human embryonic cell line called PER.C6 derived from the abortion of a healthy eighteen-week-old fetus.

The mRNA Covid shots also contain dangerous ingredients like polysorbate 80 and polyethylene glycol (PEG), an immunogenic chemical compound associated with severe and potentially fatal allergic reactions.<sup>41</sup> While no one seems to know exactly what is in the Covid injections, some batches have been found to contain metallic particles.<sup>42</sup> The mRNA shots contain dangerous lipid nanoparticles, which can create a series of toxic reactions, including damage to DNA.<sup>41</sup>

#### “A CHEAP LIE”

The FDA granted EUA status to the experimental Covid-19 mRNA shots manufactured by Pfizer and Moderna in December 2020, doing the same for J&J’s shot in March 2021 and for the Novavax-manufactured shot in July 2022. As of August 31, 2022, a U.S. coronavirus vaccine tracker claimed that about 79 percent of the U.S. population had received at least one dose, with 68 percent of the population considered “fully vaccinated” and a third having received at least one booster dose.<sup>43</sup>

Historians will write about how the world



LEFT: Enthusiastic hands in the children’s program.  
RIGHT: A Wise Traditions mom juggles glasses of kombucha with a sleeping baby.

administered these fast-tracked, experimental, DNA-altering jabs to billions of people without genuine evidence regarding efficacy or safety. Regarding efficacy, Dr. Joseph Mercola has written,<sup>44</sup> “Both Moderna and Pfizer/BioNTech’s clinical data failed to provide a multitude of crucial information, and the efficacy these companies boast is a fairytale.” Pfizer’s “fairytale” claim—that its Covid shot was 95 percent effective—referred to relative risk reduction, but made no mention of its absolute risk reduction, which amounted to less than 1 percent.<sup>45</sup> Pfizer’s studies showed that two hundred fifty-six individuals would need to be vaccinated to reportedly prevent just one case of Covid-19; the remaining two hundred fifty-five individuals would experience no benefit, yet would risk succumbing to adverse side effects.<sup>46</sup>

Although the entire premise behind the marketing and mandating of Covid shots—and subsequent vaccine passports—was that the jabs were necessary to protect others, Pfizer’s president of international developed markets, Janine Small, told the European Parliament in October 2022 that the company did not even examine this question before the mRNA jab’s rollout. When asked, Small told an incredulous parliamentarian, “No. We had to really move at the speed of science.”<sup>47</sup> As the scandalized member of parliament commented afterward, “Millions of people worldwide felt forced to get vaccinated because of the myth that ‘you do it

for others.’ Now this turned out to be a cheap lie.”

CDC director Rochelle Walensky has made similar admissions, yet she steadfastly continues to recommend the injections, including boosters, reiterating the mantra that the shots prevent severe illness, hospitalization and death.<sup>48</sup> In June 2022, however, a *Lancet* study<sup>49</sup> inadvertently highlighted just the opposite, showing a “disturbing spike” in hospitalizations within weeks of the first dose.<sup>50</sup> Critics argue that the Covid shots seem to be destroying “immune competence” and warn that “repeated booster shots can reliably be anticipated to amplify adverse effects.”<sup>51</sup>

According to internist and biological warfare epidemiologist Dr. Meryl Nass, FDA and CDC granted manufacturers special permission to forgo human testing for the Covid booster shots, “bending the rules [and] creating a new regulatory playbook.”<sup>52</sup> Internal emails obtained by Judicial Watch suggest the CDC pressured FDA to authorize the boosters without any clinical trials.<sup>53</sup> Grandfathering all future Covid shots in this manner was such a blatant and reckless act of medical malfeasance that even famous vaccine apologist Dr. Paul Offit, as a member of the FDA’s advisory panel, voted against recommending the booster shots.<sup>54</sup>

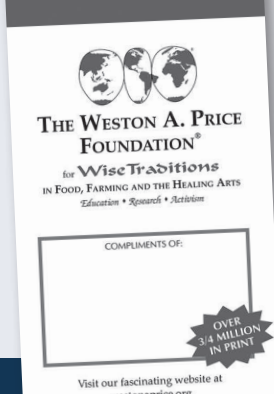
#### EXPERIMENT UNLEASHED

Manufacturers of Covid jabs conducted no long-term safety testing, nor were any studies done on drug interactions, vaccine interactions, toxicity, toxicokinetics, genotoxicity, teratogenicity, carcinogenicity, effects on pregnant women, postnatal effects on mothers or newborns or effects on animal offspring.<sup>55</sup> Yet, after less than a year, public health authorities went ahead and unleashed a technology they had never previously licensed in humans.

By the summer and early fall of 2021, hospitalizations and fatalities were spiking in the vaccinated, with a 31 percent increase in deaths across one hundred forty-five of the most vaccinated countries.<sup>56</sup> In the UK, government data showed that “double vaccinated” individuals in certain age groups were three times more likely to die of “Covid” than

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## Timeless Principles of Healthy Traditional Diets



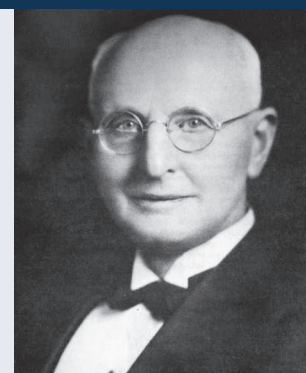
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unvaccinated individuals and twice as likely to be hospitalized.<sup>57</sup> In the UK, up to 80 percent of hospital deaths labeled as “Covid” occurred among the vaccinated.<sup>58</sup> Israel reported record numbers of hospitalizations, with 95 percent of those hospitalized for serious illness having been vaccinated.<sup>59</sup> Australia witnessed similar patterns in hospitalizations and deaths after the country mandated the shots.<sup>59</sup> Similar trends even occurred in Sweden, a country that refused to implement lockdowns or masking but nevertheless rolled out the shots; government data from September 2021 showed that 70 percent of deaths attributed to “Covid” were in “fully vaccinated” individuals.<sup>60</sup>

Manufacturers knew there was cause for concern from the outset. In Moderna’s Phase 1 trials, 80 percent of participants in the group who received a one-hundred-microgram dose suffered systemic side effects. After the second dose, 100 percent of participants experienced side effects, including high fever, chills, muscle pain and headaches. Despite these results, this is the dose Moderna chose to move forward with in later-phase trials. For both the Moderna and Pfizer injections, the later-phase trials showed high “grade 3” adverse events, defined as interfering with daily activity.<sup>61</sup> Some participants reported severe reactions that required hospitalization and invasive treatment; others died.

An internal Pfizer document released by the FDA in March 2022 revealed that the company knew its injections were linked to an extremely high number of illnesses, injuries and deaths.<sup>62</sup> In the first three months of the Covid-19 injection rollout, Pfizer received over forty-two thousand case reports capturing nearly one hundred fifty-nine thousand different adverse events, including over twelve hundred deaths. The average person (case) suffered from about four different symptoms,<sup>63</sup> and one in thirty-five persons who reported adverse events died.<sup>64</sup>

Approximately ten million individuals have reported to V-safe, a smartphone-based CDC app for which individuals who got Covid shots were encouraged to register; on average, seven adverse symptoms have been reported per V-safe registrant.<sup>65</sup> More than 7.7 percent (nearly eight hundred thousand individuals) “had a health event requiring medical attention, emergency room intervention, and/or hospitalization.” According to an analysis of VAERS data, the adverse events most often reported following Covid “vaccination” have been irregular menstruation, blood clots, inflammation and cardiovascular and neurological damage.<sup>66</sup>

CDC released the V-safe data only after extensive “legal wrangling” by the Informed Consent Action Network (ICAN) and a court order to produce the data.<sup>65</sup> New evidence suggests the CDC also has been hiding cancer deaths caused by Covid shots. Analysis of weekly morbidity and mortality data shows that CDC has been mislabeling cancer deaths as

Covid deaths since April 2021, probably to mask the explosion in cancer signals.<sup>67</sup> The Defense Medical Epidemiology Database also revealed a tripling of cancer rates among military personnel and their families who had received the jabs—until manipulation of the database made the signal disappear. Pathologist Dr. Ryan Cole reports seeing a twenty-fold increase in cancer in vaccinated individuals, including endometrial cancer and melanomas.<sup>68</sup>

Deaths caused by the Covid shots are being disguised or hidden in other ways, too. For example, when European pathologists examined the bodies of fifteen people who died after Covid “vaccination,” they concluded that the shots had caused fourteen of the deaths, but the coroner did not implicate the “vaccine” in any of the deaths.<sup>69</sup> In the U.S., the FDA is refusing to cooperate with a Freedom of Information Act request for autopsy reports of individuals whose deaths were reported to VAERS following Covid “vaccination.”<sup>70</sup> Meanwhile, since 2021, the death rate for Americans under forty-five years of age—and, even more worryingly, for those under age twenty-five—has been soaring.<sup>71</sup>

## GOING AFTER THE CHILDREN

In late October 2021, the FDA authorized Pfizer’s Covid-19 injection on an emergency basis for children five to eleven years old, doing so even after the agency noted “increased risks of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of tissue surrounding the heart) following vaccination with Pfizer/BioNTech COVID-19 Vaccine, particularly following the second dose, and with the observed risk highest in males 12 through 17 years of age.”<sup>72</sup> The CDC’s Advisory Committee on Immunization Practices (ACIP) followed up right away with a unanimous endorsement.<sup>73</sup> In June 2022, FDA authorized the deadly shots for babies as young as six months of age,<sup>74</sup> allowing

## SILENCING DOCTORS WHO QUESTION THE COVID NARRATIVE

Increasingly, honorable doctors are pressured to keep silent if they have dissenting professional opinions about the Covid injections. In California, it is now illegal for doctors to communicate what authorities deem Covid-19 “misinformation” to their patients;<sup>115</sup> Children’s Health Defense is mounting a legal challenge. Information technology companies and the media also have worked together to censor doctors and medical experts who oppose and challenge the official Covid-19 narrative. A recent study published in the sociological journal *Minerva* found those who dared to speak out were hit with lawsuits, revocation of medical licenses, dismissal by employers, retraction of scientific papers and more.<sup>116</sup>

doctors to administer Covid shots concurrently with other childhood vaccines despite the lack of any studies showing it is safe to do so.

Still worse, ACIP voted fifteen-to-zero in October 2022 to add the Covid jabs to the Childhood and Adolescent Immunization Schedule to be rolled out in February 2023—the first time such a recommendation has been made for an EUA “vaccine.” The recommendation includes the Moderna and Pfizer shots for children as young as six months, and the Novavax shot for children as young as twelve. In response, CHD’s Kennedy said: “This reckless action is final proof of the cynicism, corruption, and capture of a once exemplary public health agency. ACIP members have again demonstrated that fealty to their pharma overlords eclipses any residual concerns they may harbor for child welfare or public health.” Kennedy then added, “This is an act of child abuse on a massive scale.”<sup>75</sup>

As of mid-October, VAERS had received nearly forty-three hundred adverse event reports related to the Covid shots for children under age five, including seven deaths.<sup>75</sup> For children between the ages of five and eleven, almost fifteen thousand adverse events had been reported, including twenty-nine deaths.

Ordinarily, placing shots on the childhood vaccine schedule ensures manufacturer protection from liability under the compensation program established by the 1986 Act. However, ACIP specified that the EUA Covid shots (as well as a newly added pneumococcal polysaccharide jab) would not be covered under the NVICP. Instead, they will remain covered by the Countermeasures Injury Compensation Program (CICP)—an intentionally dysfunctional program that as of November 1 had only approved—but not yet compensated—nine Covid-shot-related claims.<sup>76</sup>

#### A NEW SAFETY CONCERN?

Scientists have been exploring the potential for “self-spreading” or “transmissible” vaccines for some time,<sup>77</sup> waxing enthusiastic about their potential to “dramatically increase vaccine coverage in human. . . populations without requiring each individual to be inoculated.”<sup>78</sup> Although it is not currently possible to know whether the Covid injections include some form of technol-

ogy intended to be “self-spreading,” the fact is that people who haven’t received any shots but have close contact with “vaccinated” individuals have reported symptoms suggestive of some kind of “shedding” effect.<sup>79</sup>

Pfizer’s own clinical trial protocol acknowledged the possibility of exposure via inhalation or skin contact.<sup>80</sup> In addition, evidence points to the potential for Covid “vaccine” material to get passed on via body fluids. An autopsy report of a Covid-19-injected person revealed trillions of copies of spike protein in every organ system, including the salivary glands.<sup>81</sup> And a September 2022 research letter published in *JAMA Pediatrics* reported mRNA from the Covid shots in breast milk for up to forty-eight hours post-jab.<sup>82,83</sup> The JAMA authors speculated that “lipid nanoparticles containing the vaccine mRNA are carried to mammary glands” via the blood or the lymphatic system.


#### MORE OF THE SAME—OR WORSE

Occasionally, the flaws in the vaccine program rise to the surface enough to force vaccine manufacturers to withdraw their products—although officials remain willfully blind to the historically unprecedented damage caused by the Covid shots. In the past, a number of vaccines have been pulled from the U.S. market, including vaccines against smallpox, swine flu, diphtheria-tetanus-pertussis (DTP), MMR and polio, among others.<sup>84</sup> Nevertheless, the vaccine gravy train keeps on rolling, with ever more ambitious targets. Currently, both Pfizer and Moderna are working on mRNA-based flu shots.<sup>85,86</sup> The same two companies plus others also have more mRNA and other shots within their sights for infants and pregnant women.<sup>87-89</sup>

In September 2022, President Biden signed an executive order (EO) focused on “advancing biotechnology and biomanufacturing innovation for a sustainable, safe, and secure American bioeconomy.”<sup>90</sup> The EO calls for the development of “genetic engineering technologies and techniques to be able to write circuitry for cells and predictably program biology in the same way in which we write software and program computers.” It also delineates plans to “unlock the power of biological data” using “computing tools and artificial intelligence.” Developments in the vaccine industry—increasingly transitioning toward biotech-reliant biopharmaceuticals<sup>91</sup>—are consistent with this ominous government and industry vision of humans as programmable biology.

We might go back to 1796 and Dr. Jenner’s “successful” cowpox vaccination program and ask ourselves where we are today with vaccination having become the sacred cow of scientism—and a tool for tyranny. We cannot overlook the overwhelming and heartbreaking number of children and adults who have been injured and killed by vaccines both old and new. How many more people must be injured and lives lost before we find our way to a new medical paradigm?

With their nearly unique liability-free status, vaccines also raise vital questions of accountability. The parties responsible for deliberate and systemic efforts to hide the truth about vaccination’s damaging consequences should be prosecuted and held accountable in a court of law. Those who are knowingly pushing fake narratives about the Covid injections—and openly sacrificing our youngest children—should be

jailed for life, with their wealth used as reparations for those whose lives they have ruined. And “amnesty” should be refused to those who are now pleading for it—because the same perpetrators, if granted forgiveness, will continue to commit crimes: enacting endless states of emergency to amass power; mandating useless testing; masking children; imposing economically devastating lockdowns and quarantines; keeping relatives away from hospitalized loved ones; and engineering increased central control through vaccine passports and digital IDs.<sup>92</sup> (For information about the control agenda, see my article, “Covid-19 Injections and the Global Control Grid—Just Say No” in *Wise Traditions*, Spring 2022.<sup>93</sup>) For the sake of our children, we must stop tolerating shoddy science, censorship and the wasting of billions of tax dollars on deadly treatments and “vaccines” that kill. 

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

## REFERENCES

- History of smallpox. Centers for Disease Control and Prevention, last reviewed Feb. 20, 2021. <https://www.cdc.gov/smallpox/history/history.html>
- Miller NZ. *Vaccines: Are They Really Safe & Effective?* Santa Fe, NM: New Atlantean Press, 2006, pp. 76-80.
- Ten threats to global health in 2019. World Health Organization, n.d.
- Margulis J. A new book exposes hard truths about vaccines. *The Epoch Times*, Sep. 21, 2022.
- Exley C. Aluminium-based adjuvants should not be used as placebos in clinical trials. *Vaccine*. 2011;29(50):9289.
- Anonymous. *Turtles All the Way Down: Vaccine Science and Myth* (Zoey O'Toole and Mary Holland, Eds.). The Turtles Team, 2022.
- Moskowitz R. *Vaccines: A Reappraisal*. Skyhorse Publishing, 2017.
- Gardasil and HPV infection: get the facts. National Vaccine Information Center, Feb. 21, 2007.
- Angell M. Drug companies & doctors: a story of corruption. *The New York Review*, Jan. 15, 2009.
- Lazarus R, Klompas M. *Electronic Support for Public Health—Vaccine Adverse Event Reporting System (ESP:VAERS)*. Harvard Pilgrim Health Care, Inc., 12/01/07 – 09/30/10. Final report submitted to the Agency for Healthcare Research and Quality.
- [https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&VAX\[\]=COVID19&VAX\[\]=COVID19-2](https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&VAX[]=COVID19&VAX[]=COVID19-2)
- [https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&VAX\[\]=COVID19&VAX\[\]=COVID19-2&DIED=Yes](https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=AGE&EVENTS=ON&VAX[]=COVID19&VAX[]=COVID19-2&DIED=Yes)
- NVIC. VAERS database hijacked: vaccine data tracker compromised, adverse events deleted. *The Vaccine Reaction*, May 3, 2022.
- <https://www.hrsa.gov/sites/default/files/hrsa/vicp/11-01-22-VICP-Stats-508%20Compliant.pdf>
- Overview of the National Childhood Vaccine Injury Act of 1986. National Vaccine Information Center, n.d.
- <https://www.hrsa.gov/sites/default/files/hrsa/vicp/vicp-fact-sheet.pdf>
- Mattera P. Merck: corporate rap sheet. Corporate Research Project, last updated May 16, 2016. <https://www.corp-research.org/merck>
- Tapscott M. Nonprofit watchdog uncovers \$350 million in secret payments to Fauci, Collins, others at NIH. *The Epoch Times*, May 9, 2022.
- <https://www.supremecourt.gov/opinions/10pdf/09-152.pdf>
- <https://www.phe.gov/Preparedness/legal/prepact/Pages/default.aspx>
- Children's Health Defense. *Conflicts of Interest Undermine Children's Health* [eBook]. April 2019.
- Children's Health Defense. The FDA, CDC, media and politicians receive money from vaccine makers. Vaccine Secrets, Chapter 18, n.d.
- Taylor G. Examining RFK Jr.'s claim that the CDC “owns over 20 vaccine patents.” GreenMedInfo, Jan. 17, 2017.
- Burdick S. Megyn Kelly interviews RFK, Jr.: How Pfizer killed the vaccine safety commission. *The Defender*, Oct. 27, 2022.
- Alexandrov PN, Pogue AI, Lukiw WJ. Synergism in aluminum and mercury neurotoxicity. *Integr Food Nutr Metab*. 2018;5(3):10.
- Goldman GS. Comparison of VAERS fetal-loss reports during three consecutive influenza seasons: was there a synergistic fetal toxicity associated with the two-vaccine 2009/2010 season? *Hum Exp Toxicol*. 2013;32(5):464-475.
- Miller NZ. Combining childhood vaccines at one visit is not safe. *Journal of American Physicians and Surgeons*. 2016;21(2):47-49.
- Goldman GS, Miller NZ. Relative trends in hospitalizations and mortality among infants by the number of vaccine doses and age, based on the Vaccine Adverse Event Reporting System (VAERS), 1990–2010. *Hum Exp Toxicol*. 2012;31(10):1012-1021.
- How to reduce vaccine hesitancy. Vaccine Choice Canada. <https://vaccinechoicecanada.com/in-the-news/how-to-reduce-vaccine-hesitancy/>
- Kuntz T. *Dare to Question: One Parent to Another*. CreateSpace Publishing, 2018.
- Children's Health Defense. *The Sickest Generation: The Facts Behind the Children's Health Crisis and Why It Needs to End* [eBook]. September 2018.
- Kennedy RF Jr. The ongoing thimerosal travesty needs to end. *Wise Traditions*. Spring 2018;19(1):29-35.
- Thimerosal and vaccines. Centers for Disease Control and Prevention, last reviewed Aug. 25, 2020.
- Mercola J. Aluminum in vaccines linked to 36% higher risk of asthma. *The Defender*, Oct. 24, 2022.
- Shaw CA, Petrik MS. Aluminum hydroxide injections lead to motor deficits and motor neuron degeneration. *J Inorg Biochem*. 2009;103(11):1555.
- Aluminium DOES cause Alzheimer's: Expert says new findings confirm the metal plays a role in the devastating brain disease. *Daily Mail*, Dec. 19, 2016.
- Shaw CA, Tomljenovic L. Aluminum in the central nervous system (CNS): toxicity in human and animals, vaccine adjuvants, and autoimmunity. *Immunol Res*. 2013;56(2-3):304-316.
- High aluminum found in autism brain tissue. Children's Health Defense, Nov. 28, 2017.



39. Deisher TA, Doan NV, Koyama K, Bwabye S. Epidemiologic and molecular relationship between vaccine manufacture and autism spectrum disorder prevalence. *Issues in Law & Medicine*. 2015;30(1):47-70.
40. 2021 update: COVID-19 vaccines using aborted fetal cell lines. *A Voice for Truth*, Nov. 14, 2021.
41. Nelson K. Tiny but toxic: nanoparticles in vaccines. *Wise Traditions*. Summer 2021;22(2):77-88.
42. Swift R, O'donnell C. Moderna to recall COVID-19 doses in Japan after stainless steel contaminants found. Reuters, Sep. 1, 2021.
43. <https://usafacts.org/visualizations/covid-vaccine-tracker-states/>
44. Mercola J, Cummins R. *The Truth About COVID-19: Exposing The Great Reset, Lockdowns, Vaccine Passports, and the New Normal*. White River Junction, VT: Chelsea Green Publishing, 2021.
45. Doshi P. Peter Doshi: Pfizer and Moderna's "95% effective" vaccines—let's be cautious and first see the full data. *BMJ Opinion*, Nov. 26, 2020.
46. Cunningham AS. COVID-19 vaccine candidate is unimpressive: NNTV is around 256. Nov. 13, 2020 comment on Elisabeth Mahase, Covid-19: Vaccine candidate may be more than 90% effective, interim results indicate. *BMJ*. 2020;371:m4347.
47. Chung F. Pfizer did not know whether Covid vaccine stopped transmission before rollout, executive admits. News.com.au, Oct. 13, 2022.
48. Berenson A. No, the vaccines never worked all that well against severe Covid. *Unreported Truths*, Substack, Sep. 23, 2022.
49. Peirnas C, Patone M, Astbury NM, et al. Associations of BMI with COVID-19 vaccine uptake, vaccine effectiveness, and risk of severe COVID-19 outcomes after vaccination in England: a population-based cohort study. *Lancet*. 2022;10(8):571-580.
50. Jones W. Vaccination increases infection risk by 44%, Oxford study finds. *The Daily Sceptic*, Sep. 28, 2022.
51. Mercola J. Record surge of infections in children. Mercola, Nov. 4, 2022. <https://oh17.com/video/record-surge-infections-children.pdf>
52. Nass M. Rapid rollout of new COVID boosters with no human trials—"a tale of recklessness." *The Defender*, Sep. 6, 2022.
53. Stieber Z. Bombshell emails: CDC pressured FDA to authorize COVID boosters without clinical trials. *The Defender*, Oct. 27, 2022.
54. Burdick S. CDC, FDA are deliberately "breaking the law," Dr. Meryl Nass tells RFK, Jr. *The Defender*, Nov. 4, 2022.
55. Tenpenny S. *20 Mechanisms of Injury* [eBook]. <https://drtenpenny.com/product/20-mechanisms-of-injury-ebook-1-20/>
56. Beattie K. Worldwide Bayesian causal impact analysis of vaccine administration on deaths and cases associated with COVID-19: a BigData analysis of 145 countries. ResearchGate, November 2021.
57. Official government data suggests the fully vaccinated are suffering antibody-dependent enhancement; and the newly published Pfizer documents prove Pfizer & the FDA knew it would happen. *The Exposé*, Apr. 3, 2022.
58. Johnson LD. UK hospital data shocks the world: 80% of COVID deaths are among the vaccinated. . . COVID deaths up 3,000% after vaccine wave. Newstarget, Sep. 28, 2021.
59. Australia, Israel report 95-99% hospitalized fully vaccinated. NewsRescue, Aug. 8, 2021.
60. Wolfe R. "Fully vaccinated" were the majority of COVID deaths in Sweden, UK in September. *LifeSiteNews*, Oct. 20, 2021.
61. Jackson LA, Anderson EJ, Rouphael NG, et al. "An mRNA vaccine against SARS-CoV-2—Preliminary Report." *N Engl J Med*. 2020;383(20):1920-1931.
62. Crawford M. Leaked Pfizer post-marketing safety report. *Rounding the Earth Newsletter*, Substack, Dec. 2, 2021.
63. Mercola J. Newly released Pfizer documents reveal COVID jab dangers. Sustainable Freedom Lab, Mar. 23, 2022.
64. Release of Pfizer documents. Lawyers for Justice, Mar. 20, 2022. <https://lawyersforjusticeireland.wordpress.com/2022/03/20/release-of-pfizer-documents/>
65. Breaking news: ICAN obtains CDC V-safe data. Informed Consent Action Network, Oct. 3, 2022.
66. Kirsch S. New VAERS analysis reveals hundreds of serious adverse events that the CDC and FDA never told us about. *Steve Kirsch's newsletter*, Substack, Nov. 9, 2021.
67. Mercola J. How cancer deaths from the COVID jabs are being hidden. *The Epoch Times*, Oct. 14, 2022.
68. UK report shows immune systems are failing at a rate of 5% a week. <https://www.brighteon.com/bfaeb7a9-ea86-4be8-97f6-70b30fe9c426>
69. Kirsch S. Bhakdi/Burkhardt pathology results show 93% of people who died after being vaccinated were killed by the vaccine. *Steve Kirsch's newsletter*, Substack, Dec. 28, 2021.
70. Cáceres M. FDA withholds autopsy results of those who died after COVID shots. *The Vaccine Reaction*, Oct. 9, 2022.
71. Smalley J. Soaring deaths of even younger Americans. *Dead Man Talking*, Substack, Oct. 23, 2022.
72. TVR staff. FDA, CDC green light Pfizer's experimental COVID biologic for children 5 to 11 years old. *The Vaccine Reaction*, Nov. 7, 2021.
73. Associated Press. CDC gives final approval for Pfizer's COVID shot for kids 5-11. *MarketWatch*, Nov. 2, 2021.
74. Coronavirus (COVID-19) update: FDA authorizes Moderna and Pfizer-BioNTech COVID-19 vaccines for children down to 6 months of age. U.S. Food and Drug Administration, Jun. 17, 2022.
75. Burdick S. "Child abuse on a massive scale": CDC advisers recommend adding COVID vaccines to childhood schedule. *The Defender*, Oct. 20, 2022.
76. <https://www.hrsa.gov/cicp/cicp-data>
77. Children's Health Defense Team. "Self-spreading" vaccines pose multiple risks to society—including the end of informed consent. *The Defender*, Jun. 2, 2021.
78. Watson C, Sell TK, Watson M, et al. *Technologies to Address Global Catastrophic Biological Risks*. Johns Hopkins Bloomberg School of Public Health, Center for Health Security, 2018.
79. Delaney P. America's Frontline Doctors: COVID-vaccinated can "shed" spike protein, harming unvaccinated. *LifeSiteNews*, May 3, 2021.
80. [https://media.tghn.org/medialibrary/2020/11/C4591001\\_Clinical\\_Protocol\\_Nov2020\\_Pfizer\\_BioNTech.pdf](https://media.tghn.org/medialibrary/2020/11/C4591001_Clinical_Protocol_Nov2020_Pfizer_BioNTech.pdf)
81. Hansen T, Titze U, Kulamadayil-Heidenreich NSA, et al. First case of postmortem study in a patient vaccinated against SARS-CoV-2. *Int J Infect Dis*. 2021;107:172-175.
82. Hanna N, Heffes-Doon A, Lin X, et al. Detection of messenger RNA COVID-19 vaccines in human breast milk. *JAMA Pediatr*. 2022 Sep 26;e223581.
83. Vaccine RNA in breast milk. Dr. John Campbell, n.d. <https://www.youtube.com/watch?v=luF1oPyh8OY>
84. [https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/discontinued\\_vaccines.pdf](https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/discontinued_vaccines.pdf)

85. Pfizer initiates phase 3 study of mRNA-based influenza vaccine. Pfizer press release, Sep. 14, 2022.
86. Moderna announces first participants dosed in phase 3 study of seasonal influenza vaccine candidate (mRNA-1010). Moderna, Jun. 7, 2022.
87. Children's Health Defense Team. Pfizer works to fast-track more vaccines for pregnant moms, despite mounting evidence rushed COVID shots harmed babies. *The Defender*, Nov. 9, 2022.
88. Nevradakis M. First RSV emergency declared as Pfizer and GSK race to get vaccines approved. *The Defender*, Nov. 8, 2022.
89. Children's Health Defense Team. Big pharma eyes next childhood vaccine cash cow—mRNA vaccines for RSV. *The Defender*, Aug. 19, 2021.
90. Executive order on advancing biotechnology and biomanufacturing innovation for a sustainable, safe, and secure American bioeconomy. The White House, Sep. 12, 2022.
91. Children's Health Defense Team. A “vaccine-palooza” is underway, thanks to COVID—but will public accept endless jabs? *The Defender*, Jul. 12, 2022.
92. Teller M. Parsing the digital identity agenda—or, why QR codes are not your friend. *Wise Traditions*. Summer 2022;23(2):44-49.
93. Nelson K. Covid-19 injections and the global control grid—just say no. *Wise Traditions*. Spring 2022;23(1):83-92.
94. Taylor G. 160 research papers supporting the vaccine/autism link. <https://www.scribd.com/doc/220807175/160-Research-Papers-Supporting-the-Vaccine-Autism-Link>
95. <http://www.truthwiki.org/dr-william-thompson/>
96. <https://vaxxed.com/thompson-file-releases/>
97. <https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>
98. Kristen K. Japan leads the way: no vaccine mandates and no MMR vaccine = healthier children. Children's Health Defense, Apr. 23, 2019.
99. Bethell CD, Kogan MD, Strickland BB, et al. A national and state profile of leading health problems and health care quality for US children: key insurance disparities and across-state variations. *Acad Pediatr*. 2011;11(3 Suppl):S22-S33.
100. Kennedy RF Jr. 10 facts every parent needs to know about vaccinations. Children's Health Defense, Feb. 28, 2020.
101. Merikangas KR, He JP, Burstein M, et al. Lifetime prevalence of mental disorders in US adolescents: results from the National Comorbidity Study-Adolescent Supplement (NCS-A). *J Am Acad Child Adolesc Psychiatry*. 2010;49(10):980-989.
102. <https://www.cdc.gov/ncbddd/developmentaldisabilities/index.html>
103. <https://allergyasthmanetwork.org/what-is-eczema/eczema-statistics/>
104. <https://nces.ed.gov/programs/coe/indicator/cgg>
105. <https://allergyasthmanetwork.org/what-is-asthma/asthma-statistics/>
106. ADHD: Alarms raised—risks ignored. Children's Health Defense, Nov. 19, 2019.
107. <https://www.foodallergy.org/resources/facts-and-statistics>
108. Fluegge M. Vaccines blamed for alarming increase in seizure disorders among children. *Vactruth*, Jun. 25, 2016.
109. Burdick S. 1 in 30 U.S. kids diagnosed with autism in 2020—what's behind the surge? *The Defender*, Jul. 14, 2022.
110. <https://www.acco.org/us-childhood-cancer-statistics/>
111. Miller NZ, Goldman GS. Infant mortality rates regressed against number of vaccine doses routinely given: is there a biochemical or synergistic toxicity? *Hum Exp Toxicol*. 2011;30(9):1420-1428.
112. Unvaxxed kids healthier than vaxxed with Russell Blaylock, M.D. Tea Time, CHD.TV, Oct. 3, 2022.
113. <https://childrenshealthdefense.org/wp-content/uploads/Vaxxed-Unvaxxed-Parts-I-XII.pdf>
114. Mawson AR, Ray BD, Bhuiyan AR, et al. Pilot comparative study on the health of vaccinated and unvaccinated 6- to 12-year old U.S. children. *J Transl Sci* 3: DOI: 10.15761/JTS.1000186.
115. Zinberg J. California makes it illegal for doctors to disagree with politicians. *New York Post*, Oct. 10, 2022.
116. Shir-Raz Y, Elisha E, Martin B, et al. Censorship and suppression of Covid-19 heterodoxy: tactics and counter-tactics. *Minerva*. 2022 Nov 1;1-27.



## A Message to Grandparents

Sharing special meals and treats is a wonderful way to spend time together and create memories. But whether they help or hurt your grandchildren's health depends on which foods you choose.

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# Farm and Ranch

## FOUR WAYS TO MITIGATE THE RISK OF A FOOD SHORTAGE

By Brad Martin (An Unconventional Farmer)

Among the headlines informing us of war, school shootings, raging inflation, climate events and monkeypox, there are also stories of looming food shortages.

I'm not enough of an economist to know whether we are heading for a recession, depression or "great reset," so I'll pass on commenting on that, but as a farmer I can give my perspective on the food shortage situation.

It is hard for many to imagine we could have food shortages in North America where we have so much food, where widespread obesity is a problem and where we have such an abundance of grain we have to feed it to ruminant animals and burn it in our cars (in the form of corn-based ethanol) to get rid of it.

However, the old proverb is "Nature always bats last," so maybe we are starting to see nature's response to modern agriculture. I will admit modern agriculture produces a lot of food, but I am not so sure the food is actually good for us and even less sure that it is sustainable. Meanwhile, I am very certain it hangs on some very delicate threads.

### A CYCLE OF DEPENDENCY

There was great consternation in the farming community last winter when the specter of a manufactured nitrogen fertilizer shortage appeared. Most farmers did not think they could grow much of a crop without it. In the end, it was available, but at double or triple the cost of previous years.

These events drove home the point that modern agriculture is totally dependent on manufactured fertilizer, as well as glyphosate, genetically modified seeds and diesel fuel. Anything that restricts access to any of these things will decrease food output. We are seeing how quickly an event like war can disrupt the supply of inputs.

Even beyond that, modern agriculture has created a cycle of dependency. The more you use chemical fertilizers and herbicides, the less natural your soil life will be, and the more you will need to add more fertilizer and herbicides. It becomes a vicious cycle that makes farmers dependent on the large fertilizer and herbicide companies, which have become wealthy from this treadmill.

That's on the crop side. On the animal husbandry side, modern agriculture has developed the same dependence on manufactured solutions. It may be efficient to put twenty thousand chickens in the same barn, but it is also convenient for pathogens to have close contact with so many potential hosts. Along with this model, therefore, come the vaccines, antibiotics and biosecurity deemed necessary to keep the animals alive. And even with all these measures, industrial farmers are not staying ahead of nature. I don't think it is a coincidence that the two species that are factory farmed the most—pigs and chickens—have the most severe disease outbreaks.

It annoys me that no one ever talks about the root causes of these outbreaks—such as overcrowding, lack of sunshine, exposure to excrement and unnatural diets. Instead, wildlife and outdoor-raised animals get blamed for spreading these diseases. The "solutions" proposed include having farmers who raise animals on pasture move their pigs, cows and chickens inside—away from contact with wildlife—and exterminating all flocks in the vicinity of an outbreak to "contain the spread."

Yet it seems the larger that factory farms become, and the more they isolate, vaccinate, medicate and disinfect, the worse the outbreaks become. Instead of looking at solutions like spreading out animal production among thousands of small flock holders, industry simply invents and gives more vaccines and antibiotics, while biosecurity measures become harsher and disinfecting measures become more rigorous. This is a continuous, losing battle against nature, but it makes pharmaceutical companies wildly wealthy.

### WORKING WITH NATURE

Thus, we come to the crux of the matter concerning the difference between sustainable regenerative farming and conventional modern farming. Modern agriculture wants to control the environment in which it raises plants and animals, whereas regenerative farmers want plants and animals to adapt to the environment in which they are raised.

This is the journey we are on. The more we can work with nature instead of against it, the less dependent we will be on manufactured solutions. In our case, we are not a completely self-sufficient, off-the-

grid farm yet, but I can confidently say the pastures we graze to produce milk and meat do not need (or get) any chemical fertilizers, glyphosate or genetically modified seeds. Our animals are in a natural environment on a natural diet. As a result, they are healthy enough that we do not have to worry about the diseases that visitors or wildlife might bring onto our farm. This philosophy also permeates my own lifestyle. I focus on a diet of grass-fed products to strengthen my immune system rather than depend on vaccines to protect me against the environment in which I live.

## VOLATILE TIMES

To go from the philosophical to the practical, here are some things we know about factors affecting the food supply. First, we have a blockade preventing Ukraine from shipping wheat. Second, we have a bird flu that has killed over thirty million birds (directly or through extermination). Third, thousands of beef animals died in Kansas, with their death attributed to a heat wave. Fourth, we have had many unexplained fires at large food processing plants. Fifth, we have major volatility in the diesel fuel and nitrogen markets. Finally, we have volatility in our weather systems.

With the amount of food exported from Canada and North America, I don't think we are going to see widespread food shortages here. More realistically, we will see food prices rise sharply, and we may have fewer food choices. For example, there could be shortages of chicken due to bird flu and a fire at the Cargill poultry processing plant in London, Ontario.

The near tripling of nitrogen prices will drive up the cost of almost everything, because if something isn't organic, it was probably raised with nitrogen. To understand why nitrogen is so popular among plant growers, think about what steroids do for people—nitrogen is like steroids for plants. With chemically produced nitrogen, growers can easily double or triple the amount of food they can harvest; because they are paid for volume, not quality, all conventional growers use it. (This applies to many home gardeners, too.) However, think about what we know about the side effects of steroids—the same holds true for nitrogen fertilizers. Healthy soils have a very intricate system for capturing nitrogen from the air and making it available to plants in moderate amounts.

In addition to the rising cost of nitrogen, costs for fuel and labor are surging. Thus, some companies may choose to drop some of their not-so-popular products and focus more on the basics. Again, this would have the result of reducing some of the variety we are accustomed to seeing in our grocery stores.

## BUILDING RESILIENCE

Now, having said I don't think we will see major food shortages in North America, here comes the disclaimer. All it would take is an event like worsening weather conditions, a widening of war or further disruption to the fuel supply, and things could deteriorate extremely quickly.

One of the important lessons I learned when there was a brief run on food during the early days of Covid was how fast we sell out if there is an unexpected uptick in demand—and how long it takes to rebuild inventory again. To get a sense of timelines, it takes us eight weeks to fatten a chicken, four months to fatten a hog and a year to fatten a cow.

So, if there is a run on food and we sell out, we can't have products for you tomorrow.

What are some steps you can take to mitigate the risk of food shortages? First, pre-order your meat. By systematically booking ahead and reserving your quarters, sides or whole animals, you can ensure you will always have food coming in. Your farmer won't sell that side of beef to someone else if you have it reserved. It also helps us as farmers to have a clearer picture of how many animals to enter into production, or how many new customers to take on.

Second, buy shares in a CSA (community-supported agriculture). This is another good food security system. Again, it connects you to an actual grower who can gauge how much product to plant by the number of shares purchased.

Third, have three months' worth of food on hand. I stole this food security idea from a financial adviser who proclaimed that the most important step for financial security is to have an emergency fund that can cover three months' worth of expenses in case your income dries up. This buys you time to find another source of income. The same principle can be used to ensure food security, in case there are gaps in food availability.

Alas and alack, some of us may not have enough savings to get us through three months if our income dries up. In that scenario, the financial advisor suggested breaking the emergency fund down into smaller increments and at least working toward saving up for one month. Likewise, if you don't have the space or budget to stock up on three months of food, you can work toward stocking up on one month of food. This way, you still have something to bridge the gaps if food availability becomes spotty.

Finally, remember that no man is an island. None of us will ever be completely self-sufficient. We will always need other people to help us survive, so let's work on building relationships and networks with like-minded people.

It's also important to stay positive. God is big, and we are small, so let's not get dragged down worrying about things we can't control anyway. It would be a shame to miss out on enjoying current blessings by worrying about future problems. ☯☯

WISE TRADITIONS ANNUAL FARM TOUR



Tour guides Will Winter and Kathy Kramer, volunteer Mike Mudrak and tour guide Steve Campbell helped create a wonderful day for one hundred WAPF conference attendees.



A big group, ready to learn.



ABOVE: Laura and Brad Cox produce vegetables, flowers and livestock on a small piece of land.



LEFT: At Alex and Shannon Miller's Lick Skillet Farm, Matthew Howell explains the importance of regenerative farming practices.

RIGHT: Savannah Hartman explains raw milk production on Our Family Farm.



Taking notes!



Tennessee State Senator Frank Niceley of Riverplains Farm raises pastured beef and open-pollinated corn from ancient Mexican tribes.

Making friends!



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Fall 2020	Toxic Iron, Arsenic and Anthrax, Traditional Foods of Morocco; Modified Food Starch.
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**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.

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Cod Liver Oil, Our Number One Superfood  
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Nutrition for Mental Health  
A Message to Grandparents

Butter Is Better  
Soy Alert!  
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Vaccination Dangers

Covid-19: Contagious Virus or 5G Microwave Technology?

Suggested donation for flyers is 25¢ each (includes shipping), 15¢ each for 50 or more

Make checks payable to The Weston A. Price Foundation OR order online at [westonaprice.org](http://westonaprice.org) or by phone (703) 820-3333

## RAW MILK UPDATES

by Pete Kennedy, Esq.

### NATIONAL - MORE STATES ALLOWING RAW PET MILK SALES

The sale of raw pet milk is legal in nearly all states; national manufacturers of raw pet dairy sell milk and other products such as kefir and cheese in most of them. In many of these states, however, there have been no reports of local farmers receiving government approval to sell raw pet milk. That looks to be gradually changing; over the past couple years farmers have been approved to sell raw pet milk in Delaware, New Jersey and Virginia. During a time of rising feed and fuel costs for Grade A dairies, along with pay prices that don't offset the rising cost of inputs, selling raw pet milk is another potential revenue stream.

Most states have adopted as law the model publication of the Association of the American Feed Control Officials (AAFCO), a document that governs the production and distribution of commercial feed, including pet food. There is a section in the model publication on feed terms which provides a definition for "milk"; the definition does not state that the milk must be pasteurized. Any state that adopts the feed terms section has legalized the sale of raw pet milk unless its statutes or regulations state otherwise.

Farmers wanting to sell raw pet milk in most states will either apply for a commercial feed permit or file an application for registration with the state department of agriculture; part of the process also includes submitting labels for the raw dairy products the farmer wants to sell. States typically require that the labels contain the statement "for animal consumption only" or "for dogs and cats." It is not the producer's legal responsibility to follow their customers home to find out who is actually consuming the raw pet milk, but if customers make it clear that they will be using the milk for human consumption then the farmers are running the risk of a misbranding charge if they go through with the sale. In this context, misbranding means knowingly selling a product for a purpose other than the purpose indicated on the label. There are some states such as Nevada that require that a toxic dye or denaturant be added to the milk; in trying to prevent humans from consuming raw pet milk, these states are destroying the market for the product—people aren't interested in poisoning their pets.

States shouldn't be able to deny a license or registration application to sell raw pet milk when their laws allow it. We hope that more states will be approving farmers to sell raw pet dairy going forward.

## Do you drink Real Milk?

Support the Foundation that has made real, raw milk widely available. Membership fees and donations to WAPF support:

- Ongoing administration of [realmilk.com](http://realmilk.com)
- Updates on [westonaprice.org](http://westonaprice.org) and in *Wise Traditions*
- Scientific information on raw milk benefits and safety
- Founded the Farm-to-Consumer Legal Defense Fund to protect raw milk producers
- WAPF chapter system helps you find raw milk in your area.

Raise a glass and support the efforts of the Weston A. Price Foundation to keep raw milk flowing for you and your family.  
[westonaprice.org](http://westonaprice.org) and [realmilk.com](http://realmilk.com)



## PENNSYLVANIA - AMOS MILLER CASE

In 2016 the United States Department of Agriculture (USDA) began investigating Lancaster County dairy farmer Amos Miller for alleged violations of federal meat and poultry inspection laws. The civil court action the USDA subsequently launched against Miller<sup>1</sup> and his business, Miller's Organic Farm, is closer to a final resolution. The latest development in the case opens the way for the farmer and the department to resolve the case.

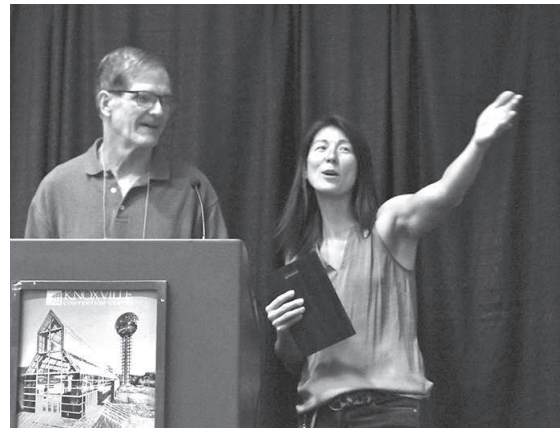
On December 9, Miller and the United States government entered into a settlement ("Consent Decree") over fines and reimbursement to the USDA for expenses incurred related to Miller being in civil contempt of a 2019 injunction the court entered against Miller prohibiting the farmer "from committing continued violations of the Federal Meat Inspection Act. . . . And the Poultry Products Inspection Act. . . ." <sup>2</sup> In a prior court action, Judge Edward G. Smith had levied a \$250,000 fine against Miller and awarded USDA reimbursement of over \$55,000 in the case.

Under the December 9 agreement, Miller will reimburse USDA its expenses and pay \$30,000 of the assessed fine to the court with the remainder of the fine being "held in abeyance." The consent decree leaves open the possibility that the court could rescind the remainder of the fine if Miller complies with the terms of the agreement. Miller currently has thousands of dollars of meat and poultry products in inventory that USDA orders prohibit him from selling or releasing in any way. The consent agreement provides that he could sell some of the inventory to members of his buyers club by December 31. As for the remainder of the product in inventory under the agreement, Miller has the options of either separating some of it for his personal use, selling it to a licensed pet food manufacturer or voluntarily destroying it. After December 31, 2022, all product still in Miller's inventory will be subject to immediate denaturing and destruction. Under the agreement, once the product is denatured "acceptable destruction methods and means include (a) deposit in a landfill, (b) deposit in compost, (c) rendering and (d) diverting the product to pet food."<sup>2</sup>

Once Miller carries out the terms of the consent decree, the path should be clear for him to reach agreement with the USDA on a custom slaughter plan that will allow him to slaughter and process animals on his farm without inspectors being present. The custom slaughter plan could set a favorable precedent for farmers and custom slaughter operators around the country. With the widespread publicity the Miller case has received, the USDA and the court know that many are watching what they do, something that bodes well for Miller to be able to continue making a living producing healthy food for his grateful patrons.

1. United States of America v. Miller's Organic Farm and Amos Miller. The case is in the United States District Court for the Eastern District of Pennsylvania.
2. "Second Consent Decree," United States of America v. Miller's Organic Farm and Amos Miller, Civil Action No. 19-cv-1435.

## RAW MILK FUNDRAISER



Tennessee State Senator Frank Niceley and Shawn Day receive the Raw Milk Activist Award presented by Pete Kennedy at the Raw Milk Fundraiser, held Thursday, October 20 to kick off Wise Traditions 2022. The Farmer of the Year award went to Billie Johnson (not pictured).

## 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](mailto:pete@realmilk.com).



# Healthy Baby Gallery

Josephine was made of sunshine, raw milk and oysters, all of which her mom craved during her pregnancy. However, Josephine was in a big hurry to get here. She arrived two months early at 3 lbs 12 oz, and she stayed in the hospital fifty-three days. She was sent home with formula full of corn syrup solids and other horrid things, but she immediately switched to exclusively breast milk. She is a thriving nine-pounder now. Mom consumes pastured eggs, pastured and local meats, shellfish, sardines, raw milk, grass-fed butter, liver pâté, sourdough bread and organic veggies. People regularly remark on how peaceful, joyful, energetic and beautiful Josephine is. The family is so grateful for the education received from the Weston A. Price Foundation to nourish their sweet daughter's fragile body into health!



Nicholas at ten months is enjoying robust health! During pregnancy, mom drank raw milk, ate a nutrient-dense diet and took fermented cod liver oil. Nicholas loves breast milk and eats everything his family eats—lots of eggs, liver pâté, salmon, meat from local farms and raw dairy. He is the happiest baby. His parents are so grateful we found out about WAPF and ancestral eating!

**Breast is Best.**

**But for those who can't, we recommend:**

## WAPF Homemade Baby Formulas

Developed by Dr. Mary Enig, with a PhD in nutritional sciences, and used successfully for twenty years.

- Safe and nutrient-dense.
- Raw Milk-Based formula developed to mimic human milk.
- Liver-based formula for those unable to consume milk.

<https://www.westonaprice.org/health-topics/childrens-health/formula-homemade-baby-formula>



# Local Chapters

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

## COMMUNITY SUPPORT NEEDED

Shan Kendall (long-time chapter leader and member) lost her house in a fire.

A fundraiser page was set up by friends for those who wish to help:

[https://givesendgo.com/ShanandDavid?utm\\_source=sharelink&utm\\_medium=copy\\_link&utm\\_campaign=ShanandDavid](https://givesendgo.com/ShanandDavid?utm_source=sharelink&utm_medium=copy_link&utm_campaign=ShanandDavid)

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## NORTH GEORGIA

The chapter's monthly meeting was the seventh annual WAPF giving potluck. A good time was had by lots of folks thankful for WAPF!



# Local Chapters

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CONTRA COSTA TRI-VALLEY, CALIFORNIA  
Chapter leaders and presenters learn the ins and outs of raising backyard chickens. Pictured left to right: Patricia Moore, new co-chapter leader; Marianna Juergens, DVM, presenter; Myra Nissen, co-chapter leader; and Diane Dovhouluk, presenter.

# Local Chapters

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## ALEXANDRIA, VIRGINIA

Twenty-seven people attended a wonderful talk about “homeopathy for first aid” led by Dr. Aaron Steiner. Attendees also enjoyed a full table of food and a gorgeous day.



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## SOUTHAMPTON, NEW JERSEY

The chapter had a lovely meeting covering a wide range of topics: raw milk, effective microorganisms, vaccines, Covid—and the importance of strengthening the immune system through real traditional foods the Weston A. Price way.

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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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A big turnout for the August meeting of the Houston, Texas, chapter.

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## HEALTH FREEDOM BILLBOARDS IN EIGHT STATES

Volunteer-run health freedom group Firefly Front gets an estimated ninety thousand views per month from its billboard campaign featuring slogans like “Love your neighbor. Protect health freedom. #NoVaccineMandates.”





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## CHAPTER RESOURCES

Resources for chapter leaders can be accessed at [westonaprice.org/local-chapters/chapter-resources](http://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 445 local chapters:  
368 serve the District of Columbia and every state in the U.S. except  
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## LOCAL CHAPTER CHAT GROUP

Our chapter leaders have a wonderful secure platform to carry on our many beneficial discussions, developed by Jay Hamilton-Roth, the husband of one of our chapter leaders. We encourage all 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](mailto:outreach@westonaprice.org).

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

Ecofarm Florida Diverse Earth & WAPF-Friendly Farm serving the Tampa Bay area. Pastured water buffalo products, organically grown vegetables and seasonal fruits, edible container plants and trees. Farm buying club and produce available at two markets. ecofarmfl@yahoo.com, (813) 708-3179.

## GA

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

## ID

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

## IL

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

line 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 (513) 646-8739.

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

## MA

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

## MD

Chesapeake's Bounty: A local foods market in North Beach and St. Leonard. Local seafood, produce, meat, dairy, baked goods and plants. All products are grown, caught or processed in the Chesapeake Bay region. Chesapeakebounty.com StL: (410) 586-3881 (7 days week) or NB: (443) 646-5700 (Fri, Sat, Sun)

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 **Buckeyetown 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..

## NC

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

## NY

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

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

## OH

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

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.

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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

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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.

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. Cows are fed no grains. Also grass-fed beef and pastured chickens, turkeys and eggs. All soy-free, no hormones or synthetics. On-farm sales, **will ship cheese.** Wil-Ar Farm, Newville, PA (717) 776-6552.

## 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 - grass-finished 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

Larson Farm RAW MILK for sale from our own certified organic, 100% grass-fed, verified A2A2 Jersey cows. Also, yogurt, butter, gelato, grass-fed beef from our farm, and other local products, including soy-free organic eggs. Close to the NY border, 1 hour from Saratoga Springs, 1.5 hours from Albany. We have Airbnb. Come visit our friendly cows, and learn about rotational grazing and land restoration! Larson Farm and Creamery, Wells, VT. Larsonfarmvermont@gmail.com or (802) 645-1957. www.larsonfarmvt.com.

## 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

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

Contact us for prices and bookings thisisdenis@startmail.com..

**Farm Operator Position,** Pahoia, Hawaii. Grass-fed beef. Tropical fruit. Offered: food produced on farm for personal consumption; furnished 2br house; off grid; cash income: share of fruit and flower sales. Essential: knowledge, experience. For details, brief introduction/bio and references to jamesweatherfordphd@gmail.com.

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

**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.

**Vermont Raw Milk Business and Creamery seeks Manager.** Larson Farm and Creamery selling raw organic milk and pasteurized dairy products from our 30-cow organic, verified 100% grass-fed A2A2 Jersey herd, seeks a Manager. Responsibilities include some production work and development, supervising employees and managing sales and marketing with a milk contract with the cow dairy. Potential for a successful manager to work into ownership of the creamery business. Housing possible. Possible dairy cow work for a second person. Contact: Larsonfarmvermont@gmail.com or (802) 645-1957. www.larsonfarmvt.com.

## 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.



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## DVDS/ON-LINE VIDEOS/BOOKS

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

**For sale: 67 Wise Traditions journals;** 2001-2020 in good to excellent condition. Will sell all for \$400 including shipping (OBO). Missing W2003, Su2005, W2007, Su2009 and F2012. (540) 626.5287, [ldt-wpw@gmail.com](mailto:ldt-wpw@gmail.com)

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

## HEALTHY FOOD/PRODUCTS

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

**FLUORIDE FREE AMERICA** Mission: Enhancing communication between individuals and organizations to exchange information and create strategies to end water fluoridation. [facebook.com/waterliberty](http://facebook.com/waterliberty) \* [Twitter.com/FluorideFreeAmerica/waterliberty](http://Twitter.com/FluorideFreeAmerica/waterliberty) \* 70% of Americans are fluoridated. **JOIN IN THE EFFORT TO END FLUORIDATION** - You have the right to safe drinking water.

**HEARTH AND HOMESTEAD LLC** Hand-crafted fine soaps, balms, butters, postpartum and baby products featuring pastured goat milk, tallow, lard, organic herbs and essential oils. Family owned in Hurt, VA. Visit [www.hearthatndhomesteadstore.com](http://www.hearthatndhomesteadstore.com) and use coupon code: WAPF for 20% off your first order! (434) 324-0106.

**Sourdough Einkorn Bread** Made with fresh milled, organic, locally grown einkorn wheat. The most ancient wheat, einkorn, is easily digestible and much lower in gluten. Over 80% of people with celiac disease feel good on einkorn. Over 90% of the ingredients in my delicious bread are locally sourced. To order or for information including a list of all our products, call Anna Fisher at Anna's Healthy Bakery (814) 349-2298. Leave a message (w/ phone number) or call between 9-9:30 am Mon-Thurs.

**TRADITIONAL HEALTH FIRST.** Offering all Green Pasture's products including Blue Ice Fermented Cod Liver - Fermented Skate Liver Oil - X Factor Gold High Vitamin Butter Oil both in liquid and capsules, Infused (with FCLO) Coconut Oil and Pure Indian Foods Ghee. Prescript Assist Probiotics, **free shipping.** Email or call for information about shipping, referrals, auto resupply, and any general questions or information about these superfood products. Visit THF on Facebook. To order: email [John@TraditionalHealthFirst.com](mailto:John@TraditionalHealthFirst.com) or call John Delmolino, Amherst, MA. (413) 210-4445.

**Truly non-toxic baby cribs** for sale by fifth generation Mennonite woodworker, cribs like I made for my daughter. Completely free of all chemicals and unnatural smells. Made of only wood, olive oil, nontoxic wood glue and screws. Adjustable and extremely strong. \$850 plus shipping. Call, text (717)917-6826 or email [jasonkristensauder@gmail.com](mailto:jasonkristensauder@gmail.com)

**USA Fermentation Weights** - Shop high quality glass fermentation weights made in the USA at [usafermentationweights.com](http://usafermentationweights.com). They are easy to stack, sterilize, and won't take on odors or stains.

## HOMES/FARMS/BUSINESS SALE

**Food Business For SALE** Established fermented food wholesale business (10 years operation) for sale. Distribution area covers all of Florida—sold at Whole Foods, other grocery stores and around 20 mom-and-pop stores. Product, mainly sauerkraut, is sold through two distributors: United Natural Foods Inc. (UNFI) and Albert's Fresh (a subsidiary of UNFI). Great potential for expanding product line, increasing business with current clients, and adding new clients. Flexible on terms. For more information, email [KPCats@live.com](mailto:KPCats@live.com) or call (941) 812-2771.

**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](mailto:allthings828@lavabit.com).

**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.

**For sale southeastern SD farmland** located 11 miles east of Yankton, SD 40 acres. Flat land, shelter belt, access to water, along oil road. Perfect for anyone to start a hobby farm. Owner would help you design it. Call (605) 660-5922.

**VERMONT farm seeks creamery manager** to prepare for taking over ownership of our creamery business with a milk contract for 30 Jersey cow on-site dairy. We are certified organic, verified A2A2, and certified grass-fed. Lots of possibilities, including housing. Also, apprenticeships available. Contact: [Larsonfarmvermont@gmail.com](mailto:Larsonfarmvermont@gmail.com) or (802) 645-1957. [www.larsonfarmvt.com](http://www.larsonfarmvt.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](http://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](http://ausrawmilk.org/donate).

## SERVICES

**Heartfelt, Inspired, Passionate Living** (HIP Living, LLC) - a life coaching business that supports brave, compassionate women who want to move forward in life with greater courage, confidence and joy! FREE 30 min. trial session. All sessions take place by phone. [hiplivingcoach.com](http://hiplivingcoach.com).

**JOHN DELMOLINO PAINTING.** Quality residential interior painting for the discriminating home owner. Historical restoration a specialty. Outstanding enamel trim work is accomplished with real Dutch paint from Fine Paints of Europe. Twelve years of full time year round experience. Call for a consultation about your next painting project. Remember, there is more to painting than what is in the can! Serving Western Massachusetts. [PAINT8.com](http://PAINT8.com) JOHN Delmolino, Amherst, MA (413) 210-4445.

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## TRAVEL/LODGING

**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](mailto:farmstay@pabowenfarmstead.com). 15701 Doctor Bowen Rd, Brandywine, MD.

**VERMONT Farm stay** at our 30 A2A2 Jersey cow organic grazing dairy. 3 bedrooms, fully equipped kitchen, living room, 1 bath, screened porch. No shared spaces. Separate bed/bath suite can be added by separate agreement. Guests welcome at the dairy barn. Walking trails and picnic spots. In

Wells, VT in the beautiful Mettawee Valley with lovely hikes and lakes nearby. Learn about organic farming, rotational grazing, composting and soil restoration. On Airbnb or contact us at: [Larsonfarmvermont@gmail.com](mailto:Larsonfarmvermont@gmail.com), (802) 645-1957. [www.larsonfarmvt.com](http://www.larsonfarmvt.com).

**WEST MICHIGAN Couples retreat** set on 35 wooded acres. 5 contemporary, luxury suites in a relaxed, romantic setting. All suites have a king size bed, whirlpool tub and glass block enclosed shower. For online videos go to <https://www.pigeoncreekinn.com/> (616) 836-4088.

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Pick-up locations along the front range.

30-day dry-aged grass-finished beef, eggs, poultry and lamb. Bulk and Piece orders.

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Facebook: Rafter W Ranch at Peak View

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We visited many tribes in Tanzania & Uganda who have been pushed off their land and/or are not able to afford their ancestral diet. School children go all day with only porridge from corn flour, vegetable oil, and sugar. Please contribute along with us to get them these much-needed animals.

Thanks so much!  
- Mary Ruddick & Brian Sanders

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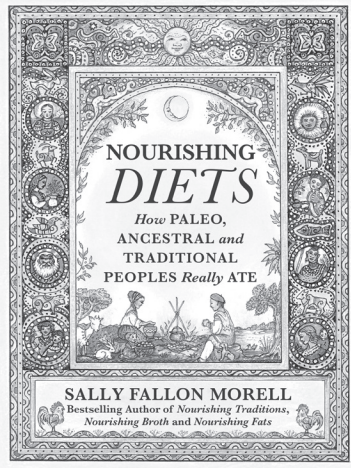
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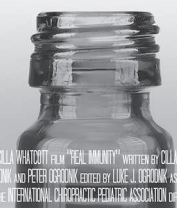


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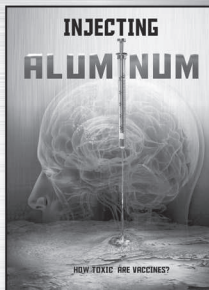
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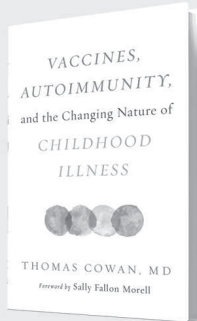


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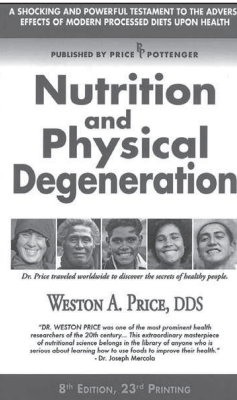
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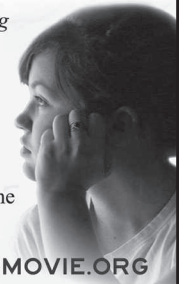
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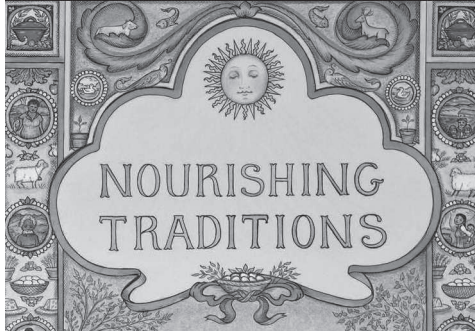
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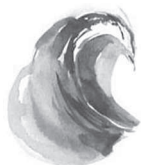
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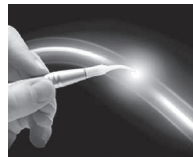
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# The Shop Heard 'Round the World

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

INFORMATION / TRAINING / PRACTITIONERS/CLOTHING



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

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