



Wise Traditions

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IN FOOD, FARMING AND THE HEALING ARTS

A PUBLICATION OF THE WESTON A. PRICE FOUNDATION®



Education ♦ Research ♦ Activism
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Volume 23 Number 1

Spring 2022

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THE WESTON A. PRICE FOUNDATION®


Education ♦ Research ♦ Activism


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

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

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

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


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



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President's Message

In this issue, we focus on the debate as to whether or not something called a virus is associated with the illness called Covid—whether a tiny organism can invade our cells to make copies of itself and then spread on aerosoled breath and through bodily fluids to make others sick.

We have been surprised at the resistance to this premise—that the virus does not exist—among those in the alternative health community. One commentator described our views as a “cancer in the health freedom movement” because the promotion of such “unscientific nonsense” would cause those in the field of conventional medicine to dismiss us completely.

Since those in the field of conventional medicine already do dismiss the health freedom movement, what does it matter? In fact, we submit that only when we can show the lack of evidence for the viral theory can we bring down the whole edifice of modern medicine, based as it is on antibiotics and vaccines. All the measures the health freedom movement objects to—masks, social distancing, hand sanitizing and above all vaccines—are predicated on the viral theory of disease, and more generally the germ theory. Prove that viruses don't exist and we can bring an end to all that is odious in our medical system. Prove that germs don't cause disease and we can move on to solving the riddle of what causes disease.

We invite those who disagree with the views in “The Great Virus Debate,” page 12, to write to us. We will be happy to air these views in letter or article format in our next issue.

Meanwhile, we are focusing on Wise Traditions 2022! The place is the beautiful convention center in Knoxville, Tennessee, and the dates are Oct. 21-23 with our real milk fundraiser on Oct. 20 and farm day on Oct. 24—please note that the conference is two weeks earlier this year. We are currently working on our speaker schedule and food donations—our chef is super excited about the event. For information and updates, visit wisetraditions.org.

One thing we will spend a lot more effort on this year is the exhibit hall. Our goal is one hundred exhibitors and the creation of a real marketplace—in addition to health products, we'd like to have exhibitors selling crafts, jewelry, clothing and household items. We have lowered the price for regular exhibitors to just one hundred fifty dollars. If you are interested in exhibiting, or can suggest the names of potential exhibitors, please contact the office at info@westonaprice.org, with “Exhibitor” in the subject line.

We are looking forward to seeing many of you in Tennessee in October!

Letters

COVID SHOTS FOR BABIES

Regarding the FDA wanting to approve these Covid shots for babies, I think it is absolutely horrific! Of course, this is not the greatest threat, because I have been warning about the dangers of vaccines for close to thirty years, and I have been warning that the FDA cannot be trusted.

The greatest threat now is not the FDA, rather, it is all the parents who eagerly want their babies to receive these deadly Covid shots! Many gullible parents will line up and be happy to have their babies receive these injections.

Why would any right-minded parent do such a thing? It is because they really believe that this supposed Covid-19 virus exists. They actually believe that they are doing the best thing for their baby. They believe Fauci, Biden, the news media and similar sources about this supposed Covid-19 virus.

What could be more important than to help them to see the other side of this issue? We now have the public debate that exposes the other side! Once parents realize that no Covid-19 virus

exists, they will not allow their babies to be given these poisonous shots!

Curtis Cost
vaccinesaredangerous.com
New York, New York

DIY COVID

Thanks for the wonderfully helpful article on treating Covid (Summer 2021). Covid hit our homestead the same week we got the *Wise Traditions* journal. My husband was recovering but I was still in the midst of it.

Our congestion had been so bad that we hadn't been drinking the lovely raw, soy- and grain-free milk from our family cow, Chestnut. The chickens, pigs, dogs and cats were getting all of it. However, my husband is a milk addict and had apparently been sneaking milk when I wasn't looking. His congestion cleared up remarkably sooner than mine.

One day, I was so overwhelmed I started sobbing. Everything hurt, I was struggling to breathe, and I was depressed and exhausted. My husband grabbed the journal and read the article on recovering from Covid out loud to me, then went and got a mug of bone

broth from one of our chickens, and a glass of cold day-old milk.

I chugged both and within minutes could breathe, was smiling and making jokes with him.

We are now on the mend and taking fermented cod liver and butter oil and Ancestral Supplements organ meat blend daily—along with our raw milk and bone broth.

I had always heard growing up that dairy products will exacerbate congestion. However, now I wonder whether that research was simply based on factory-produced pasteurized milk, or milk from cows fed lots of soy and corn. We just feed ours alfalfa and grass.

Rachel and Kyle Hester
Whoopsy Daisy Farm
Duluth, Minnesota

GRATITUDE FOR THE CHAPTER SYSTEM

I want to thank the foundation for establishing the chapter leader system and thank the individual people who have given their time to being chapter leaders. My gratitude for your work grew recently when I was visiting family (a newborn and her parents) in

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Letters



Florida. I knew chapter leaders would help with finding local foods but never thought about the value of finding a local doctor.

During my visit, I learned that the precious two-month-old was going the next day for her shots. Her parents were feeling pressured and did not know how to avoid this. In a bit of a panic, I contacted chapter leader Mandy Blume. She quickly got back to me with the name of a practice where the doctors do not pressure but leave decisions to the parents. Within a couple hours of my request to Mandy, the parents had cancelled the appointment for the next day and had a new appointment scheduled at the recommended office where toxic shots are not suggested as a way to keep your little one healthy.

I will be forever grateful for the timing of the visit and for Mandy's help. Chapter leaders will never know the rippling effects of their efforts. Thank you chapter leaders!

Kathy Kramer
Cottage City, Maryland

VIRUS OR EMF?

At the WAPF conference, you and others promoted the idea that the Covid-19 virus isn't really a virus, and that the illness may be due to 5G impact. I have to say, I was not convinced. . . until I read *The Invisible Rainbow* by Arthur Firstenberg. I was shocked to read how the Spanish flu as well as regular influenza is correlated to electricity and radio waves.

In the book the author talks about islands in the South Pacific or ships at sea where everyone got sick when radio waves were rolled out in 1917-1918.

When I saw a recent article about an island in the Pacific where everyone got Covid-19 despite all the vaccinations and tests, I immediately thought about EMF.

In the South Sea island of Kiribati, everyone had to be fully vaccinated against Covid-19 and passengers [traveling to the island] had to test negative for Covid-19 three times in nearby Fiji before arrival. Passengers had to be in pre-departure quarantine for two weeks before the flight. Despite these measures, two-thirds of the travelers—thirty-six of fifty-four—tested positive for Covid-19. Even though it was then clear that quarantine and testing didn't work, Kiribati declared a state of disaster and quickly instituted Covid-19 restrictions, including lockdowns, curfews, and quarantine sites! Maybe it was EMF?

Jackie Hunt
Georgetown, Texas

ANOTHER USELESS TEST

Recently a pharmacist told me two interesting things about the Covid-19 antibody test. First, the vaxxed are showing lots of "false positive antibody" results. They show that they have antibodies when they really don't.

The second thing she said was that many people who had tested positive for Covid, and even had all the symptoms, test negative for antibodies, and many who never had a single symptom test positive for antibodies.

So, basically, the takeaway is: none of this makes any sense! I already didn't believe that the antibodies could mean much if the virus theory is flawed to begin with. But now I know this is the

case. Just goes to show how imperfect (or ass-backwards) modern medical "science" is.

Michelle Eshbaugh-Soha
Chapter Leader, Denton, Texas

DEATH BY HOSPITAL

My father passed away on January 7th. He was killed at the hospital, in the same way I described in my article "Questioning Covid" (Summer 2021). The only difference is that he was not sick to start with. Although without symptoms, he tested positive to a swab test and was no longer allowed to stay in the nursing home.

At the hospital they started to give him sleeping pills of various kinds. They would not let him (or he was unable to?) drink and eat alone but worse, they left him uncovered and without clothing. He complained of being cold and then got a fever. One lung showed signs of pneumonia, but they thought it was a urinary tract infection and did not recognize it was a lung issue because they do not visit patients anymore. He died twenty-two hours after he was admitted.

The autopsy was done to cover up everything and now the judge has not decided what to do.

My father was one of the most intelligent people in the world. Now I feel lost as he can no longer give me wise advice. I know he must be in some sort of paradise for all the good deeds he did in his lifetime. He was so generous and always concerned to help others.

Iluna Nurpi
Italy

Letters

GOLDEN AGE OF HOSPITALS IS OVER

I have some thoughts on why the foundation is so important to the citizens of the world today.

On January 13th, 2022, the U.S. Supreme Court dealt a damaging blow to our health care workers. It allowed mandated Covid vaccinations for health care workers at facilities receiving federal funding. This was because of the votes of five (four voted against) dangerously uneducated justices who failed to read enough science prior to hearing the case to know these vaccines prevent neither infection nor transmission, have massive and deadly side effects that can kill these poor workers—and horrors—we now have studies from Europe showing these vaccines have a negative 38 percent efficacy. Translated: these vaccines actually cause a 38 percent increase in disease! So not only are the health care workers at risk, people who visit them are at a far greater risk of illness. Going to a hospital is going to be highly dangerous for us all.

It is sad that the Supreme Court justices did not as prior preparation

look at the CDC's own data, which state that vaccines are ineffective against infection as well as transmission, hence essentially a useless public health measure.

What's going to be the fallout from this? This means an already disenchanted citizenry will vote for less invasive federal government (to whom we are mere faraway line items), and more local government (at least we can walk into our local congressman's offices and look the rogue in the eye).

The smart, talented and ethical health care workers who witnessed the devastating death toll from vaccines will leave the health care industry, an industry already pressed for labor.

Fewer people will work in government and governmental agencies that mandate vaccines for their employees, and which have also been taken over by corporate interests. People will care about where they live and focus on local governance. They will attend more town meetings that determine their immediate fate, their immediate environment and thus their real future.

Elders who are on Medicare and

Medicaid will get increasingly terrible service and more disease as they enter these facilities.

Should we panic? No, folks. Hospitals are good for accidents, and elaborate surgeries, but that is about it. The golden age of hospitals is over. Hospitals worldwide are profit centers for many unnecessary procedures that kill. There is little compassion in them, no heart. It's time for the traditional health care industry to go down the tubes. And mercifully, it will.

Your average doctors don't do much more than write scripts for painkillers, steroids, antibiotics, chemo and radiation—like robots. Pediatricians are not much more than vaccine trolls today, far removed from the healers of yore who swore to first do no harm.

Hospitals are dead, but the age of health self-determination has just begun.

A new well-care industry is already taking its place, and it will render the old one obsolete. This is one that will not gouge its customers with three-hundred-dollar pills. This is one that people can pay for out of pocket, where



GOOD-BYE PARTY FOR AGNES BUNAGAN

The WAPF staff gathered for a farewell lunch as Agnes Bunagan transitions to her new job as counselor for the blind. LEFT to RIGHT: Jane Kadish, special projects; Paul Frank, conference organizer; Hilda Gore; podcast host; Tim Boyd, education services; Sally Fallon Morell, president; Maureen Diaz, exhibit coordinator; Agnes Bunagan; Kathy Kramer, executive director; and new staff member Yolanda Hawthorne, member services.

Letters

health insurance will not be involved as a corrupting intermediary. It is a health movement that focuses on local traditional foods, homeopaths, physical therapists, masseuses, acupuncturists, osteopaths, herbalists and local counselors. These won't be doctors with degrees from Harvard, but people from our own communities, who know our families, care about them, and whom we can look at in the eye directly when we pay them for their services and offerings—farmers and healers alike. Those who worry about hospital and doctor shortages need to make their life and health resilient outside of a hospital and mainstream health care setting. They need to do it now, before it's too late. Too many surgeries are done today for illnesses that are lifestyle-related and thus avoidable. The largest cause of death today is not cancer or heart disease but iatrogenic illness, from the great harm done by a medical system that cuts, burns, poisons and irradiates, which confers no health upon us, but rather death and disability.

For a number of us, this is a golden opportunity to learn about nutrient-dense foods, healthful stretching, having work be our exercise, walking our dogs daily, sleeping a hearty night's sleep, hugging our friends and families no matter what the government tells us. It's about self-determination, as in giving up ten cups of coffee a day, cutting down on alcohol consumption, cooking from scratch more, sharing babysitting with neighbors, working from home and far away from a central corporate office—a gentler system of healing, health and living.

Take your insurance dollars and

spend them on good food and fresh air. Channel your anger and feelings of helplessness into learning about different modalities of health, cooking and eating that you can practice at home and on your families. Trust your judgement that you will harm your family a lot less than a hospital will. If we all do this, we will have lifespan as well as health span—and we will need hospitals and “health facilities” less and less.

Sushama Gokhale, Chapter Leader
Sonoma County, California

VITAMIN D AND INSOMNIA

I have a good understanding of the importance of vitamin D. It helps with calcium absorption, immune function, sleep cycle, mood and more. I also understand that most people do not get enough vitamin D, as the sun's UVB rays are only present a few hours a day in the summertime. Other factors like diet, air pollution, obesity and skin color can deplete your vitamin D levels even further. The conventional approach to fixing this deficiency is to take synthetic vitamin D3 as a supplement, but is it safe? In my experience, not so much.

After reading so many articles about how we should increase our intake of vitamin D to combat Covid, I decided to order some of the synthetic supplement. I bought the most popular brand on Amazon, which offered capsules with five thousand IUs of vitamin D3. After taking one capsule a day for about a week, my quality of sleep started to decline. I started waking up in the middle of the night and lying in bed for about an hour before I could fall asleep again.

I stopped taking the supplement but unfortunately vitamin D is fat-soluble, meaning it is stored in the fat. Its half-life turns out to be around fifteen days, which means in fifteen days half of it will still be in your body, and after thirty days 25 percent will be left.

I have a good understanding of health and nutrition. I consume raw milk, chicken liver and cod liver oil every day. I will also sometimes consume raw chicken eggs from chickens who have been outside in the sun. My experience with vitamin D supplementation tells me that my vitamin D levels were already high, and taking the supplement caused substantial toxicity in my body.

HEALTH FREEDOM

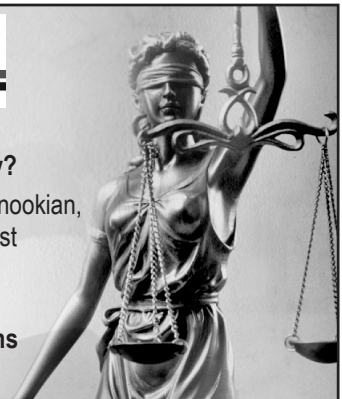
DEFENSE FUND

Do you oppose forced medicine of any kind?

Do you believe you, and you alone, own your body?

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

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



Letters

Vitamin D toxicity calcifies the blood, suppresses natural melatonin and ironically causes anxiety and depression. Too much of anything is bad.

Research has shown that vitamin toxicity can occur only through synthetic supplementation. A healthy diet and time in the sun does not seem to cause this, therefore I would assume that it is not very safe to get your vitamin D from supplementation. I also take magnesium and vitamin K2, so I am not deficient in those vitamins. This experience has shown me how supplements do not replace a healthy diet and lifestyle, and should also be questioned for their safety as most supplements are synthetic and unnatural. If you eat correctly, you should not have to supplement in most cases.

My sleep isn't completely normal yet but with each week it gets better. I've been taking magnesium and cod liver oil with milk and honey at night before I go to bed and it has been helping a lot.

I had also tried taking melatonin but it made the insomnia worse. I never knew something would affect me for this long!

Dylan Wort
Brandywine, Maryland

LINEN SHEETS

I have been using linen sheets from Life Giving Linens (LGL). I find them comfortable in both summer and winter. Yes, when new they can make you feel like you are sleeping on straw, but with use and washings, they soften up. The best features are the handling of perspiration and the blocking of radio frequency radiation. It is about impos-

sible to wake up and find the sheets wet or even damp.

Regarding radio frequency (RF), the literature that LGL provided with the sheets said the sheets block RF. Well, I had to do my own experiment. Using my RF meter and cell phone, I held the meter while my wife held the cell phone. My wife made a call. When I held the meter above the sheet in free air the meter had a signal strength in the red zone. But when I put the meter under the flat sheet the signal strength fell into the green zone. The cell phone was less than ten feet from the meter. The above and below the sheet test with the meter was repeated seven times with the same results each time—the linen blocked the RF.

Linen is a good choice for those who are electro-hypersensitive. I'm spending one-third of my life RF-free.

Wayne Feister
Rawson, Ohio

EMPOWERING INFORMATION

Cod liver oil, coconut oil, beef tallow, beef liver, chicken heart: all of these and more have been a part of my life for over ten years, thanks to WAPF.

Homeopathy, vaccines, and the Bates Method (podcast episodes 178 and 298)—thanks to the WAPF, I have learned a lot about these in 2021.

When I first learned about the WAPF in late 2008, it was via a friend I met at work, by word of mouth. I do not follow WAPF via social media. I prefer to read, watch and listen directly via the WAPF website. The WAPF website and the Wise Traditions podcast are a goldmine of empowering information!

As a member, I appreciate being

able to download the journal PDFs when logged in (via My Account and view journal PDFs links) instead of having the journals sent via postal mail.

Keep up the great work!

WAPF Member
Ulm, Germany

PART OF AN ACTIVE COMMUNITY

I am a member of the Weston A. Price Foundation and the wife of an active duty member of the United States Coast Guard. My husband is currently seeking a religious exemption for the Covid-19 vaccine and I want to thank the Foundation for the email regarding ending Covid-19 vaccine mandates in the military.

I can't thank you enough for standing alongside families like ours who are faced with losing careers, homes and communities because of these mandates. It is easy to feel very alone in this fight and it was so incredibly encouraging to receive that email today.

Thank you again for everything the Foundation is doing and I am so grateful that I can be a part of such an active community. Keep fighting the good fight!

Sydney Spowls
San Diego, California

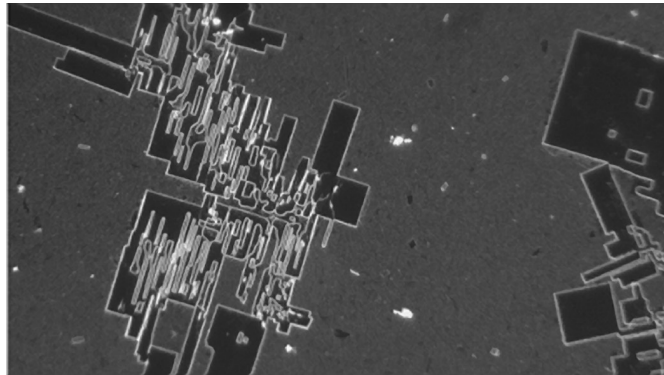
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will help ensure
the gift of good health
to future generations.

Caustic Commentary

Sally Fallon Morell takes on the Diet Dictocrats

EMF and COVID

The title says it all: “Evidence for a connection between coronavirus disease-19 and exposure to radiofrequency radiation from wireless communications including 5G.” The article, co-authored by Beverly Rubik and Robert R. Brown, lists several ways in which the symptoms from exposure to wireless communications radiation (WCR) match those of Covid-19, including undesirable changes in the blood and circulation, immune system dysfunction, increased oxidative stress, increased intracellular calcium and worsening of heart arrhythmias and cardiac disorders (*J Clin Transl Res* 2021 Oct 26;7(5):666-681). The authors recommend that everyone, particularly those suffering from Covid, reduce their exposure to WCR “as much as reasonably achievable until further research better clarifies the systemic health effects associated with chronic WCR exposure.” Unfortunately, WCR is very high in hospitals, which may explain the high rates of death in those institutions.



MYOCARDITIS AFTER COVID VACCINE

Good pandemic data are hard to come by, especially as various parties have taken steps to thwart or hide reports of vaccine injuries. However, a CDC study published January 25, 2022 on JAMA Network indicates that the risk of myocarditis (inflammation of the heart) following mRNA Covid vaccination is around one hundred thirty-three *times* greater than the background risk in the population. The risk may actually be higher as the study used data from the Vaccine Adverse Event Reporting System (VAERS), which notoriously underestimates the actual number of vaccine injuries. Cases of myocarditis occurred more often in males than females, especially males in the twelve-to-seventeen age group, and the Pfizer two-dose vaccine regimen was associated with the highest risk. Symptoms of myocarditis include chest pain, pressure or discomfort; shortness of breath; abnormal ECG results; and abnormal cardiac MRI findings. What to do in

the face of this shocking evidence of vaccine danger? Any rational public health policy would discontinue all shots immediately. Instead, the CDC “has commenced active surveillance of adolescents and young adults to monitor their progress following heart-related incidents after vaccination” (israelnationalnews.com/news/321238).

DOES NOT PROTECT

“The vaccines are incredibly safe,” said fully-vaccinated CDC director Rochelle Walensky while testifying before the Senate Health Committee on January 11, 2022. While wearing two masks, Walensky insisted, “They protect us against Omicron; they protect us against Delta; they protect us against Covid.” Except that

they don’t protect. New data from Scotland show that the Covid-19 age-standardized case rate is highest among the two-dose vaccinated and lowest among the unvaccinated; and this trend of negative efficacy for the double-vaccinated persists for hospitalizations and deaths. The data are similar from the U.K. Health Security Agency, showing

higher rates of illness among the triple-vaccinated. The Scotland report shows that just 18.5 percent of hospitalizations were unvaccinated—and that number includes numerous people within twenty-one days of the first shot, counted as “unvaccinated!” The latest data published by the UK Health Security Agency confirm that the fully vaccinated now account for nine in every ten Covid-19 deaths in England (dailyexpose.uk, March 1, 2022). Those enmeshed in viral theory will explain these dire results as the effect of “immunity wearing off,” but the explanation is really much simpler: if you inject poisons into people, it has the effect of making them sick, very sick (theblaze.com, January 21, 2022).

WEIRDER AND WEIRDER

A New Zealand physician became concerned when people injured by the Pfizer vaccine began showing up at his office.

Caustic Commentary

He had been hearing about strange shapes like circles and what appeared to be microchips in the blood of vaccinated people. Wary of false leads—“those of us that critically look at the vaccine situation are heavily infiltrated by persons wishing to divert and control the narrative,” he noted—he decided that the only way to find out the truth of these rumors was to investigate himself. He took a twelve-week course on live blood analysis and purchased a sophisticated dark field microscope that magnifies four thousand times. He did find small round shapes in the blood of vaccine-injured patients—weird but not as weird as what came next. He was able to obtain some vials of the Pfizer Comirnaty vaccine and look at the leftover vaccine liquid in his microscope. He found strange round and rectangular shapes that seemed to connect to each other. When subjected to heat—about body temperature—the shapes self-assembled into what looked like complex circuitry. “The organization that occurred does not appear to be simply organic, or debris or artefact, and it is not simply dehydration of the slide. It is highly self-organized and appears to be part of the design of the liquid,” he observed. When mixed with fresh human blood, the vaccine liquid appeared to self-organize into nano-tech chips linked by “cords,” possibly cords made in part from fibrin; the white blood cells were annihilated and the red blood cells were heavily damaged. The physician stated his belief that these weird things happen only with the second-generation Pfizer jab, called the Comirnaty vaccine (principia-scientific.com, February 5, 2022).

MORE BAD NEWS ABOUT MERCURY FILLINGS

Wise Traditions readers know that mercury is a quintessential antinutrient. Mercury dental amalgam fillings at body temperature off-gas mercury vapor, which is readily absorbed and transported throughout the body. Mercury blocks metabolic enzymes and promotes oxidative stress. At the molecular level, mercury binds sulfur and selenium. Mercury can cause or contribute to most chronic illnesses including premature aging. Now the father-son team of Geier and Geier have linked mercury dental amalgam with arthritis and asthma. Using the public access NHANES (National Health and Nutrition Examination Survey) database, the authors found that the risk of developing arthritis was up to sixfold higher in persons with amalgam exposure as opposed to other dental restorative materials (ncbi.nlm.nih.gov/

labs/pmc/articles/PMC8138300/), and the risk of developing asthma was about fourfold higher (ncbi.nlm.nih.gov/labs/pmc/articles/PMC8532208/). We hope these discoveries will get us closer to the day when amalgam disappears from the dentists’ toolkit.

VEGAN-ONLY FRIDAYS

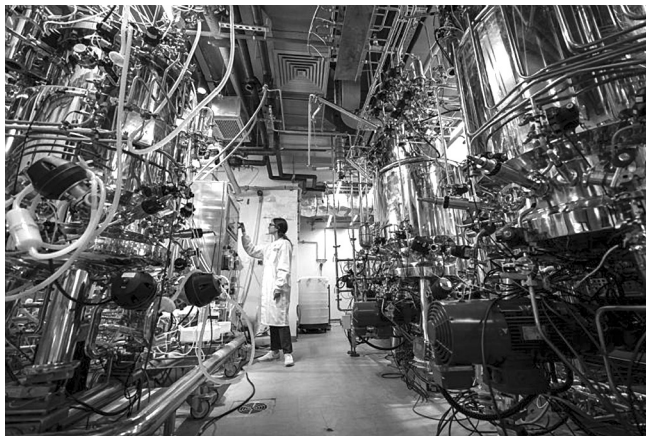
Mayor Eric Adams has done a lot of good things for the city of New York. For example, he has encouraged breast-feeding and worked to ensure that all public buildings have lactation rooms. He has instituted a vigorous rat-trapping program in infested areas of the city. Unfortunately, after a diagnosis of diabetes in 2016, he embarked on a “plant-based” diet and now has imposed vegan meals on New York City school children every Friday. The meals must include milk—that’s fat-free milk—because of federal guidelines—but otherwise the kids get vegan meals—not even cheese! Mr. Adams has naturally straight teeth and a healthy stature—he did not spend his growing years on a plant-based diet; in fact, his father was a butcher. Dear Mayor Adams, please reconsider endorsing a vegan diet for New York’s growing children, and do not deny them (even for a day) the foods they need to grow up healthy and strong—like you.

THE ECONOMIST ON FOOD

An interesting article entitled “The New Anthropocene Diet,” published in *The Economist* magazine (September 28, 2021) comes with the tagline, “Technology can help deliver cleaner, greener delicious food. Whether consumers want it is another question.” There we read that much of the meat we eat “is laced with chemical additives that reduce spoilage, enhance flavour or serve some other need on the part of the producer.” Well, chemicals in food are a bad thing, but is it true? Are even supermarket steaks, chops and hamburger laced with additives? For sure, the fake meats promoted in the article are loaded with additives of many kinds. “Immense hurdles remain. It is one thing to grow a hamburger in a tank, another to get people to eat it, and a third to provide competitively-priced tankburgers by the billion.” As for plant-based milk, the article admits something I have long suspected, that “plant-based milk are more profitable than the cow-based variety.” Still, even with the influx of “milk” based on soy, rice, oats, peas and almonds, plant-based milk account for only 15 percent of America’s milk market by

Caustic Commentary

value. And it's not clear that plant-based milk can claim the moral high ground—it takes more than four liters of water to produce one almond, for example. Food scientists base their labors on the assumption that milk is just “fat, protein, sugars, minerals and water,” and so can be easily reproduced in the laboratory from other ingredients. “It’s a simple matter,” said notable vegetarian Henry Ford, “to take the same cereals that the cows eat and make them into a milk which is superior to the natural article and much cleaner.” Really? Can food engineers create all the magical enzymes and other compounds in milk—from mucins to lactoferrin? According to Dennis Woodside, president of Impossible Burgers, “Ultimately, we want to replace the animal,” which *The Economist* considers a “worthy aim.” But since fake meats and plant-based “milk” are devoid of the nutrients required for fertility and healthy children, this “worthy aim” is likely to have self-limiting returns.



Frankenlab producing lab meat.

VAXTEEN

“When Parents Said No to Their Kids Being Vaccinated, This Teenager Created VaxTeen. It’s Now More Crucial Than Ever.” So reads the hype for VaxTeen, an organization that encourages teenagers to receive vaccinations without parental consent. The group also provides information about state consent laws, vaccine information from the CDC, and guides teenagers on how to get vaccinated and how to talk to “anti-vaxxer parents.” As reported at icandecide.org, although VaxTeen appears to be a grassroots organization, the founder of VaxTeen is a member of the Unity Consortium’s Teen Advisory Council, whose members include Pfizer, Glaxo-SmithKline, Merck, and Sanofi Pasteur. Another VaxTeen partner, Keep Up the Rates, was launched by the National Foundation for Infectious Diseases (NFID), whose strategic partners are AstraZeneca, Janssen Therapeutics, Moderna, Merck, Sanofi Pasteur, Bavarian Nordic, and Takeda Pharmaceuticals. Yet another VaxTeen partner, Stronger Keep Up the Rates, is a national advocacy campaign whose goal is to “stop

the spread of harmful misinformation” and is supported by the Biotechnology Innovation Organization, whose sponsors include Merck, Johnson & Johnson, Avantor, Amgen, Bristol Myers Squibb, Pfizer, Lilly, Abbvie, Genentech, Samsung Biologics, and Twist Biopharma. While VaxTeen seems, on its surface, to be grassroots, after a bit of digging, it looks like yet another marketing campaign by big pharma.

HPV VACCINE FALLOUT

The HPV vaccine, said to protect young women from the “human papillomavirus” has resulted in many unfortunate side effects, the most tragic being infertility. A study published in 2018 in the *Journal of Toxicology and Environmental Health* (retracted without detailed explanation after twenty-four thousand downloads) notes that approximately 60 percent of women ages twenty-

five to twenty-nine who did not receive the HPV vaccine have been pregnant at least once, whereas only 35 percent of women who had the shot have conceived. The study author notes that birth rates in the U.S. have fallen from one hundred eighteen per thousand in 2007 to one hundred five per thousand, and if 100 percent of females in the study had received the HPV vaccine, the data suggest that the number of women having ever conceived would have fallen by two million. If you are one of those benighted individuals who believe we need to “reduce the world’s population,” the HPV vaccine is a good way to do it. ☯☯

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.

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The Great Virus Debate

By Andrew Kaufman, MD and Thomas Cowan, MD
with Sally Fallon Morell

During crises, people ask questions, and the Covid crisis is no exception. People are asking, “Is there any real or new illness called Covid-19—apart from vaccinations and the treatments themselves?” We are not alone in proposing that we must take a cold look at the viral theory touted as the cause of this alleged disease.

Journalist Jeremy Hammond has been the most outspoken critic of our contention that the SARS-CoV-2 “virus” does not exist and therefore does not cause Covid. In a video posted in March 2021,¹ he outlines the following arguments for the existence of the “virus.” We answer his arguments, point by point.

DEFINITION OF ISOLATION

Hammond states that people in our camp have changed the definition of isolation, but we use the actual definition of the word “isolation” in the English language. It’s the virologists who have changed the meaning of the word from “separated from other things” to meaning “combined with other things in a foreign cell culture.”

ISOLATION TECHNOLOGY

Hammond claims that scientists do not yet have the technology to purify viral particles. Actually, scientists have been able to purify particles equivalent in size to so-called viruses for decades. The traditional method, in use since at least the 1940s, involves what is called density gradient ultracentrifugation. It uses different densities of a sucrose solution spun into layers at high speeds with an ultracentrifuge, so that the densest layer ends up on the bottom. The sample will separate into bands based on different densities, and one of those bands could contain the so-called viral particles if they existed.

For example, a 2015 article published in *Methods in Molecular Biology*,² provides electron microscopy photographs of purified exosomes (see Figure 1). Exosomes are roughly the same size as that of claimed viral particles, around fifty to one hundred nanometers, and they have the same morphology and characteristics of alleged virus particles.

If you can purify exosomes, you can purify viruses using the same techniques. Scientists take exosomes directly from a body fluid; they

don’t take the exosomes and put them in a cell culture. One of the challenges the authors discuss is the fact that the exosomes are present in low numbers; also, there are many different types of extracellular particles in the bodily fluid from which to separate the exosomes. These are some of the problems that have been put forth as a reason why it’s difficult to purify virus particles, but the researchers have overcome these problems with exosomes.

Bacteriophages, known as “the viruses of bacteria,” can also be purified, as shown in a 2018 article (again published in *Methods in Molecular Biology*)³ (see Figure 1). Bacteriophages are particles of similar size to viruses, and they also can be purified by chromatography and other methods. Mr. Hammond alleges that you can’t get a pure sample—a sample where you see only one thing in a vacuum. However, as you can see in the photos of exosomes and bacteriophages, all the objects are the same—they are the only thing in the microscope field because these have been isolated and purified, and there is nothing else in the sample, just exosomes or bacteriophages.

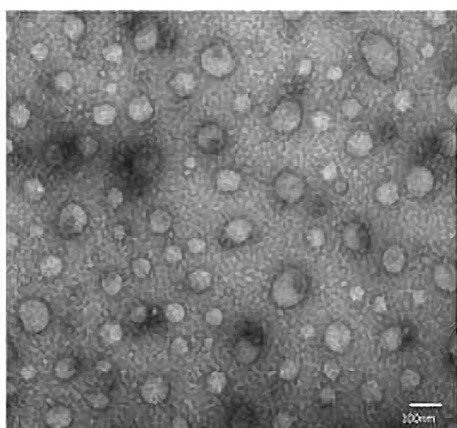
So, biologists clearly have this technology, and it’s been around for quite a long time. It’s just that when they tried to do isolate viral particles, back in the 1940s and 1950s, after they had electron microscopes, they were actually unable to find any particle in the tissues or fluids of anyone who was ill. The problem is that they are unable to find the viral particles, not that they don’t have the technology to isolate and purify.

CELL CULTURE IS THE GOLD STANDARD

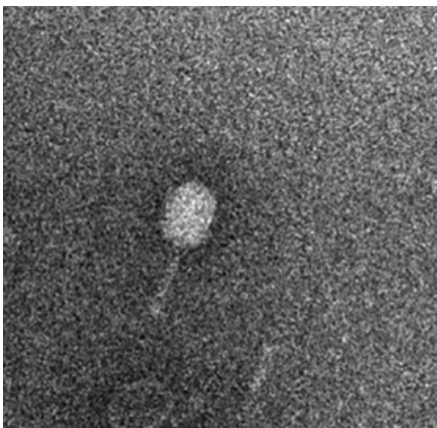
Hammond admits that you need a cell culture to “isolate” a virus, because the virus needs cells in which to replicate in order to have enough virus to detect. According to the viral theory, the virus causes an infection in the lung, for example, when it invades the lung cells and then reproduces in the lung tissue, right in those cells, and then produces more viral particles. So, all we would need to do is go right to that tissue culture in the sick person, not one that we create in a laboratory with other conditions that are not natural.

In other words, why would we do this kind of indirect experiment

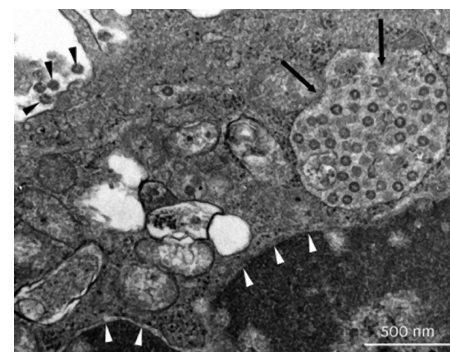
FIGURE 1. Isolated exosomes, isolated bacteriophages and “isolated” viruses



Isolated, purified exosomes.



Isolated, purified bacteriophages.



Sample taken from human fluids and grown in a tissue culture, said to be “purified” and “isolated” virus.

when we have a cell culture right in the host—namely, virus-invaded lung tissue—from which we could extract the virus? Why can't we do a proper isolation, where you go to the host, the natural source of the virus, which is a sick person with an infection, and purify the viral particles right out of that person's bodily tissues or fluids?

CYTOPATHIC EFFECTS

Virologists claim that the pathogenic nature of viruses is evident in light microscope images of tissue cultures showing cytopathic effects (meaning cell breakdown). But what the images of “viruses” from an electron microscope show is a mixture of cellular material from the cell culture and a variety of different types of particles (see Figure 1, third image). How can we know what any of those particles actually are? And how do we know the particle didn't come from the foreign cell culture, such as the kidney cells it was cultured in? How do we know it's not an exosome, a particle produced inside the cell? How do we know it's not an apoptotic body (from cellular breakdown)? How do we know it's not another type of extracellular vesicle? How do we know it's a virus (since it doesn't have a label and has not been isolated and purified)? While virologists can show images of small particles, they have no way of identifying the nature or identity of any of those particles.

GENETIC SEQUENCING

Hammond claims that scientists can do genetic sequencing of the particles found in tissue cultures. There are actually two ways of doing genetic sequencing. One way is to extract genetic material from only

one organism, and then sequence the genome in its entirety. That's how you can discover the genome sequence of a new organism.

But for viruses, scientists use a different technique, variously termed “genomic” sequencing, “next generation” sequencing or “in silico” sequencing (meaning carried out in a computer). Whatever they call it, this kind of sequencing is just piecemeal.

Hammond describes the method accurately, in that they start with lots of pieces of genetic material, and then a computer does sophisticated calculations and simulations to put them together. The problem—which Hammond does not describe—is that the starting material for these experiments is not a pure organism; it's not just a virus. What they're starting with is, in most cases, the lung fluid from a patient diagnosed with Covid by a PCR test. (And we know the PCR test is invalid. See sidebar page 20.)

The fluid they start with has genetic material from many different organisms—from a variety of bacteria species, probably some fungal and yeast species, as well as all of the human genetic material from the host and then anything that happened to be in the air that this

ELECTRON MICROSCOPY

Scientists use an electron microscope in order to see the structures inside a cell. To view a sample under the electron microscope, they must prepare it using special procedures. One reason is that the beams of the electron microscope are extremely powerful and can heat the sample up to 150 degrees C. The preparation method requires the following steps:

FIXATION: The sample is placed in some kind of chemical fixative, such as formalin, glutaraldehyde or osmium tetroxide. This preserves the structure of the tissue.

DEHYDRATION: This step requires bathing the tissue many times in alcohol (ethanol or acetone) to remove all water from the tissue.

EMBEDDING: The tissue is put inside a small mold that is filled with paraffin wax or epoxy resin, which is then cooled to harden.

SLICING: The hardened resin is sliced into extremely thin pieces.

STAINING: The tissue is stained with some type of heavy metal, such as uranyl acetate, another name for uranium, or lead acetate, so you can have more contrast when you're viewing the tissue through the electron microscope.

These methods will obviously have effects on biological samples. For example, formalin in the staining process is formaldehyde, a known human carcinogen and neurotoxin; glutaraldehyde is specifically dangerous for the gastrointestinal tract and the lungs, and osmium tetroxide causes pulmonary edema. Ethanol used in the alcohol baths can cause severe liver damage, and acetone damages the kidneys, the lungs and the brain. Paraffin wax and epoxy resin used for embedding can also affect biological tissues.

Most toxic are the heavy metals uranium and lead used for staining; they are bound to have toxic effects on biological samples. The result is that what you see using the electron microscope has little resemblance to living tissue—it is an artifact and a distortion, from which no conclusions about cell structure can be made.

person inhaled for the few breaths before they took the sample. In other words, there are many sources of genetic material. When they put those little bits of genetic material into the computer, the computer doesn't know which organism they're from—since they are not starting with a pure virus, there's no way to tell.

When the computer runs the simulation and tries to fit these little strands of sequences together by overlapping ends, they don't know whether the computer is making a real sequence of an organism, or if it's putting little bits from different organisms together into some kind of mishmash or chimera. They have no way to check it against a reference standard, because there's never been any true sequence of these viruses. What we end up with is just a simulation.

To give an idea of the problem, in the first sequence that they did this way with SARS-CoV-2, they actually had over fifty-six million little pieces or sequences, and they had not one but two different software programs independently take those pieces and try to construct them into a longer strand that they said was the size of a typical coronavirus genome. With one of the software programs, they just threw out the data because it didn't give them what they wanted. So, they're picking and choosing at each stage: "We think this is good. . . we want to use this."

The other software program came up with over a million different possible sequences, but they just picked one. And there was no rhyme or reason to how they picked it. It was just an arbitrary selection. With all of the uncertainty about the origin of each individual piece of DNA, they just randomly select one of millions of possible combinations spit out by a computer. How could anyone believe these results represent the real genome of an actual organism? It would be impossible.

LACK OF PROPER CONTROLS

Hammond states that virologists do a control experiment when they do the tissue cultures. That statement is not quite accurate. In a proper control, you have only one variable different, and as far as we know, virologists have never actually done this. The proper way to do it would be to take lung fluid from some-

one who is sick, but does not have Covid—sick with influenza or pneumonia, for example—or even lung fluid from someone who is healthy. Then, they would continue the experiment using the exact same methods, the same cell cultures, the same concentrations of antibiotics, the exact same nutrients, and any other additives or environmental conditions such as the same temperature, the same amount of agitation, the same protocols all around—that would be a proper control. No one is doing this type of proper control for virus identification.

Some of the papers about SARS-CoV-2 have mentioned what's called a "mock infected culture," but this is not the same as a control. In fact, we don't know exactly what they do with these mock infected cultures. They're not reported on in every paper, but in a couple they are. And curiously, they don't describe these mock infected cultures at all. If you go to the methods sections, you don't see any explanation of what a mock infected culture is. And they don't mention the word "control."

If they're doing a true control experiment, why wouldn't they call it a control culture? They have to use different words because they're not really doing a proper control, but they're trying to pass it off as one, which is why they change the words. We have read hundreds and hundreds of scientific papers on other subjects, and they always refer to the control group; they don't say the "mock treatment group." So, the mock infected culture is some kind of trick. We even tried to communicate with a couple of the corresponding authors on these publications. We asked an open-ended question: "Can you tell us the procedure for the mock infected cells listed in this figure?" In most cases, they didn't reply at all.

In one case, we were unable to get a clear answer. The reply we received was, "They're treated the same." But what does that mean? "Can you tell us the exact conditions?" We even put our queries into a yes or no question like, "Did you use the same antibiotics at the same concentration? Did you use the same nutrition at the same concentration?" But we could not get a clear response, which suggests that they are probably hiding something.

They don't know whether the computer is making a real sequence of an organism, or if it's putting little bits from different organisms together into some kind of mishmash or chimera.

Since the control was positive, that means that the experimental procedure itself, and not the measles virus, caused the cytopathic changes.

We do have two examples of studies that included a control sample. The first comes from a 1954 article published in *Proceedings of the Society for Experimental Biology and Medicine* by Enders and Peebles.⁴ This was the first published paper to use the cell culture technique, which later became known as “virus isolation.”

In this study on measles, the authors put the patient specimen in a foreign culture of monkey kidney cells and then they got cytopathic effects—meaning they were able to show some damage to the cell culture.

An interesting quote in this paper describes the results of the control experiment. “Monkey kidney cultures may therefore be applied for the study of these agents [referring to measles] in the same manner as cultures of human kidney. In doing so, however, it must be borne in mind that cytopathic effects which superficially resemble those resulting from infection by the measles agents may possibly be induced by other viral agents present in a monkey kidney tissue or by unknown factors.”

In other words, they saw a cytopathic effect in the cell culture that was alleged to be a result of damage from the measles virus itself—but it might not necessarily have come from the measles virus; it could have been caused by something in the kidney cells themselves, which they call viruses, or from unknown factors.

Continuing, the two authors said, “A second agent was obtained from an uninoculated culture of monkey kidney cells.” Now, that means

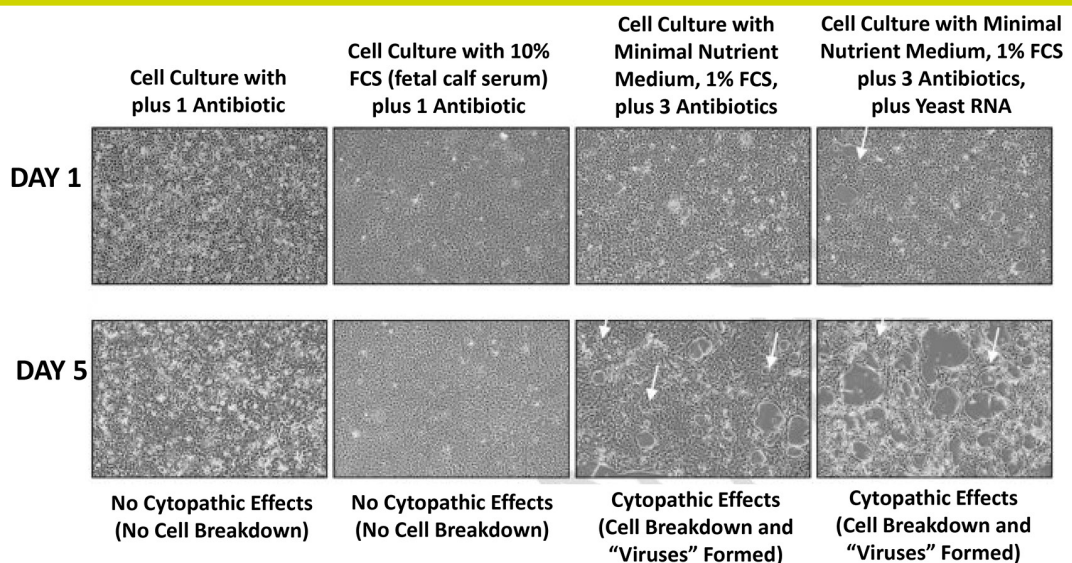
they did not put any sample from a measles patient in the culture; they ran the cell culture without a source of virus—just the cell culture with no patient sample in it. According to the authors, “The cytopathic changes induced in the unstained preparations *could not be distinguished* with confidence from the viruses isolated from measles [emphasis added].” In other words, the sample with nothing added to it produced the same results as the sample containing fluid from the measles patient.

Since the control was positive, that means that the experimental procedure itself, and not the measles virus, caused the cytopathic changes.

An important recent control experiment was carried out by Dr. Stefan Lanka, who is the only virologist we are aware of who has recognized the truth about the nonexistence of a virus—and who left the field. What he did was carry out just the control experiment. There is no possible source of virus anywhere in this experiment. As you can see in Figure 2, the top row of panels is Day One and the second row is Day Five of the experiment.

Day One is when they changed the cell culture conditions. Previous to Day One, all of these cell cultures were kept healthy with normal cell culture procedures; then, on Day One, they changed the condition. In the first column, they used the full nutrition (GlutaMAX plus 10 percent fetal calf serum) and antibiotics at the normal concentration. In the second

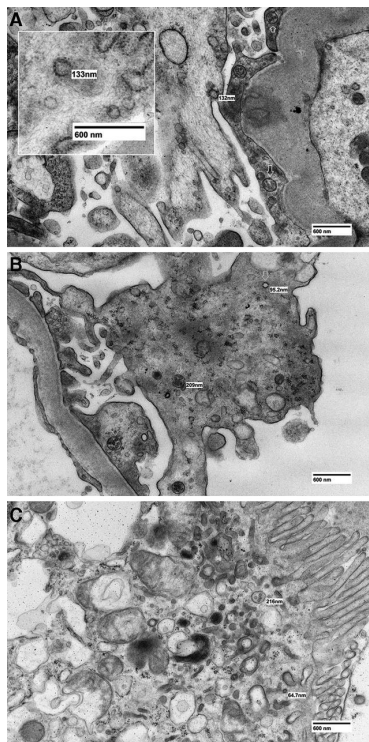
FIGURE 2. Control experiment by Dr. Stefan Lanka



column, they reduced the nutrition and kept the same concentration of antibiotics. There was no change on Day Five for either of these two procedures, no cytopathic effects.

The third column simulates what they do in virus cell culture isolation experiments, using reduced nutrition while increasing the antibiotic to three times the normal concentration. (The protocols use either two times or three times the normal concentration.) You can see that on Day Five, there were cytopathic effects—the cells developed vacuoles and started to break down. Normally, virologists would give this as proof of

FIGURE 3. “Viral-like particles in non-COVID19 patients’ biopsies. Electron microscopy images of viral-like particles within podocytes in a case of thrombotic microangiopathy in a (A) native kidney biopsy specimen and (B) acute cellular rejection in an allograft. Note the presence in both cases of single vesicles with an electron-dense rim likely representing endocytic coated vesicles, as well as larger multivesicular bodies (arrows), which could be confounded with vesicle packets containing virions. Inset in (A): the individual small coated pits in the exterior of the vesicle bear resemblance to a viral corona. (C) Similar intracytoplasmic vesicles within tubules in an allograft with changes suspicious for acute cellular rejection.”



the existence of a virus, except that there’s no virus in this experiment.

In the fourth column, Lanka added yeast RNA, which doesn’t contain any viruses—it’s a pure yeast RNA specimen bought from a laboratory supply company with good quality control. You can see even more cytopathic effects on Day Five in that culture.

So, both these control experiments show that the experimental procedure itself produces the cytopathic effects. If you took the culture materials from the two dishes with cytopathic effects and looked at them under an electron microscope, you would see particles in there that you could call a virus.

CORONAVIRUS FRINGE PATTERN

According to Hammond, virologists can see the characteristic coronavirus spikes on the particles they are calling viruses. Let’s review a couple of studies to see what is going on. The first was published in 2020 in *Kidney360*.⁵ In this study, researchers were looking at biopsies of people with kidney disease, mostly from before the Covid era. In the electron microscope photographs, they saw particles with the characteristic coronavirus spikes (see Figure 3). The researchers said that these were indistinguishable from coronavirus particles, which was a source of confusion for virologists. The authors pointed this out, and they even referenced a previous paper from the CDC that found the same thing.

They also said that they identified the protein that made up the spikes, and it was not the spike protein, but a protein called clathrin. So, seeing the characteristic spikes is completely meaningless; it doesn’t identify something as a coronavirus. Remember that these kidney biopsies were from people who had no disease that anyone thought was related to a virus, and it was before even the “discovery” of so-called SARS-CoV-2.

The second example comes from a “virus isolation” paper published in the *Medical Journal of Australia* in 2020.⁶ A very interesting quote occurs in this paper: “Electron micrographs. . . showed cytoplasmic membrane-bound vesicles containing coronavirus particles. Following several failures to recover virions with the characteristic fringe of surface

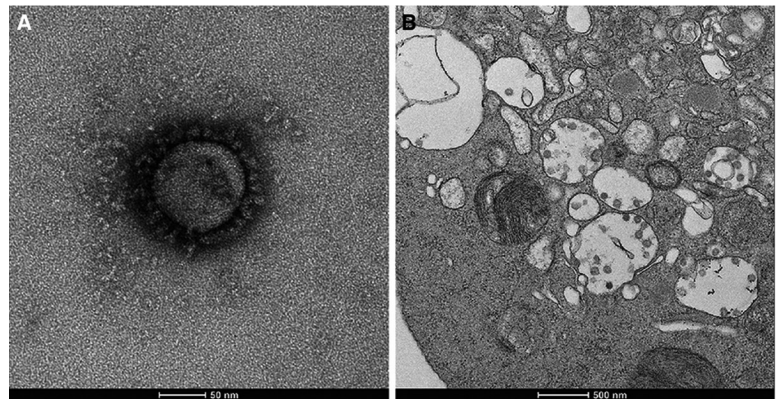


FIGURE 4: “Following several failures to recover virions with the characteristic fringe of surface spike proteins, it was found that adding trypsin into the cell culture medium immediately improved virion morphology.”

The scientists involved in “virus isolation” don’t realize that they’re doing fraudulent science because they’ve never looked at it carefully.

spike proteins, it was found that adding trypsin into the cell culture medium immediately improved virion morphology.” In other words, they didn’t see any spikes so they added the digestive enzyme trypsin, which breaks or cleaves proteins at a certain sequence, and then looked at it again under the microscope—and then saw the spikes! (See Figure 4.)

Now, isn’t that convenient? In other words, they put a spike suit on the particles so they could look like they’re supposed to look, instead of saying, “Hey, maybe there is no coronavirus in the sample.” If we have to digest a protein to make it look a certain way, then how could we say that’s what it is? It’s like having a cat but really wanting a dog, so you put a little microphone around the cat’s neck that makes a

barking sound and then call it a dog. We would call this cheating.

GENOME SEQUENCING

As Hammond and other adherents of viral theory have often stated, genome sequencing has been repeated thousands of times, and the results are published in international databases, so they can’t be a hoax. Actually, the *in silico* genome-sequencing procedure that we have described has been repeated over two million times—far more than Hammond claims. And of course, each time they get different results, because they can’t repeat results in an invalid experiment, so the different results are all published.

As described earlier, the way they do this

A MOUSE STUDY

Recently, Dr. Robert Malone stated that the omicron variant is not as dangerous as the others and that we should rethink our vaccines. One of the papers he cited was “Age-associated SARS-CoV-2 breakthrough infection and changes in immune response in a mouse model,” published in December 2021 in *Emerging Microbes and Infections*.¹¹

In the abstract of this paper we read, “Older individuals are at higher risk of SARS-CoV-2 infection and severe outcomes, but the underlying mechanisms are incompletely understood. In addition, how age modulates SARS-CoV-2 re-infection and vaccine breakthrough infections remain largely unexplored. Here, we investigated age-associated SARS-CoV-2 pathogenesis, immune responses, and the occurrence of re-infection and vaccine breakthrough infection utilizing a wild-type C57BL/6N mouse model. We demonstrated that interferon and adaptive antibody response upon SARS-CoV-2 challenge are significantly impaired in aged mice compared to young mice, which results in more effective virus replications and severe disease manifestations in the respiratory tract. Aged mice also showed increased susceptibility to re-infection due to insufficient immune protection acquired during the primary infection.”

Now, when well-known spokesmen such as Dr. Robert Malone comment on the importance of a study like this, it works to convince the public that SARS-CoV-2 is real and the omicron variant is real. Maybe omicron is not so bad, maybe it is worse in the elderly, but in any event, the new “variant” is real.

According to Malone, the reason this study is important is that it explains the significant adverse event profile of the vaccines. We would agree that these adverse events combined with a milder disease profile of omicron raise the possibility that boosters may not be good medicine, even for the elderly, but the suggestion that viruses have anything to do with this only perpetuates the kind of misinformation that justifies everything that is wrong with how the health authorities have handled the pandemic—masks, social distancing, isolation, hand sanitizing and vaccinations.

According to the authors, the antibody response was severely impaired in aged mice leading to more severe disease. In the Materials and Methods section, we see that the SARS-CoV-2 variant was “isolated” from a confirmed Covid-19 patient in Hong Kong and that the virus was cultured in Vero (kidney) cells and stored at negative 80 degrees C.

Now, the important part: they expose the mice to a “variant” of the “virus”—to what they think is the omicron variant. One would expect that what scientists would do is take purified virus and expose the mice in the way that humans are exposed, by breathing it in the air. But what did these scientists do? They did a standard viral culture, meaning they inoculated monkey kidney cells (Vero cells) with fetal calf serum and an unpurified sample from a person with alleged “Covid.” (Fetal bovine serum, by the way, is taken from live aborted slaughterhouse calves whose blood is sucked directly from their hearts.) So, they didn’t, in fact, use a virus—that is a flat-out lie. Instead of a virus, they used a culture of kidney cells that contained some of the primers allegedly from a variant strain, a variant that has never been isolated.

Now, you would think that they must have sprayed this culture onto the mice, or gently into their noses, but that’s

is to take a bunch of pieces of unknown origin, which they run through different software simulations, and then pick out the one they like. And then they do some further magic on it by just popping things in or taking things out somewhat arbitrarily to make it look more like what they think a coronavirus genome should look like. Then they claim that this sequence is a “reference sequence” and against all of those couple of million experiments that they have repeated, they can template a reference genome. So, of course, the computer is able to put things together in such a way that it matches the so-called reference sequence somewhat closely, because the sequences that make this up are probably mostly just human sequences of non-coding RNA. (A recent analysis shows this and will soon be published.) Thus, you should

be able to have similar enough sequences that you can put something together that’s close, but not exactly identical—which they then call “variants.”

Now Hammond claims that if the procedures were fraudulent, then tens of thousands of scientists all over the world would be participating together in a conspiracy; but that’s not the case at all because almost none of these scientists realizes that what they’re doing is not good science—they never question it. Doctors rarely question the things they’re taught; they just learn them and accept them as true. That’s why I (Andrew Kaufman) was recommending vaccines and using antibiotics earlier in my career, because I also just accepted those things and did them without question. Now I realize that they’re quite lethal, so I don’t do them any-

Doctors rarely question the things they’re taught; they just learn them and accept them as true.

not what they did. Instead, they anesthetized the mice with toxic drugs—essentially poisoning them—and then squirted a mixture of phosphate-buffered saline and the toxic kidney culture under high pressure down their noses through an intranasal cannula directly into their lungs. No rational person would say that this type of experiment has any relation to what happens in old or young people or to anybody exposed to a “virus.” It’s ridiculous to call this science.

And then they found out whether the young mice did better than the old mice. Upon intranasal inoculation, the young mice transiently lost a maximum of 5 percent body weight for a short period. In contrast, the older mice lost 12 percent of body weight, and they didn’t recover. Moreover, the young mice did not show any sign of disease. The older mice showed hunched postures and labored breathing, which was more severe at higher doses of toxic cell culture injection into their lungs.

If you wanted to be precise in your language, you would say that young mice—injected, anesthetized and subjected to high-pressure squirts of toxins directly into their lungs—seemed to be okay; they just lost a little weight. That’s probably the definition of a bad day for a mouse. But they seemed to recover, whereas the older mice didn’t do as well. That’s what they found.

And then they did all kinds of biochemical histological genetic studies, analyzing the tissue after they ground up the nasal turbinates, the lungs and so forth. They then concluded, “Yep,” these mice have a lot more antibodies than they should—which means they are trying to protect themselves against being poisoned with toxic cell cultures injected right into their lungs.

The authors found that the staining of the nucleocapsid protein was more intense at higher doses of the stuff squirted up the mice’s lungs. Later, they say these findings indicate that SARS-CoV-2 “replicates more effectively in the respiratory tract of aged mice than young mice upon virus exposure.” We would submit that they never actually took out any virus and never saw any replication of any virus in any lung of any mouse.

In other words, the researchers essentially said, “This study does not prove what we thought it was proving, but is just another way to convince us that there is a virus and that the virus is the cause of disease.” When in fact, all this study really tells us is that older, poorly-fed mice do worse when exposed to poisons than younger ones.

Does it matter whether this disease is caused by a virus or not? When the Chief Medical Officer of the World Health Organization predicts that half of the United States is going to get sick in the next six to eight weeks, yes, it does matter. The problem with all this talk about viruses is that it completely obscures the reasons why people are getting sick. We know that a lot of people are getting sick from the injections, but they are not the only people getting sick. Unfortunately, as long as we stick to this nonsense called the viral narrative, we will never ask the right questions, and we will never get any answers as to what otherwise is making people sick.

more. There was a kind of individual process that I went through for that.

But the scientists involved in “virus isolation” don’t realize that they’re doing fraudulent science because they’ve never looked at it carefully. And one of the ways that science allows this kind of thing to happen is by a high degree of compartmentalization, where they don’t collaborate or talk with other people in different fields. They don’t learn how other scientists do their experiments and also how they do control experiments. And they don’t seem to talk to exosome scientists, often because they would then see that exosome scientists are able to extract and purify exosomes right from the source. And then they would try to do that and fail, because there aren’t any viruses, and then they would have to have a different conclusion and change their opinion.

But the truth is, it doesn’t matter whether all of the thousands of scientists doing “virus isolation” are in a conspiracy, and it doesn’t matter whether they’re completely ignorant, because the only thing that’s important is to look at the actual science itself—the experiments—and

ask the question, can you learn something from this? Can you conclude anything from this experiment? And if the answer is no, it doesn’t matter how many people think you’re wrong, it only matters that the answer is no. It shouldn’t be terribly surprising that the virologists have gotten this wrong, because in medicine this happens frequently. Take the example of beta blockers and heart failure. For many decades, it was an absolute contraindication to prescribe a beta blocker to someone with heart failure, because beta blockers make your heart beat less strongly and less rapidly. So, that was seen to make your heart weaker. But then research showed that actually, adding a beta blocker slows the progression of heart failure and al-

RAPID TESTS FOR COVID-19

Recently, the CDC announced—quietly and without explanation—that as of January 1, 2022, they were no longer going to use PCR tests for “diagnosing Covid.” Many people saw this as a kind of capitulation by the CDC, as if to say they had finally seen the light; or perhaps there was enough pressure on CDC that they realized they had to back down quietly from the PCR test. Many people interpreted the CDC’s move as an end to testing, and since this pandemic is really a pandemic of testing, they believed this would go a long way toward ending the pandemic. After all, if they stopped doing the test, nobody would test positive. However, the CDC didn’t say they were going to end testing.

The problem is that these people are playing chess, while the rest of us are playing checkers—if they’re playing chess, we need to play chess, too, and understand the motivations and the rationale behind some of the moves we’re hearing about. And this is particularly true in the case of things that seem to be small victories—sometimes even fairly large victories—because upon closer examination, they don’t all turn out to be the victories that we imagined.

The PCR (Polymerase Chain Reaction) is not a diagnostic test, it’s a manufacturing tool, and it does not test whether or not anybody has any virus. Rather, the PCR is a method to rapidly make millions to billions of copies (complete copies or partial copies) of a specific DNA sample, allowing scientists to take a very small sample of DNA and amplify it (or a part of it) to a large enough amount to study in detail. The inventor, Kary Mullis, was emphatic that his test could not be used to diagnose or determine disease.

The PCR amplifies the DNA sample anywhere from twenty to forty cycles in order to get enough genetic material to detect—the test does this by showing a color change. To use the PCR as a diagnostic test requires two assumptions. The first is that you know that the genetic sequence you are amplifying comes from the virus you are looking for; the second is that there are no other biological organisms in the sample—no microbes, bacteria, fungi or human DNA. To repeat, the premise of using the PCR for diagnosis is that you already know the sequence of the virus, and you know that this primer sequence is one of the pieces of the entire virus genome, and that no other biological organism has that same primer sequence of DNA. We know that both these premises are not true with PCR Covid tests. Actually, one of the people who came up with the original primer sequences was Christian Drosten, who admitted in a paper that they never had a copy of any virus.¹²

Now, just think about that for a minute. If you never had a copy of the virus, how can you possibly know that this piece of the genome is a piece of the virus, that it actually came from a virus? If we gave you a sentence and asked you whether this sentence came from a certain book, the obvious common-sense question that any rational human being would ask is, can you show me the book? How can you know whether a sentence comes from a certain book if you don’t have the book?

Furthermore, how can you prove that no other living being has this same sequence? You can determine this by doing what is called a BLAST search, which searches the database of all the genome sequences of all the organisms that have ever been sequenced. Scientists have done this and found out that the same sequence used in the PCR

lows people to live longer. It took some time for that scientific finding to be integrated into medicine, but there was no truth to the notion that doctors everywhere were in a conspiracy to hasten the death of heart failure patients. They were just ignorant to the truth of the scientific relationship between that drug in that condition. We could interpret “virus isolation” as a similar phenomenon; virologists who are doing these experiments are not able to actually show the results or provide the conclusive evidence because they are just ignorant of that fact, because they haven’t looked at it. It’s quite as simple as that.

RESPONSE TO MERCOLA

Entering the virus debate on January 17, 2022, Dr. Joseph Mercola published a “fact-checked” article entitled, “Yes, SARS-CoV-2 is a Real Virus,”¹ in which he insisted that SARS-CoV-2 has been isolated, photographed, genetically sequenced, and exists as a pathogenic entity.

Mercola cites studies from Italy, Germany, India, Columbia, Canada, Australia, Korea and the U.S., which claim to have isolated SARS-CoV-2 and characterized it by genome sequencing. However, none of these studies isolated any virus from the fluids of the patient; all of these studies used culturing techniques that can lead to tissue breakdown and the creation of exosomes (identical in form to “viruses”); none of these studies had a meaningful control; and all used questionable computer techniques to generate a genome in silico. Remember that these tissue cultures would also contain genetic material from the kidney cells of the culture and the bovine serum used as a nutrient medium. Even if the tissue cultures did

test primers for SARS-CoV-2 is found in at least ninety human sequences and ninety microbial sequences (meaning bacterial or fungal sequences).

Thus, the second premise, that a sequence is unique to a specific virus, is also not true. The sequence is found in humans and in bacteria. If you start with a sample that has sequences that come from humans and that has bacteria and fungus in it, there is no way of knowing whether the positive match—the sticking of the primer to a sequence in the sample that will then be amplified—comes from a virus, the person, bacteria, fungus or maybe from something else.

So, the PCR test is invalid—there are no “false positives,” there are no “false negatives,” there are just false results. So, shouldn’t we applaud when the CDC finally acknowledges that they are not going to do a PCR test anymore?

The question is, what are they going to replace it with? According to government announcements, they are going to use a “higher throughput and multiplexed assay with biotinylated primers.” To explain further: “This developed invention is multiplex and uses the Luminex bead-based liquid assay, which contains one hundred different unique bead oligonucleotide probes with sequences complementary to the target sequences covalently coupled to these unique beads. These capture beads are mixed with viral samples obtained from the patient via cheek swabbing or throat wash and subjected to PCR in a conventional thermocycler. The amplified target sequences then hybridize to complementary capture oligonucleotide probes via forward biotinylated primers; if this bead probe amplicon unit contains the target nucleic acid, it will be bound by the reporter molecule and fluorescence will be detected by flow site cytometer. This multiplex assay would thus be able to detect and identify respiratory pathogens present in hospital and clinical settings.”

English translation: Instead of the old PCR test, they are going to use one hundred different unique beads. These beads contain the primer sequences, and they’re all attached to the other beads. These beads are mixed with viral samples from the patient, and then they are put into PCR amplification cycles.

Now, the only real difference between this and the normal PCR test is that there are more of the primer sequences—like one hundred more—attached to a compound called biotin. These biotinylated primers stick easily to the sequences in the sample, which then get put into the old-fashioned PCR thermocycler, so that they can be amplified. And then you get a result. Now, instead of a PCR test for Covid, one test will test for all the “viruses.”

The upshot of this is that now they will be able to say that you have many different viruses, all at the same time. Since all these viruses can make you sick (so they will argue), you may need a vaccine for each one of them.

This is a checkmate: They now are able to find the code for the original “virus” as well as the delta variant and the lambda variant, right on through the Greek alphabet, because they can make it look like you have multiple different sequences. These sequences amplify more easily because they figured out a way to make the primer sequences stick more readily to whatever is in your sample. And this is not a single-plex test. This is a multiplex assay, which means they can find any number they want, just by increasing the amplifications. And checkmate, they got us.

So, they replaced the old-fashioned PCR with something that will make the whole thing even worse. The lesson is that we should not be fooled by false minor victories, because they are not necessarily good news.

contain viral particles, how can anyone know that the DNA the computer is analyzing comes from the virus?

As Mercola states, “Another sticking point for some is whether or not SARS-CoV-2 has ever been isolated from a human subject without passing it through animal cells, as such media could be contaminated and therefore the source of the virus.”

Indeed, this is the “sticking point!” All of the studies that Mercola cites as proof passed the sample through animal cells—cultures contaminated with fetal bovine serum and toxic antibiotics, and starved with a minimal nutrient medium.

Furthermore, no paper has proven that an isolated or pure virus obtained from a cell culture has ever made an animal or human sick in any way. Therefore, it is illogical, irrational and anti-scientific to claim that the “virus” is a pathogen.

According to Mercola, “At least part of the confusion appears to be rooted in how the term ‘isolated’ is defined. Some insist a virus is not isolated unless it’s also purified, while others say a virus doesn’t have to be purified in order to be ‘isolated.’” Actually, as we have pointed out, the confusion—deliberate confusion—results from virologists using the word “isolated” to mean “not isolated,” and insisting that “purified” and “isolated” do not mean the same thing.

MORE GENOME SEQUENCING

One study Mercola highlights is a “genome sequencing” study published in January 2021 in *Gut Pathology*.⁷ In this study, the genetic material (RNA) was extracted directly from stool samples of a patient identified as having Covid-19 using the meaningless PCR test.

This paper relies on an *in silico* genome-sequencing procedure whereby they extract all of the RNA that is present in a body fluid or tissue sample, which would include a number of different sources of genetic material, including the person’s own. The material would include non-coding DNA that has been transcribed, spliced and recombined to make all sorts of novel sequences.

They then throw out the long fragments and just look at the short ones. This is a really important point, because the longer the sequence, the more you can be sure that it came from one

source; whereas if you have short sequences, when they put them together in a longer sequence, parts of it could have come from different sources. It’s more reliable to have longer sequences, but then they can’t do the sequencing as fast. So, they put all those short sequences into the computer and let various computer software programs put them together, mapping them to the “reference” standard genome—which has been done in the same way—and then give you a result. The result is a little bit different each time, which is why they have over two million “variants.”

In this 2021 paper, they used fecal material, which they said contained the same genetic material as that extracted from the nose using a nasal swab. And interestingly, in this case, they did use a control group, which is very unusual—they actually used a purchased heat-inactivated SARS-CoV-2 toxic cell culture that served as a negative control.

The other unusual procedure was that they used shorter strands of RNA than normal. Usually, they look at strands of up to one hundred fifty base pairs, but in this study, they limited the length to seventy-six base pairs. This would result in even more error in terms of the source of each particular little strand.

They also skipped an important step, which they call making “contigs” (from the word contiguous). Usually, what they do is take all those little sequences of short strands—there are often over fifty million of them—and put them into software number-crunching programs that try to pair up overlapping sequences on the ends to make longer and longer strands—this is what they call “contig.” Then they pick one of the longest strands and use that as the base genome.

In this case, they didn’t do that. They just took the sequence strands and templated them right away against the reference standard from the database. In other words, they chose the pieces that would fit into the puzzle and entered them into the program, and then the software filled in the gaps and rearranged things as necessary. In this way, they made sure that the genome looked the way they wanted it to look.

All of the studies Mercola lists as proving the existence of the SARS-CoV-2 virus are done in similar fashion to come up with a computer simulation, not a real genome taken intact from a real organism.

When Hammond talks about finding a genome of twenty-eight to twenty-nine thousand base pairs, it’s important to understand that they have never found this genome in any bodily fluid, just like they have never found anything they could call a virus. They have never found a strand of twenty-nine thousand base pairs; instead, they have created it in the computer by matching pieces together based on a template. In other words, they find the sequence only because that’s the sequence they’re telling it to find. This is not science!

MORE STUDIES

Another paper cited by Mercola comes from Italy, published in the *Annals of Internal Medicine* in August 2020.⁸ The researchers took a sputum sample from a sixty-five-year-old woman and diagnosed her with Covid-19 using a PCR test. Then they cultured the sample in kidney cells, followed by genome sequencing as described above. It’s the same in all the studies that Mercola cites. Nobody isolates the virus from the patient

directly; nobody takes that virus and determines the genetic material in that virus; nobody takes that virus and exposes somebody else to it and shows that it causes disease.

Mercola cites a study from Colombia that is the same exact experiment—a nose swab cultured in a toxic cell culture, followed by genetic sequencing and electron microscopy.⁹ According to the researchers, “Electron microscopy images obtained from infected cells showed the presence of structures compatible with SARS-CoV-2”—not structures that *are*, but that are *compatible*.

These structures are also “compatible” with kidney failure and probably many other things. The authors state that the genetic composition of their isolates was *consistent* with the predominant variant—not saying it *was* the predominant variant. In other words, they are hedging at every turn.

At the end of his article, Mercola mentions “antibody dependent enhancement (ADE),” but there is absolutely no scientific evidence to support something called ADE. Virus theory posits that we make antibodies against viral diseases. In July 2020, the head of the Bulgarian Pathology Association stated that they had found no monoclonal (coming from the same cell) antibodies in any of the people said to have died of Covid.¹⁰

This is like saying that no one has died of Covid, because since they haven’t found antibodies, they must conclude that the patients didn’t have Covid.

DOES IT MATTER?

Hammond dismisses those who question the viral theory of disease as his “pet peeve” and “divisive” of the health freedom movement. According to Mercola, “Getting too far into the weeds of theories that refute the existence of viruses altogether will only slow down and hamper the truth movement rather than aid it along, and I would strongly discourage anyone from engaging in this highly unproductive narrative.” In other words, if you question the viral theory, you are the bad guy, hindering the movement for health freedom. One virus advocate has referred to “virus-deniers” as domestic terrorists!

And yet the virus debate has immense importance to the health freedom movement. All the objectionable “public health” measures—masks, social distancing, isolation, testing and above all toxic vaccines—are predicated on the belief that we are threatened by a virulent, contagious virus. If there is no virus—not for Covid-19, not for any disease—then the justification for forcing these measures on the public disappears. ☹️

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One virus advocate has referred to “virus-deniers” as domestic terrorists!

THE SEVEN U.S. GOVERNMENT PAYOFFS TO KILL YOU IN HOSPITALS by Dr. Peterson Pierre¹³

If you have Covid, and you end up in the hospital, you’re put on a rigid protocol. There’s a high mortality rate in the hospital, and your family is kept in the dark about what is happening. So, what’s going on here?

The CARES Act is providing bonus payments to hospitals whenever they have a diagnosis of Covid, while the Center for Medicare and Medicaid Services is waiving patient rights. This is a deadly combination.

The hospital gets the first payment when they offer a free Covid test in the emergency room, and they get another payment if they can come up with a diagnosis of Covid. Number three, they get another bonus payment if they admit a patient with Covid. Number four, they get another bonus payment if the patient is put on remdesivir. Number five, another bonus payment if the patient is put on a mechanical ventilator. Number six, another 20 percent bonus if the diagnosis on your death certificate says Covid, even though you may not have died from Covid. And then number seven, there are bonus payments for the coroners.

Does the public understand the gravity of what’s happening right now? The government is literally paying hospitals to kill you. That’s what’s happening. These are real human lives we’re talking about, priceless human lives. It’s estimated that about one hundred thousand dollars per patient is what the hospital is getting. Think about that.


students, residents, and fellows in all psychiatric specialties. He has been qualified as an expert witness in local, state, and federal courts. He has held leadership positions in academic medicine and professional organizations. He ran a start-up company to develop a medical device he invented and patented.

Dr. Tom Cowan has been one of the leading voices speaking out against the mainstream medical narrative and coordinated agenda of masking, social distancing and forced vaccinations. His messages of health freedom and personal autonomy have resonated with millions of people around the world. Dr. Cowan challenges conventional medicine to explore health and wellness in holistic terms, seeking to provide a collaborative forum for the exchange of knowledge, products and practices that enable us to forge a new world together, governed by truth. He is the author of several books including *The Fourfold Path to Healing*, *Human Heart*, *Cosmic Heart*, and *The Contagion Myth* (with Sally Fallon Morell).

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Solving the Mystery of TB: The Iron Factor

By Sally Fallon Morell

Physicians and researchers have debated the cause of tuberculosis (TB) for centuries, early observers linking TB with injury, malnutrition or toxins. In *Book 1, Of the Epidemics* (410–400 BCE), Hippocrates describes the cause of TB as a “weakness of the lung,”¹ a view shared in the 1930s by the dentist Weston A. Price.

Price observed that peoples living on their native diets exhibited no cases of TB, in spite of constant exposure to smoke from wood or peat in their dwellings, but that the disease was rampant in those born to parents who consumed the “displacing foods of modern commerce” and had narrow faces with crowded and crooked teeth. He believed that a poor diet in utero and during the period of growth resulted not only in weak facial development, but also a weakness in the lungs, making the offspring especially vulnerable to lung tissue breakdown, a hallmark of the disease.²

Koch's report was published as a letter in the *Times* (April 22, 1882), and subsequently in . . . other newspapers from around the world, launching the germ theory into public consciousness.

Both Hippocrates and Weston Price recognized the role of diet in the treatment of TB. In the era of Hippocrates, treatment took place in temples, where patients received plentiful and good food—especially milk, and particularly asses' milk—along with fresh air and sea breezes. The Greek physician Galen (129–216 CE) and other physicians of his time recommended fresh air, milk—particularly human breast milk—eating wolf livers and drinking elephant urine. Pedanius Dioscorides, a Greek army surgeon in the service of Nero (54–68 CE), recommended “warming drugs” such as animal fats; and Tertullian (160–225 CE) recommended butter boiled with honey.¹

Others fingered toxins as the culprit. In the early 1800s, Thomas Willis speculated that TB was caused by consumption of sugar, resulting in an acidity of the blood.³

Florence Nightingale blamed TB—a huge problem in soldiers during the Crimean War of 1853–1856—as “the monstrous product of breathing foul air.”⁴

TB became epidemic during the Industrial Revolution of the eighteenth and nineteenth centuries, with observers linking the disease to social conditions of the time—poverty, malnutrition and overcrowding—in the working classes. In 1838 and 1839 in England, between a quarter and a third of those who died of TB were tradesmen and laborers compared to a sixth who were “gentlemen.”⁵

ENTER. . . THE CONTAGION THEORY

The first to propose contagion as the cause of TB was Girolamo Fracastoro, an Italian physician and poet who, in his 1546 work *De Contagione*, proposed that “phthisis” (the word used for TB in the 16th century), was transmitted by an invisible *virus*, which he believed was contagious through direct contact with the discharged fluids of the infected.

By the eighteenth century, many Italian physicians had come to share the view that phthisis was infectious, and they avoided doing autopsies on patients who had died from phthisis to protect themselves and their students. But British and American physicians of the time disagreed, with many believing that the disease

was hereditary or, like Weston Price, ascribed the illness to constitutional weakness.⁵

Conventional medicine gives credit to German physician Robert Koch for revealing that “TB is caused by an infectious agent,” with Koch presenting a famous report to the Physiological Society of Berlin on March 24, 1882.⁶ In his paper, Koch cited the work of researchers who induced tuberculosis in animals by injecting them with tuberculous matter from animals or people that had died of the disease, and especially the experiments of French military surgeon Jean-Antoine Villemin. In 1869, Villemin had seemed to demonstrate that the disease was contagious by injecting tuberculous matter from human cadavers into laboratory rabbits, which then became infected. Villemin observed that soldiers stationed for long periods of time in barracks were more likely to have phthisis than soldiers in the field, and that healthy army recruits from the country often became consumptive within a year or two of taking up their posts.

In his 1882 report, Koch proceeded to describe how he had identified the tuberculosis bacillus by staining tuberculous matter with a blue dye, growing the organism on a preparation of ox blood, and then—using disinfectants at the site of the inoculation—injecting animals with the culture. With few exceptions, the animals developed granulomas containing the bacilli at the site of the injection and in nearby organs, and eventually died.

Also key to Koch's arguments were the experiments of Austrian scientist Franz Tappeiner, who, Koch reported, “ha[d] been successful with inhalation.” In an 1877 paper, Tappeiner noted “the repeated observation that very healthy girls from a healthy family became phthisic themselves after prolonged care of a phthisic patient and died quickly.” This strengthened Tappeiner's suspicion that TB was a contagious disease “caused by inhalation of phthisic sputum, which was atomized by coughing in the air,” even though experimental methods available at the time (inoculation, feeding and forced tracheal introduction) had failed to provide conclusive results.

In his presentation, Koch then proceeded to

describe experiments in which he inoculated material from scrofulous glands or fungal masses from joints in which no tubercle bacilli could be found. “In these cases, not a single animal became sick, while. . . the animals inoculated with bacilli-containing material. . . always showed an extensive infection with tuberculosis after four weeks.”

He concluded: “All of these facts taken together lead to the conclusion that the bacilli which are present in the tuberculous substances not only accompany the tuberculosis process, but are the cause of it. In the bacillus we have, therefore, the actual tubercle virus [poison].”

Koch’s report was published as a letter in the *Times* (April 22, 1882), and subsequently in the *New York Times*, the *New York Tribune* and other newspapers from around the world, launching the germ theory into public consciousness. Koch won the Nobel Prize in 1905.

A DIFFERENT WAY OF THINKING

The case for the infectious nature of TB seems irrefutable. . . yet many are still skeptical, still asking questions. For example, how could “inhalation of phthisic sputum, which was atomized by coughing in the air” cause TB when forced tracheal introduction of tuberculous material had failed to provide conclusive results? If TB is spread by coughing, how is it that any TB caretakers survive? How did Florence Nightingale or any of her nurses survive the Crimean War? If exposure to coughing patients is so deadly, any assignment of medical personnel to a TB ward would be a death sentence.

The skeptic who introduced me to a different way of thinking about TB was the late Mark Purdey, known for his disagreement with government pronouncements about the cause of mad cow disease.⁷ When some of his dairy cows tested positive for TB, he began to ask questions. Why were so many cows on farms in the area suddenly coming up positive?



CAST IRON COOK STOVE

Note the addition of cast iron cookware, including a coffee pot! Iron piping could vector the fume-laden hot air into upstairs rooms.

He noted that for several years, tight finances had prevented farmers from applying lime to their fields, resulting in more acidic soils. He observed, “The relevant issue in respect of TB infection and soil acidity hinges on the fact that acidification of the topsoil leads to an excessive accumulation of available iron—particularly in the regions where soil iron is naturally elevated and rainfall is high.”⁸

Today, we know a lot more about mycobacteria—the species associated with TB—than nineteenth-century researchers did. Like so many bacteria considered “pathogens,” mycobacteria are iron-loving organisms, which proliferate in environments of excess iron.⁹ Thus, Koch was able to cultivate the bacillus on iron-rich ox blood, and sometimes on iron-rich meat, but not on other substances. We also know that the TB bacillus is ubiquitous, always there in the soil and most likely in small amounts in animals and humans. Up to nine out of ten people who test positive for the TB bacillus exhibit no signs of the disease—a condition called “latent TB.”

IRON POISONING

Let us now consider iron oxide—a poison given off by iron that has been heated. Since the beginning of metallurgy, humans have suffered from exposure to iron oxide—men working with iron, of course, but also those exposed to heated iron cookware in enclosed spaces. This can explain the occasional evidence of TB in the remains of preindustrial peoples.

With the Industrial Revolution, however, that exposure increased. Exposure occurred in iron mines, in foundries that worked iron for all the new machinery, in ships with their iron boilers, in railways via the steam from cast iron boilers, in areas of dense pollution where the preferred fuel was certain types of iron-rich coal—iron is the most predominant metal in coal fly ash¹⁰—and especially in war. Iron cannons, iron gun barrels, iron hand grenades and iron cookware for feeding the troops all produced iron oxide; in trench warfare, the heavy pollutant would fall into the trenches and linger. Soldiers living in these trenches suffered massively from TB.

In 1790, a new invention not only increased exposure to iron oxide but also brought it into

the drawing room: the cast iron stove.

With its large surface area, the cast iron stove released large amounts of iron oxide, to which not only the cooks and maids in unventilated basements were exposed, but also madame and monsieur enjoying the comfort of a warm room upstairs, as the moist heat rose through iron piping. Or, households may have had a cast iron parlor stove dedicated to heating the living areas. We had just such an arrangement in our farmhouse—a cast iron stove in the entry way with rusty iron piping to take the heat upstairs. Fortunately for the previous owners, the stove remained largely unused after the installation of radiators; though also made of cast iron, radiators are not operated at such hot temperatures as cast iron stoves and are often painted, a practice that would reduce the off-gassing of iron fumes.

During the Industrial Revolution, crowding and poverty in the cities would have greatly increased exposure to iron oxide—whether from pollution, from a cooking pot over a coal fire in crowded quarters or from a cast iron stove in an unventilated room. If a TB patient lay in bed near a cast iron stove for warmth, both the caretaker and the patient would have breathed in iron oxide day and night.

Treatment for TB usually involved traveling to the countryside in the summer for fresh air and sunlight—eliminating exposure to iron oxide for a few months. Most protocols also involved consuming raw milk—the lactoferrin in raw milk helps sequester iron and reduces the TB symptoms.¹¹ In addition, the therapy often involved consumption of vitamin A-rich liver or butter—vitamin A is critical to healthy lung function and protection against heavy metals. The patients undergoing these protocols usually improved, but then regressed with renewed exposure to iron oxide when they returned to the cities in the fall.

Such was the plight of poor Violetta, the heroine of Verdi's opera *La Traviata*. She develops TB while living a dissolute life in Paris, then recovers during her happy time with Alfredo while living in the countryside and then succumbs again after returning brokenhearted to the ornate parlor stoves of Paris. The stress of grief can rapidly use up protective vitamin A stores.

Iron poisoning is called siderosis, and its symptoms are the same as those of TB—cough and trouble breathing, of course, and sometimes coughing up blood. The characteristic miliary (millet-seed-like) lesions of TB are not exclusive to the disease, but occur in other diseases as

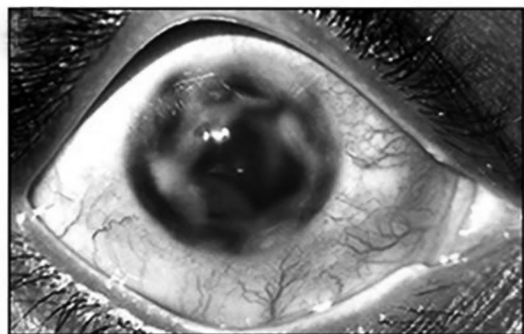
well—including siderosis.¹² Siderosis can affect other organs besides the lungs—as does TB. One striking similarity is the darkening of the eyes, which occasionally occurs in both siderosis and TB.

Let's return to Koch's experiment. He induced lesions and found the TB bacillus in them by injecting the animals with a culture of TB bacillus grown on iron-rich blood. While he could claim that he had "isolated" the organism—in other words, there were no other types of bacteria in the culture—his culture was not "pure," meaning devoid of other substances. The culture would have been contaminated with iron, of course, and possibly contained toxins produced in the preparation of the ox-serum culture (which was heated several times, a process that can denature the many delicate substances in blood). And finally, the site of the injection was treated with an antiseptic, probably carbolic acid. In other words, there were certainly harmful substances, especially iron, in the injection, and granulomas—interpreted as TB—were the logical result.

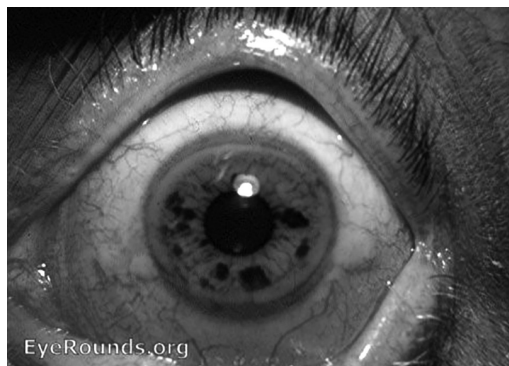
When Koch injected animals with material from scrofulous glands or fungal masses, no lesions appeared—but these were not cultured on iron-rich blood that had been heated several times.

TAPPEINER RECONSIDERED

The key test is whether TB can be produced in the lungs by exposure to the TB bacillus in the air. For this, Koch relied on the earlier experiment of Tappeiner, so it pays to look at it more closely.¹³ To prove contagion, Tappeiner purchased three dogs and kept them in a dog stall near a window and a door, "which was



Occasionally, TB patients exhibit darkening of the eye (left). Siderosis (right) is also associated with a darkening of the eye, from iron deposits on the retina.



closed on all sides and connected to the air only at the front through a lattice-like open door at the top.” Next, Tappeiner obtained sputa from a “phthical afflicted locksmith.” He ground a tablespoon of this in a porcelain mortar with distilled water and put it in a “steam atomizer from Stiefenhofer.” He placed the atomizer in front of the kennel and allowed the nebulized liquid into the air of the kennel twice a day, for sixty to ninety minutes. The upper lattice opening was hung with oil cloth “to better concentrate the dust.”

At the same time, Tappeiner mixed ground-up sputum into the feed of two other dogs “to try whether absorption from the intestinal tract could also produce tuberculosis.” Tappeiner observed

that all five experimental dogs appeared to be quite healthy; they exhibited neither coughing nor diarrhea, ate with the best of appetites and were lively and alert, without any sign of illness save for slight emaciation or lack of growth.

Autopsies on the test animals performed after either three weeks (on one inhalation dog) or six weeks (on the other four dogs) revealed small lesions (called miliary tuberculosis because the lesions resembled millet seeds) in the lungs, kidneys, liver and spleen, and—in

the feed dogs—also in the intestinal tract. So, while forced tracheal introduction of tuberculous matter failed to demonstrate contagion, a tiny amount of aerosolized sputum on a jet of steam did the trick.

I have been unable to locate a picture of a “steam atomizer from Stiefenhofer” but all the atomizing devices of the era were made with iron and brass.



Brass atomizer (1875).

Heated brass can also give off iron fumes, as well as arsenic fumes, a double whammy.¹⁴ So, did a tiny amount of bacillus from the lungs of TB patients induce lesions in the animals, or was it iron (and possibly arsenic) fumes in the steam?

The key question, not answered in Tappeiner’s report, concerns

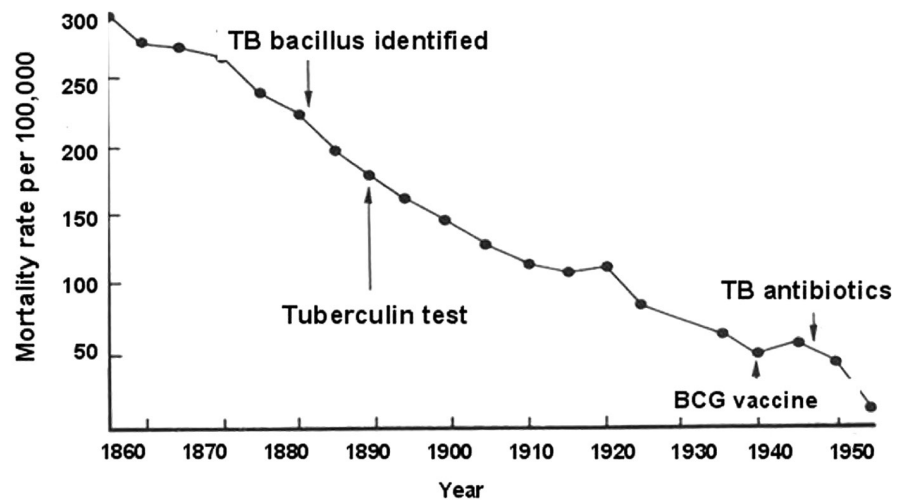
the two feed dogs—were they in a different stall but in the same room as the three inhalation dogs? If so, they would also have been subject to the steam and thus would not represent a real control.

LOOKING IN ALL THE WRONG PLACES

Germ theory dictates the current treatment for TB—antibiotics and vaccinations—which health officials claim has successfully reduced the death rate from this terrible disease.

Mortality from TB was already falling, long before antibiotics and vaccinations.

FIGURE 1: Reduction in TB mortality preceded the introduction of a vaccine and antibiotics. These interventions cannot take credit for TB’s decline.



These TB deaths occur mainly in the developing world, where cast iron stoves and cookware (pots and griddles) are still widely used, often in unventilated hovels.

But note that mortality from TB was already falling, long before these interventions (see Figure 1). As stainless steel and aluminum gradually replaced cast iron in stoves, furnaces and industrial equipment, household exposure to iron oxide gradually declined.

That does not mean we have solved the problem of TB, which is still the world's number one killer, with over three thousand deaths per day attributed to the disease (see Figure 2).

These TB deaths occur mainly in the developing world, where cast iron stoves and cookware (pots and griddles) are still widely used, often in unventilated hovels. Iron mining and iron works are also common, typically with little concern for safety; coal is still used in power plants and domestic settings in these areas.

Even in the U.S., TB remains a problem (see Figure 3).

Maybe we have failed to solve the mystery of TB because we are looking in the wrong place. Could it be that the bacillus associated with the disease is not the cause but actually the therapy? Could it be that excess iron in the tissues calls on these ubiquitous critters to serve

as a clean-up crew? Could it be that Florence Nightingale—a mere nurse!—was the one who got it right in fingering poisonous gases, and that the effects of this poison are exacerbated by poor nutrition and prenatal injury?

Likewise, we will not solve the Covid problem if we are looking in the wrong place, and if we blame continuing outbreaks—even in the vaccinated—on new virus variants until we run out of Greek letters. My colleague Tom Cowan and I are not alone in proposing microwave radiation poisoning from Wi-Fi and 5G as a major cause of this mysterious illness. The epidemiology fits; the biology fits. The solution is not vaccines and antivirals, but the hard, unglamorous work of cleaning up our houses, workplaces, hospitals and towns—and eating protective foods—so that we can live safely with this new technology.

UPDATE: Guess what! In homeopathy, iron and arsenic (*Ferrum Phosphoricum* and *Arsenicum Album*) in potentized form (very diluted and succussed) are indicated for tuberculosis. The idea in homeopathy is that something that in

FIGURE 2: TB is still the number one killer disease, with over three thousand deaths per day worldwide.

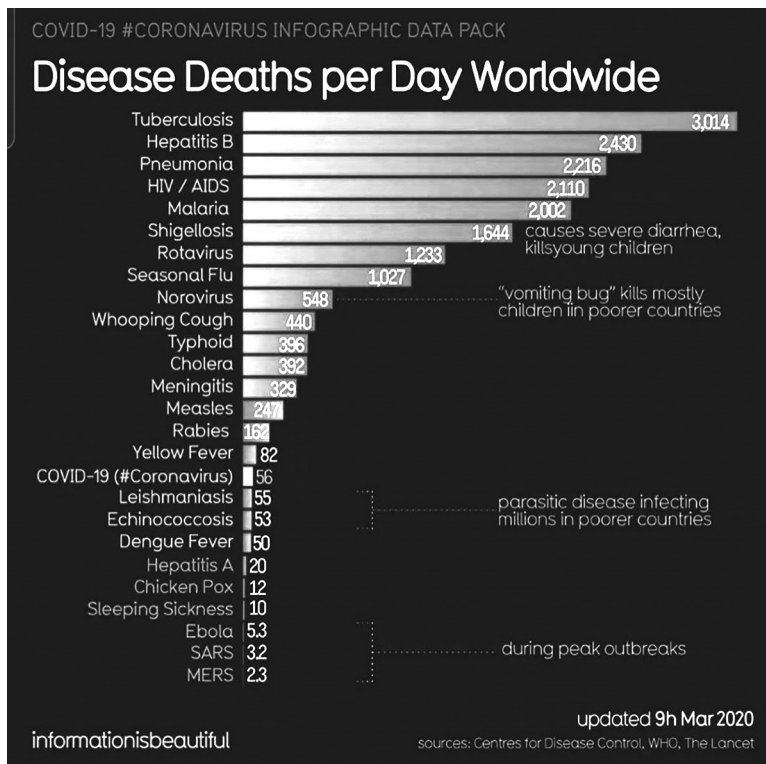
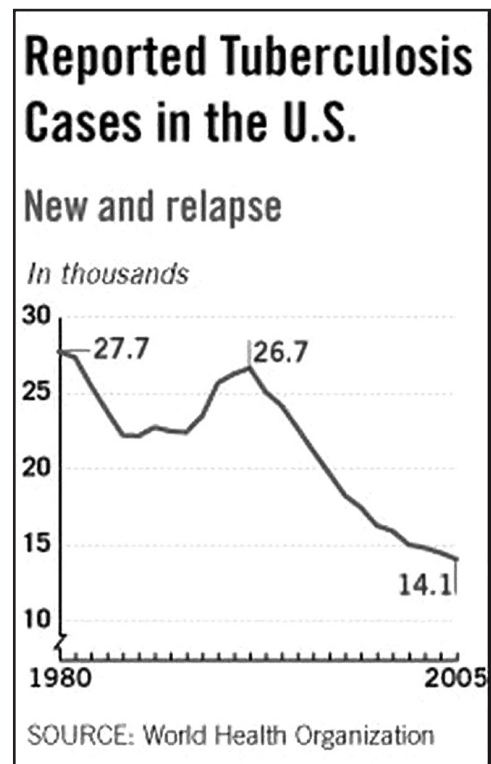


FIGURE 3: TB has declined in the U.S., but has not completely disappeared.



large quantities would make someone sick can, in potentized form, make one well. Just another indication that exposure to fumes of iron, and possibly to arsenic, is the cause of TB. ☹️

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

Many thanks to Tamara Romaine for her translation of the Tappeiner article from German into English.

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A TRIBUTE TO JIM TURNER, JD

Renowned health freedom leader, attorney Jim Turner, JD, passed away on January 25, 2022, in Washington, DC. Jim’s work for health and freedom over a lifetime of advocacy helped shape the landscape of health seekers in America. From his early 1970 writing of *The Chemical Feast*, to his most recent groundbreaking work for *The Transpartisan Review*, Jim was always one step ahead, lending his expertise, thinking and problem-solving skills to thousands of health freedom issues and leaders.



Jim continuously supported the work of the National Health Freedom Coalition (NHFC) since its very inception in 2002. In 2003, he became the first keynote speaker of NHFC’s Health Freedom Conference. And in 2018, he was once again the keynote speaker for NHFC’s United States Health Freedom Congress.

Jim’s ability to be an advocate for the underdog and a teacher walking alongside new advocates as they learned how to participate in the political process, was his hallmark. Jim honored the importance of regular people shaping and contributing to the world of health and freedom. We honor his contributions to health and to freedom and extend our condolences to his family and friends.

Democracy in an Era of Intrusive Technologies: Speech at the Lincoln Memorial

By Robert F. Kennedy, Jr.

Thank you for coming out today and braving the cold to stand up for democracy and for our children and for the United States Constitution.

I want to start with a salute to the doctors—the medical doctors, the healers, the courageous doctors of conscience—who stood up with me here today and who preceded me onto this podium. One of the most disconcerting, alarming features of this pandemic response has been the war against doctors of conscience.¹ We know their names: Pierre Kory,² Peter McCullough,³ Paul Marik,⁴ Paul Alexander,⁵ Ryan Cole, Tess Lawrie and so many others whose lives and livelihoods are being destroyed because they are trying to do their jobs and protect our children.

INFORMATION CHAOS

The other really disconcerting part of this pandemic response has been what I call the information chaos. The use—the orchestrated confusion and fear—by manipulating PCR tests⁶ and overamplifying them, by changing the metrics on how death certificates are calculated,⁷ the complete absence of any good information on case fatality rates or infection fatality rates, are all the things our public health agencies ought to be telling us so that we can individually—with our physicians—evaluate the risk and treatment and prophylactic protocols.

We weren't given any of that information. The information that we were given was badly, badly manipulated. And so now we're left saying, "What really happened?"

We weren't told, for example, that there was an age-stratified risk—that people who are over seventy-eight are at a thousand times more risk from Covid than those under seventy-eight, and children have a statistically zero risk.⁸ We were manipulated—and the press was manipulated—telling us all that every American faces the same threat as elderly people. And that meant that we could not have a rational response that protected the vulnerable while protecting our livelihoods, our culture, our political freedoms, our constitutional rights and our values, which are all ultimately public health issues.

ALL-CAUSE MORTALITY: A KEY DATA POINT

Now, [there is] one data point that—in all of this confusion, the fog of war that they created and orchestrated to sow confusion, to sow fear, to make us compliant—[there is] one data point that everybody should know, and that we have to regard as reliable because it's the data point that Pfizer gave in its submission to FDA to get its license. We know a lot about the Pfizer vaccine, more than about any of the other vaccines, because the Pfizer vaccine is the only vaccine that has a license.⁹ [Editors' note: On January 31, 2022, the Food and Drug Administration (FDA) gave full approval to a second Covid injection—Moderna's—approving it for individuals eighteen years of age and older.¹⁰]

Until [manufacturers] get that license, they do not have to produce their data. So, the only

data we really have that's reliable are the Pfizer data.¹¹ And by the way, there are a half a million pages of granular data, which Pfizer and FDA have refused to produce because they say it's too burdensome.¹² These are the data that they reviewed for one hundred eight days, but they say they can't show it to us for fifty-five years. So, they promised they were going to have—because they were rushing the process—they were going to have complete transparency. But what they meant is, they're going to have complete transparency in fifty-five years. But we want it now.

So, I'm just going to briefly tell you the one important thing that you should know from Pfizer's own data, which is the section of the submission to FDA where they talk about all-cause mortality.

And what they say in these data¹³ is very simple—you can go to Steve Kirsch's blog¹⁴ and see a really good explanation of it—but here's what it says: Over the six-month period of this study—they ended the study in six months, they told us it was going to go for five years, but they ended it in six months—they unblinded it and they gave the vaccine to the placebo group—so we will never know the long-term impacts of this vaccine.

But here's what they said—what happened in those six months.¹⁵ Of the twenty-two thousand people in the vaccine group, twenty-one of them died over the six-month period. Of the twenty-two thousand people in the placebo group, only seventeen died. What that means, if you extrapolate it and consider it reliable, which Pfizer says it is a reliable predictor of the performance of this vaccine—what that means and this conclusion is inescapable—is that if you take the vaccine, you have a 21 percent increased chance of dying over the next six months.

Now, what happened was, in the vaccine group, one person died of Covid of the twenty-two thousand. In the placebo group, two people died from Covid. That allowed Pfizer to tell the FDA and the American people that this vaccine is "100 percent effective." Because two is 100 percent greater than one. And that is a metric called relative risk. It is a deceit.

The important thing for people to understand is "absolute risk." And here's what abso-

[Pfizer and FDA] promised they were going to have complete transparency. But what they meant is, they're going to have complete transparency in fifty-five years.

If you take the vaccine, you're 500 percent more likely to die of a heart attack over the next six months than if you don't.

lute risk tells us. They have to give twenty-two thousand vaccines to protect one person from death from Covid. And if you're going to give twenty-two thousand vaccines to prevent one death, you better make sure the vaccine doesn't kill anybody. Because if it kills one person, you have canceled out all the benefits. But as we saw, twenty-one people died in the vaccine group and only seventeen in the placebo group. So, where did those excess deaths come from?

The answer to that question is heart attacks. In the vaccine group, there were five fatal heart attacks in the six-month period among those twenty-two thousand people. In the placebo group, there was one fatal heart attack among the twenty-two thousand people. So, what that means is if you take the vaccine, you're 500 percent more likely to die of a heart attack over the next six months than if you don't. And it also means that for every life they're saving by averting a Covid death, they are killing four excess people with heart attacks.

The vaccine is now in the marketplace. And what we've seen—the data points that we are seeing—confirms the fact that people are dying of heart attacks. As Steve Kirsch said, there's been a million injuries recorded in VAERS [Vaccine Adverse Event Reporting System] and over twenty thousand deaths,¹⁶ more deaths than for all other vaccines combined for the last thirty-six years.

A BROKEN SYSTEM

So, what is CDC's answer and Tony Fauci's answer to that? They say—and this is what the press, like a bunch of stenographers and automations, repeat again and again—their VAERS system doesn't work. Well—it's their system!

It's the only system they've got. We didn't make up the system. *They* made it up. And they've known for thirty-six years that it doesn't work.¹⁷ And that's their fallback position: "The system that we gave you to protect you from vaccine injury is so broken and so unreliable that it can't be used for any purpose."

In the 1986 Act, Congress ordered HHS [U.S. Department of Health and Human Services] and the industry to create a working surveillance system that would allow us to be able to calculate and estimate accurately vac-

cine injuries and death. So, for thirty-six years, they've been breaking the law.

And in 2010, they finally said, "Okay, we'll design a system that works," a surveillance system. They created a machine counting system that captures about 90 percent of vaccine injuries and deaths.

And the study—I'm going to quote you studies because I know this has never happened to you before, because you've been listening to CNN and HHS, so you're not used to hearing about scientific studies. But science actually is determined by doing studies, formally—before we appointed one man to be "the science."

So, HHS did a study in 2010 that they were going to roll out to all the HMOs. They studied one HMO, which is Harvard Pilgrim, in New England. They were Harvard scientists. They spent millions of dollars. They studied the system for three years, and had a pilot system that they designed that would capture all the vaccine injuries at the end. And at the end of the study—which is called the Lazarus study 2010¹⁸—they said, "We designed a system that works like a charm. It picked up most vaccine injuries, and guess what we found? When we compared it to VAERS, we found that VAERS is missing more than 99 percent—not 99 percent, *more than* 99 percent—of vaccine injuries."

What did CDC do? They looked at that study—which said that one out of every thirty-nine people who got vaccinated with any vaccine, on average, were suffering injury—but CDC was telling the American public it was "one in a million." They were lying.

And so, what was their solution? They shut down that study. They stopped the rollout [of the redesigned system]. They put it on a shelf, and they've been keeping it there for eleven years. And now, the system that they knew was broken eleven years ago—they knew it only counted 1 percent of vaccine injuries eleven years ago—now they're telling you, it is "overestimating" vaccine injuries! "Those twenty thousand people didn't really die of the vaccine. Those hundred thousand people weren't really injured."

Well, there are a lot of studies that show that their [surveillance] system doesn't work. I can say that there's not one scientific study

that shows that it overcounts vaccine injury. Every study shows it undercounts them by 50 percent, 80 percent, 90 percent, 99 percent. If somebody tells you from the press, “VAERS can’t be counted on because it overestimates vaccine injuries,” say “Show me this study.” They cannot. There is no study that does that.

TURNKEY TOTALITARIANISM

Now, I want to make my last point—the point that brought us all here. We are all from different political orientations, from different political parties, from different assumptions and backgrounds, from different races and creeds and colors. We are here for one reason. We love the United States of America.

When we say we love the United States, it means a lot of things. It means we love our history. We love our neighbors. We love our communities. We love our values. We love God. We love all kinds of versions of God. We love our purple mountain majesties—the landscapes that form the basis for this country.

But most of all, it means we love the United States Constitution. And we have witnessed over the past twenty months a coup d’état against democracy, and the demolition—the controlled demolition—of the United States Constitution and the Bill of Rights.

Starting with the censorship—James Madison, John Adams, Thomas Jefferson all said the same thing: “We put freedom of speech in the First Amendment because all of the other rights that we were trying to protect relied on that right.”

If you give government the license to silence its critics, you have given them the capacity to commit any atrocity they want and to obliterate all the amendments and rights of the Constitution.

As soon as they got rid of freedom of speech, they went after freedom of religion. They closed every church in this country for a year with no regulatory process, no public hearing, no demonstration of science, no scientific citation to show that it was going to do any good. They kept the liquor stores open as “essential” businesses. I remind you that liquor stores are not mentioned in the United States Constitution, and churches are.

They took away our property rights. They closed a million businesses with no due process—no just compensation. They took away jury trials that the Seventh Amendment says, “No American shall be deprived of a right to a trial before a jury of his peers in cases or controversies that exceed twenty dollars in value.” There is nothing else. That’s all it says. There’s no pandemic exception. There’s no war exception. There’s no—any—exception.

And yet they have passed—I won’t even say a rule because there was no rulemaking—just a policy that you cannot sue any company, any of these large multinational corporations that claimed to be involved in countermeasures, no matter how reckless their behavior, no matter how negligent their conduct, no matter how grievous your injury, you cannot sue that company. They have a license.

These are criminal companies, by the way. These are serial felons. The four companies that make all of our U.S. vaccines for the children’s program—Pfizer, Glaxo, Sanofi and Merck—have paid thirty-five billion dollars in criminal penalties for hundreds of violations and damages in the last ten years.¹⁹ These are the companies that gave us the opioid crisis that kills. . . more American kids every year than the Vietnam war killed in twenty years. [Editors’ note: The U.S. government estimates the Vietnam War resulted in roughly fifty-eight thousand military casualties. In 2020, there were an estimated sixty-seven thousand opioid-related deaths (fifty-six thousand due to synthetic opioids), up from roughly fifty thousand opioid-related deaths in 2019.] These are not good citizens. These are criminal enterprises.

And now you’re taking away any economic or legal incentive for them to behave? What do you think they’re going to do? You think they found Jesus suddenly? And they’re going to take care of us and our children? That they’re suddenly concerned with public health?

No. They took away due process rulemaking. They’ve taken away our right to be free of warrants, of searches and seizures, with this very intrusive track and trace surveillance, et cetera. Oh, we are watching something now that I never believed that I would see in my lifetime. And I’ve read George Orwell and Aldous

If you give government the license to silence its critics, you have given them the capacity to commit any atrocity they want and to obliterate all the amendments and rights of the Constitution.

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Every time
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Huxley and dystopian science-fiction novels warning that one day the United States would be overtaken by fascism.

Fascism, incidentally, is defined—Mussolini defined it—as a merger of state and corporate power. As orchestrated by Tony Fauci, what we’re seeing today—what we’re seeing today is what I call “turnkey totalitarianism.” They are putting in place all of these technological mechanisms for control we’ve never seen before. It’s been the ambition of every totalitarian state from the beginning of mankind to control every aspect of behavior, of conduct, of thought—and to obliterate dissent. None of them have been able to do it. They didn’t have the technological capacity.

Even in Hitler’s Germany, you could cross the Alps into Switzerland. You could hide in the attic like Anne Frank did. In 1962, I visited East Germany with my father, and met people who had climbed the wall and escaped. So, it was possible. Many died but it was possible.

Today, the mechanisms are being put in place that will make it so none of us can run, and none of us can hide. Within five years, we’re going to see four hundred fifteen thousand low-orbit satellites. Bill Gates says his sixty-five thousand satellites alone will be able to look at every square inch of the planet, twenty-four hours a day. They’re putting in 5G to harvest our data and control our behavior. Digital currency that will allow them to punish us from a distance and cut off our food supply. Vaccine passports.²⁰

You have a series of rights. As flawed as our government is, you can still go out and go to a bar. You can go to a sporting event. You can get on a bus or an airplane, and you can travel. You have certain freedoms. You can get educated, et cetera. The minute they hand you that vaccine passport, every right that you have is transformed into a privilege contingent upon your obedience to arbitrary government dictates. It will make you a slave.

And what do we do about this? What do we do? We resist. I’m going to tell you three rules that you will all need to know and memorize.

Number one: Every power the government takes from us, it will never relinquish voluntarily. They tell you, “We just want you to lock down for two weeks, just to flatten the curve

in the hospitals.” But then twenty months later, they still have us locked down. And even when they give up—when they close the lockdowns and let us go back to normal, they are not relinquishing the power to do it to you again and again and again. They now have power, and they will never let it go until we make them let it go.

Number two: Every power they take from us, they will ultimately abuse to the maximum extent possible.

Number three: Nobody in the history of the planet has ever complained their way out of totalitarian control. Every coup, every capitulation is a signal to the oppressors to impose new forms of torment or torture or compliance or obedience. Every time you comply, you get weaker.

The hill that you’re going to die on is the hill that you are on right now. And they’re coming for our children.

And every time, they push you back when you say yes—because you think, “If I just do this, we can all return to normal”—every time, they taunt you and fool you. Bullies cannot be appeased. It just encourages them to new forms of torture and torment. Every time you say yes, you’re getting pushed back to a weaker position. That’s why we need to resist today.

You—all of you in the crowd—I thank you, I love you. You came out on this cold, cold day to do your duty for the United States of America. Let’s go and fight for freedom, and let’s build back for our children the America that our parents fought and died for. Thank you very much. ☺☺

Robert F. Kennedy, Jr., is chairman of Children’s Health Defense, whose mission is to end the epidemic of children’s chronic health conditions by working aggressively to eliminate harmful exposures, hold those responsible accountable and establish safeguards so this never happens again. On Jan. 23, 2022, Mr. Kennedy addressed more than thirty thousand people who attended the “Defeat the Mandates” rally in Washington, DC, calling for an end to vaccine mandates, government overreach and censorship, and to fortify democracy against intrusive technologies. Republished with permission.

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A Respiratory Therapist Speaks Out about Covid and Mechanical Ventilation

By Betsy Thomason, BA, RRT

In 2019, the world discovered respiratory therapy, the profession that sprang out of World War II with the rise of jets flying into thin air at extremely high altitudes and studying the impact on the human body. As a registered respiratory therapist (RRT), I belonged (until my retirement) to that profession, which has grown and continues to change.

In 2020, during the height of the coronavirus, a new Covid hospital in the New Jersey Meadowlands (just west of New York City) begged me to come out of retirement, offering seventy dollars an hour—about twice the average hourly wage. I interpreted this request to mean that modern medicine was finally acknowledging respiratory therapists as the experts who know how mechanical ventilators interface with human beings. The fact is that nurses, as well as the pulmonologists and critical care physicians who prescribe this intervention, rely on the knowledge and experience that respiratory therapists bring to these critical situations.

Rather than return to clinical work, however, I now feel the best use of my twenty-five years of experience with ventilators in hospitals and home care is to share my knowledge and point of view with the public. Since many people have no understanding of the “how, when and why” of mechanical ventilation nor much awareness of associated ethical issues, the purpose of this article is to explain ventilator basics, especially as related to people with severe Covid. This may help you as you navigate the medical world on behalf of a loved one, or even yourself.

PURPOSE OF MECHANICAL VENTILATION

Mechanical ventilation is designed to do the breathing work for people with extremely disabled lungs. Usually, this is because of damaged lung tissue—as in chronic obstructive pulmonary disease (COPD)—or is due to extreme weakness of the surrounding muscles, as in neuromuscular conditions such as muscular dystrophy, post-polio syndrome or amyotrophic lateral sclerosis (ALS).

The ventilator pushes air into the lungs and then pauses for expiration (one breath); it then pushes another bolus of air into the lungs, and does this over and over again, either around the clock (if necessary) or for sleep and intermittently during the day.

VENTILATORS AND COVID

The lungs of critically ill Covid patients are connected to the ventilator in one of three ways—either with a tube inserted up the nose, or tube inserted into the mouth (these two are called “intubated”) or via a surgically created hole in the neck (this is called “trached”) below the voice box. All three procedures eliminate the possibility of speech and include sedation of one sort or another, especially when one is first intubated or trached.

It is important to know that there is a critical difference between the “usual” use of mechanical ventilation and Covid-related mechanical ventilation. The major difference is that the blood of many critically ill Covid patients lacks hemoglobin—iron to which oxygen attaches in the blood. Thus, while the

ventilator continues to push in the bolus of air, creating the rise and fall of the patient’s chest, the blood is unable to accept the gift of oxygen. This may account for the low success rate of mechanical ventilation for people with Covid.

Preliminary research, published in May 2020, suggested this as an underlying reason for the failure of mechanical ventilation in Covid patients: “We speculated that in COVID-19, beyond the classic pulmonary immune-inflammation view [pneumonia], the occurrence of an oxygen-deprived blood disease, with iron metabolism dysregulation, should be taken in consideration.”¹

Here’s my interpretation: severe Covid is basically pneumonia, accompanied, first, by a lack of hemoglobin (the oxygen-carrying particle of the blood) and second, by dysfunction of iron metabolism in the tissues. In the first case, the lack of hemoglobin means the blood is unable to transport oxygen—in other words, the blood cannot support life. The second feature (dysfunction of iron metabolism in the tissues) may cause blood clots, resulting in pulmonary embolism (PE) and/or deep vein thrombosis (DVT)—both potentially deadly.

Simply stated, in Covid, there is not enough iron in the blood and too much iron in the tissue, but scientists can’t say why.

THE ESSENTIAL QUESTION

Here’s the essential question: Can ventilators truly support the life of critically ill Covid patients?

Let’s take a look at what the experts reported in one medical journal in January 2021. The *American Journal of Respiratory Critical Care Medicine* (AJRCCM), one of several journals published by the American Thoracic Society and publicly available online, reported a meta-analysis of sixty-nine studies that included outcomes for almost sixty thousand adult Covid patients following invasive mechanical ventilation. The bottom line, simply stated: The fatality rate for folks age forty or younger was 48 percent, and the fatality rate for patients over age eighty was 84 percent.²

Initially, this study’s findings suggested to me that invasive mechanical ventilation is pointless in the vast majority of Covid cases.

Simply stated, in Covid, there is not enough iron in the blood and too much iron in the tissue, but scientists can’t say why.

The science of iron in the blood and body tissues indicates that mechanical ventilation is not appropriate.

However, it is also important to remember that while we, the public, try to understand these critical medical issues, the medical community may be dealing with multiple issues and conflicting data, and definitions that can lead to misconstrued conclusions. In a July 2020 editorial, AJRCCM editor Hannah Wunsch, MD, argued that the medical community must learn how to report complex information with improved clarity and intention, stating “we need to . . . be vigilant in presentation of data to minimize confusion in interpretation.”³

So, what is the answer to the question about the use of mechanical ventilation with Covid patients? The science of iron in the blood and body tissues indicates that mechanical ventilation is not appropriate. The data from the AJRCCM meta-analysis lead to the same conclusion.

Now, the medical community is reaching for another high-ticket item—extracorporeal membrane oxygenation (ECMO) machines. The machine removes blood from the body via a tube placed in the neck, and then adds oxygen to the blood and pushes the blood back into the body. ECMO machines have been part of open-heart surgery for decades. However, while the demand for ECMO is high in the new Covid marketplace, the machines are in short supply.

MORE QUESTIONS

Here are some medical ethics questions: Who decides who receives high-priced equipment and associated supplies (and the trained personnel to go with them)? Who even wants this equipment? Are medical devices always used in the patient’s best interest? Are we pushing the inevitable—death—into an unsustainable future?

Your immune system is what keeps you



healthy. There are thousands of microbes in our world. Some we can’t live without, while others may have the potential to cause great harm. How can you balance this and prevent disease?

From my vantage point as a health professional and a healthy and active septuagenarian,

it is my immune system that allows me to live independently, disease-free, and to enjoy life. Thus, my daily task is to care for my immune system. I focus on my outbreath for energy as well as for management of pain and stress, and I include daily doses of nutritious food, water, exercise, restful sleep and joy—lots of joy!

What is your approach to the Covid conundrum?

Betsy Thomason, a Vermont resident, began writing in the 1970s as a stringer for a community newspaper in northern New Jersey. Her articles have also appeared in specialty magazines for small business, respiratory therapists and the outdoors. She is the author of Just Breathe Out—Using Your Breath to Create a New, Healthier You (North Loop Books, 2016). For more information, visit her website at outbreathinstitute.com or contact her at bzthomason@gmail.com.

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The Body Is Holy. . . and So Is the Earth

By Hilda Labrada Gore

I ended up in the hospital while traveling through Ecuador in June 2021. I wasn't sick, thank goodness. Visiting the San Luis de Otavalo Hospital was on the itinerary that I had developed with Andrea Lucio-Mieles of Ecuador's Carishina Travel, a company that believes in showing travelers the world "through its diverse array of cultures and traditions."

Lucio-Mieles had told me of a marvelous *curandera* (healer) and *partera* (midwife) who worked there—Mamá Rosita Colta, a leader of her Kichwa community. The hospital hired her because they were looking to serve the community better. Many folks in the neighborhood are Kichwa and were unlikely to go to the hospital for prenatal care or to give birth.

Mamá Rosita even played the harmonica and danced, showing us how she sets the tone for a mother in labor. The music lets the baby know that it is welcome and coming to a happy place.

In an approach similar to that of the Weston A. Price Foundation, the hospital wants to offer the best of modern science along with traditional wisdom. They did not want to impose their modern “scientific methods” on women in labor and delivery but wanted alternatives to be available for high-risk situations.

OTAVALO: THE BEST OF BOTH WORLDS

When Mamá Rosita came on board at the hospital, she became an important bridge to the community, eliminating a number of cultural barriers between the hospital and her people.

First, she spoke the indigenous language, immediately making community members feel more comfortable. Second, she embraced and supported Kichwa traditions—especially those related to giving birth. Many Kichwa women give birth standing up, squatting or sitting. Mamá Rosita was in favor of whatever best served the mother-to-be. Third, she wore traditional clothing and made sure the birthing center looked more like a home than a sterile hospital room with white walls. (As a matter of fact, for the Kichwas, the color white symbolizes poison or death, so having the space look more like home, with wood walls and other homelike features, was important.)

Last but not least, Mamá Rosita could accommodate birth mothers’ need to honor the mother and Kichwa traditions simultaneously. For example, the Kichwa consider having a doctor physically assess cervical dilation as invasive

and inappropriate. Mamá Rosita, on the other hand, can read the signs of the body—particularly the sweat on the upper lip—to determine the progress of labor.

As I toured the hospital with my small team from Carishina Travel, Mamá Rosita showed us the birthing center and demonstrated the variety of birthing positions. She even played the harmonica and danced, showing us how she sets the tone for a mother in labor. The music, she explained, lets the baby know that it is welcome and coming to a happy place.

Mamá Rosita also allowed us to watch a prenatal visit with a pregnant mother who was due in about a month. She rubbed ointments on the woman’s belly and rocked her gently side to side using a cloth as a kind of hammock, as she murmured words of welcome to the baby and reassurance to the young mom.

When I interviewed her moments later, she gave me insights on her understanding of the body and birth. *Nuestro cuerpo es sagrado*, she said repeatedly. “Our body is holy.” She marveled at its design and beauty, along with its resilience and ability to adapt.

INTI RAYMI: CELEBRATING A FESTIVAL OF GRATITUDE

I purposefully chose to travel to Ecuador during the month of June, so that I could witness Inti Raymi, the Kichwa people’s “sun festival” celebrated around the summer solstice.

Mamá Rosita’s words about the holiness of



LEFT: Mamá Rosita (left).

RIGHT: Young and old at the Inti Raymi Festival.



the body echoed in my mind when she invited me to participate in the village's annual ritual *baño* (bath), part of the Inti Raymi Festival celebration. The traditional cleanse is a time to receive the healing energy of the waters and release any bad energy in or on the body.

After Mamá Rosita invited community members (and me) into the waters, we flagellated our bodies with bundles of herbs, and then she poured water over us while speaking Kichwa blessings. A woman followed her with burning herbs, letting the smoke surround us. We shivered in the cool night air, from joy at the ceremony and the impromptu cold therapy. Mamá Rosita's profound respect for the body and for its place in the broader community and the natural world permeated every action.

I had read that the Inti Raymi Festival was a celebration of the sun and the sun god, but I learned that it was much more than that—and what I experienced was much more profound and nuanced. The festival was a multi-day (if not multi-month) celebration of gratitude for the sun but also for the earth and to God for all that had been provided over the course of the previous months.

The Ecuadorians call the earth *Pacha Mama* or Mother Earth. This name shows how much they cherish and respect her. Apauki Flores, a community leader and cultural guide in Santa Bárbara, told us that just as a mother

is exhausted after giving birth, the earth, too, is weary after providing its harvest. The Inti Raymi Festival is intent on reenergizing and reinvigorating her.

Participants join in a special dance that involves a lot of stomping to give *Pacha Mama* what she needs. This joyous energy exchange—with costumes, whistling, singing and flutes made of bamboo along with other instruments—takes the celebration to the next level.

The hats that the dancers wore were eclectic, lending an almost carnival-like air. I spotted mariachi hats—the traditional sombreros from Mexico—as well as pointed hats resembling those of witches, police helmets and fantastically shaped stovepipe-like hats. Many hats had religious or governmental symbols drawn on them; participants told me the intent of the drawings was to mock the powers-that-be and demonstrate that their power cannot extinguish the power of the indigenous people.

The men wore heavy, military-style boots to do the stomping, reinvigorating the earth with each step. I was told that the people used to dance with bare feet but in recent years have switched to the boots to give even greater energy and heft to the dance.

The men and women dance on separate days. To my surprise, one afternoon a captain of the Santa Bárbara community invited me to join in the dance. I felt honored, especially because it seemed to be a day for the men to dance, not the women. I gamely joined in, trying my best to imitate the movement of the Kichwa people. I did not exactly succeed. Let's just say that my dancing style was slightly reminiscent of a bow-legged cowgirl who has just dismounted her horse and is trying to wake up tingly legs that have fallen asleep.

MAINTAINING CULINARY TRADITIONS

Another aspect of the Inti Raymi celebration was the *Pampa Mesa*: a community table replete with the best that the families had to offer. With a tablecloth of enormous proportions extended in the village square, it

TRADITIONAL FOODS AND CHANGES OVER TIME

Among the fresh fruit and seafood found in abundance in Ecuador, there are typical dishes still served on many tables throughout the country. Here are a few of the dishes I had the pleasure of trying myself:

Locro de papa: A creamy potato soup, made with milk or cheese and onion, garlic and cumin

Yaguarlocro: A tripe soup with a lamb broth base, served with coagulated lamb blood, avocado and red onion

Encebollado: Albacore fish served in a tomato and onion sauce

Llapingacho: A sausage dish served with egg, a potato pancake and a side of peanut sauce

Chicha: A naturally fermented corn drink

Gütig: Naturally carbonated spring water from Machachi

While heartened to see (and taste) many of these traditional dishes throughout my adventures in Ecuador, I was disappointed to find that many are prepared nowadays using vegetable oils, instead of traditional lard or natural meat fats. In a supermarket, I came across a brand of shortening called *Tres Chanchitos* (Three Little Pigs) that originally merited the name because it was a pork lard product; when the company changed the product to vegetable shortening, it kept the name. Now, unfortunately, it is likely to appeal to no one. A vegetarian is likely to steer clear because of the name, while those seeking real lard will be seriously disappointed once they inspect the ingredient label.

As I have found in other countries, there is also a push—particularly in the cities—toward veganism. In the rural areas, in contrast, people still regularly enjoy raw milk, real meat and fresh eggs.

was not unlike a community-wide thanksgiving. Food shared included *palta* (avocado), eggs, chicken, *cuy* (guinea pig), potatoes and quinoa. Unfortunately, beer and sodas were poured liberally, though I heard that traditionally, this meal featured *chicha*, an indigenous fermented corn drink.

As the world “becomes smaller” and people become exposed to Western foods and begin to incorporate them into the diet, Ecuador’s culinary traditions are slowly eroding. However, I encountered two individuals who are doing their best to reverse the trend.

Javier Carrera is one of them. Javier and his team helped start (“seed,” if you will) a group called *Red de Guardianes de Semillas* (Network of Seed Guardians), which is committed to preserving heritage seeds in Ecuador, encouraging regenerative agriculture and more (see redsemillas.org). It is a network of groups and individuals, including indigenous groups, that together are collaborating for a brighter tomorrow. The network offers courses and has a podcast, but members also visit villages where they educate and equip people to plant the ancient heritage seeds and enjoy the harvest that results. Preserving traditional crops is one step in the right direction toward helping the peoples of Ecuador return to a more diverse, nutrient-dense diet that is good for the health of people and the soil.

The second individual, a chef named Juan Sebastián Perez, is reclaiming not only foods but traditional preparation techniques and putting them on display at a restaurant called *Quitu Identidad Culinaria*. By lifting up the preparation and serving of traditional dishes, Perez is calling Ecuadoran people back to their pre-Spanish, pre-Inca roots.

Despite the emphasis in mainstream culture on “Westernized” (“modern”) foods, including vegan cheeses and such, I am heartened by the efforts of these individuals and their teams to revisit and reinstate their country’s wise dietary traditions.

COTOPAXI: COMMUNING WITH NATURE

Among the many highlights of the trip was a visit to Cotopaxi, one of the highest active volcanoes in the world. Situated in the Andes, it

has an elevation of over nineteen thousand feet.

We were not planning on “summitting,” but I still had a healthy respect for this mountain volcano. We were told that the wind could be brutal, the cold air biting and the altitude breathtaking, literally. To make matters more challenging, my suitcase got misplaced, so I didn’t have access to any of the warm clothing I had packed.

Thankfully, I was able to borrow adequate gear to stay warm, as we prepared for our hours-long hike to the refuge located at just over fifteen thousand feet.

With our guide Nancy Masapanta, we rode in a jeep to our starting point near the base of the volcano. It was there that Nancy invited us to do something unusual. She said that she didn’t share this ritual with every visitor but that she could sense, from our discussion in the vehicle, that we were open to ancient mystical traditions. She invited us, at the volcano’s base, to show it our respect by putting a little of its dirt under our tongue, so that it might recognize us, and so that we, in turn, could acknowledge the volcano. It was a moment that bonded us, in a kind of informal communion.

And I’m not saying that this communion was related to what happened next, but the volcano showed itself in spectacular ways throughout our visit. Ordinarily, Cotopaxi is only visible at certain times of year and most often is shrouded by clouds. But before we ascended, Cotopaxi’s peak appeared between the clouds, and as we descended, it showed itself once again. Nancy told us how unusual that was. In essence, the volcano greeted us as we



Delicious squash soup.

COVID IN ECUADOR

I observed that there was more fear (and more restrictions) in the cities than in the rural areas. When staying in Santa Bárbara, a community leader’s wife told us that many community members became sick at one time, “catching COVID” during the Inti Raymi Festival in 2020! In response, she and a group of women in the community gathered twenty-four medicinal plants and herbs and took them from home to home. No one was hospitalized, and no one died.

Mamá Rosita told me that she herself had become sick with COVID. She was in the hospital, with an IV in her arm, when she thought to herself: “Do I want to die here or at home?” She took the IV out and went home, over the protests of the medical staff who considered her condition to be quite serious. She told me she nourished herself by going to the woods and listening to the birds, and also ate a lot of sambo, a kind of squash soup. She recovered fully.

arrived and bid us adieu as we departed. I felt a profound gratitude and a sincere appreciation for it, and for the marvelous Ecuadorian people who were teaching me to receive all that nature has to offer, with gratitude and humility.

GALÁPAGOS: UNPARALLELED AND PROTECTED BEAUTY

Fully 40 percent of the flora and fauna in the Galápagos islands cannot be seen anywhere else in the world. We visited only a handful of the twenty-one islands—Isabella, Fernandina, Santa Cruz, Mosquerero and Baltra—but, oh, what marvels we saw: sea turtles that looked as ancient as time itself; sea lions willing to interact with us playfully; marine iguanas resembling creatures straight out of a science-fiction movie; Sally Lightfoot crabs looking like they were hand-painted by Monet; pufferfish; and even sharks. Nature’s astonishing and mesmerizing glory was on full display in this place.

On one island, I was poised to jump into one of the coves when the Galápagos Park guide, Roberto Ojeda, stopped me. Tourists visiting the islands used to do that, but it displaced the sea lions. Humans crowded them out, disturbing their rhythms, and they left. Because of what happened on this island, regulations have been put into place, limiting what tourists can do, in

an effort to respect those that were there first. I noted this thread throughout the islands, with signs warning against approaching the giant tortoise, cautions to avoid touching the sea lion cubs (to prevent their parents from rejecting them because of the “human smell”) and so on. The call to protect the natural habitat of the varied species was a reminder both of their fragility and of what they most needed to thrive.

What if we did the same for ourselves? What if we created a habitat that helped us thrive? I believe it would begin with a healthy respect for the holiness of the body and the world it inhabits. This was one of the greatest lessons I gleaned from Ecuador.

Mamá Rosita lifted up the holiness and innate health of the body itself, pointing to the healing energy of natural waters. The community of Santa Bárbara showed its gratitude to the earth throughout its Inti Raymi celebration. Nancy the guide taught me to approach the volcano with respect and awe. And the Galápagos experience reminded me that a reverential approach to our surroundings is of benefit to every living species, including the human race. ☯☯

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TRAVELING DURING COVID

Most (if not all) airlines currently require masks in order to fly. As it happens, I started wearing a mask for flights long before all this Covid nonsense started—but not out of obligation or worry about contagion. Instead, I wear a coconut carbon filter mask designed to filter out jet fuel bleed and other cabin air toxins (available at icanbreathe.com). I also wear a less-EMF hoodie. I used to feel “off” after flying—often deplaning with a slight headache or mild nausea. Now, when I disembark, I feel “100 percent.”

To enter Ecuador and, later, the Galápagos, COVID tests were required. Yet another test was required to reenter the U.S. I took all the tests on my own terms. In other words, I refused to have a cotton swab shoved up my nose, insisting (both at the testing site in D.C. as well as in Ecuador) that I had sensitivities and preferred to spit or exhale through my nose into the spoon. In each case, after some insistence on my part, I was allowed to do it my way.

At one testing center, the technician protested that the results might be inconclusive. “That’s on me,” I replied. “If necessary, I’ll do it again and pay again.” Fortunately, I received a negative test result on each occasion.

Once in Ecuador, we were asked to wear masks in some public places, such as in historic Quito and on the small ship in the Galápagos. My group often did not comply. When under duress, I wore a rhinestone-beaded pseudo-mask. Most of the time, however, I was free-faced, and there was no real enforcement of mask wearing.

From time to time—at national parks or at the airport—there were also “disinfectant” stations that resembled airport metal detectors. Individuals were supposed to walk through and get sprayed with some unknown concoction of chemicals or bleach. I simply walked around the devices each time and no one ever asked me to return and walk back through. At the entrance to the MegaMaxi store in Quito, a greeter cheerily asked me, “Would you like to be disinfected?” while gesturing to the station. When I replied “No,” he welcomed me just the same and invited me to walk into the store without the “hosing down.” Overall, these small inconveniences paled in comparison to the magnificence of the experience.

Nature’s astonishing and mesmerizing glory was on full display in this place.

Reading Between the Lines

By Merinda Teller

Exercising Discernment and Reclaiming Your Mind in an Era of “Global Hyper-Propaganda”

Understanding how propaganda plays out at both the “mass” and individual levels is an important step toward thinking more clearly about the events of 2020 and beyond.

As historians acknowledge, propaganda—and other systematic efforts to influence public opinion—are nothing new. The Roman empire, for example, was famously skilled in the use of opinion-molding techniques, finding many ways to juxtapose its portrayal of Rome as the representative of “peace, good government, and the rule of law” against a caricature of other societies as “barbaric, lawless and dangerous”—with the implication being that “such people could not but benefit from Roman rule.”¹

Classical Romans and Greeks considered the arts of grammar, dialectic and rhetoric the three pillars of critical thought and “free thinking minds”—with the idea being that a person “must master the language of a subject in order to think, and . . . be able to think in order to persuade.”² To strengthen the third pillar and make their arguments more riveting and persuasive, Greek rhetoricians analyzed successful speeches by “lawyers, demagogues, and politicians”—identifying tactics such as the use of “sonorous and solemn language, carefully gauged humour, artful congeniality, appropriate mixtures of logical and illogical argument, and flattery.”³ It is no coincidence that the Merriam-Webster dictionary lists “spellbinder” as a synonym of rhetorician.

Two years into the planet-wide coup d'état⁴ ushered in by a putative coronavirus, we have entered a new era of “global hyper-propaganda,”⁵ facilitated by smartphones and other invasive tools of individual monitoring and control.⁶ In fact, New York University propaganda expert Mark Crispin Miller suggests that we have been witnessing, since 2020, a carefully planned “propaganda masterpiece”—a “global propaganda spectacle of unprecedented scale and sophistication” so effective that it “prevents people from even looking for the truth.”⁵

With a large swath of the population continuing to accept tyrannical policies and self-

destructive Covid injections, it is evident that “constant, unremitting, one-sided” messaging and the skillful engineering of fear—successful propaganda’s hallmarks—have been all too effective. Miller says, “This particular instance of fear-mongering is the most persuasive, the most compelling, the most devastating kind of fear-mongering that’s ever. . . been used in the history of propaganda—and that’s really saying something.”

Journalist Caitlin Johnstone, a critic and analyst of “the way power structures use mass-scale narrative manipulation to advance their agendas,” argues that it’s essential to recognize that the powerful “lie to us about everything” and to “snap out of the trance,” though she admits that doing so takes time and effort and requires “a deep, sustained curiosity about what’s really going on underneath all the muddled mental chatter.”⁷ The remainder of this article discusses how propaganda has evolved and thrived in modern times; understanding how it plays out at both the “mass” and individual levels is an important step toward thinking more clearly about the events of 2020 and beyond—and taking stock of what we are up against.

TWENTIETH-CENTURY PIONEERS AND CRITICS

As sophisticated as the Greek and Roman techniques of persuasion may have been in their day, there is little doubt that twentieth-century communication technologies introduced new and even more powerful opportunities to engineer consent and shape “the organized habits and opinions of the masses.”⁸ A legendary figure in this regard was “Father of Spin” Edward Bernays (1891–1995)—one of the century’s “foremost salesmen of ideas”⁹—whose post-WWI books helped propel propaganda to new heights. As the twice-over nephew of Sigmund Freud (and the great-uncle of Netflix co-founder

Marc Bernays Randolph), Bernays was acutely aware of the influence that could accrue from tapping into the public's unconscious, famously stating, "Those who manipulate this unseen mechanism of society constitute an invisible government which is the true ruling power of our country."

In 1927, communication theorist Harold Lasswell published an influential book *Propaganda Technique in the World War*.¹⁰ An interesting historical footnote for our times is the name given to Lasswell's mass persuasion model—the "hypodermic needle theory" or "hypodermic-syringe model." The model (sometimes also referred to as the "magic bullet theory") was anchored in Lasswell's conviction that human behavior could be manipulated "in a controlled and conditioned way" by "injecting" the public with "direct, immediate and powerful" mass media messages (giving new meaning to the phrase "getting under someone's skin").¹¹

Nowadays, communication theorists debate whether the "hypodermic effect" is obsolete, with some asserting that modern-day audiences are too "literate" to take media messages at face value.¹² Others argue, however, that as information and communication technologies—and especially social media—have made audiences "actively passive" ("very active in responding to a false message but passive in making choices on whether the message [is] true or false"), the model not only "still holds significance" but is, in fact, resurgent.^{11,13}

Along with its enthusiastic proponents, propaganda has always had detractors. World War II historians noted, for example, the influence of Bernays' ideas on the infamous Joseph Goebbels, who had a highly successful twelve-year reign (1933–1945) as the Third Reich's minister of propaganda. After the war, it did not take long for social critics to draw attention to the parallels between Nazi Germany's "propaganda industry" and America's "culture industry."¹²

In his 1957 muckraking book *The Hidden Persuaders*, author Vance Packard wrote that some of his propaganda-creating informants "were so frank and detailed about their. . . operations that. . . I at times wondered if they had become insensitive to some of the anti-humanistic implications of what they were doing."¹⁴ More than half a century later, a writer reflecting on Bernays' legacy suggested that the "brazen" techniques of manipulation launched by Bernays lacked a moral compass and tended to encourage "a patronizing and ultimately cynical view of human nature and human possibilities, one as likely to destroy lives as to build them up."⁹

TOOLS AND AGENTS OF PROPAGANDA

An extensive entry in the *Encyclopedia Britannica* notes that propaganda's agents generally go by socially acceptable names: public relations professional (the term coined by Bernays), researcher, analytic specialist, information specialist, media specialist, opinion manager,

An interesting historical footnote for our times is the name given to Lasswell's mass persuasion model—the "hypodermic needle theory" or "hypodermic-syringe model."

TOTALITARIANISM AND CULTS: TWO SIDES OF THE SAME COIN?

In October 2020, half a year into the so-called "pandemic," playwright and satirist CJ Hopkins published a brilliant essay titled "The Covidian Cult," highlighting "mass conformity to a psychotic official narrative" as a hallmark of totalitarianism.⁴¹ Hopkins' website, appropriately enough, is called "Consent Factory, Inc."

Tracing the parallels between cult leaders and totalitarian leaders, Hopkins pointed out that both use the same techniques—techniques focused on disorienting and controlling the listener's mind. Somewhat counterintuitively, the fact that the official narrative is frequently "internally inconsistent" and "illogical" strengthens (rather than weakens) leaders' power, forcing "adherents to attempt to reconcile [the narrative's] inconsistency and irrationality, and in many cases utter absurdity, in order to remain in good standing with the cult." The result, says Hopkins, is a sort of mental short-circuiting; eventually, people "give up even trying to think rationally, and just mindlessly parrot whatever nonsensical gibberish the cult leader fills their heads with."

One of the disturbing features of the Covid-initiated push for global totalitarianism, according to Hopkins, is that "instead of the cult existing as an island within the dominant culture, *the cult has become the dominant culture*," with those who refuse to join becoming "isolated islands within it" [*italics in original*]. Fortunately, with truckers now forcing government leaders into hiding, satirists having a field day with beyond-absurd headlines⁴² and more and more people spotting the holes in the narrative, those "isolated islands" seem to be multiplying.

With the help of artificial intelligence (AI) and software, smartphones and other “smart” devices can also tailor propaganda down to the individual level.

lobbyist, psychopolitical analyst and so on.³ Back in the 1950s, Packard had a less soothing expression for these individuals: “depth manipulators.” “[I]n their operations beneath the surface of conscious life,” Packard worried, these manipulators were “starting to acquire a power of persuasion that is becoming a matter of justifiable public scrutiny and concern.”¹⁴

According to the encyclopedia, these professional hackers of the subconscious rely on a wide variety of signs and symbols to communicate their messages. Signs may include sounds (for example, words or music), gestures, postures, structures (for example, monuments), items of clothing (such as uniforms) or visual signs. The swastika or hammer and sickle represent two examples of historically potent symbols.

Media—whether print, electronic or audiovisual—are the primary channels that modern propagandists use to communicate the signs and symbols they select to manipulate the minds of their target audiences (whom they call “reactors”). Among the various types of media, *Encyclopedia Britannica* emphasizes that the Internet and television are particularly effective tools of persuasion—especially for large-scale propaganda efforts—providing a “mutually reinforcing” capability to “convey a great many

types of signs simultaneously.” With the help of artificial intelligence (AI) and software, smartphones and other “smart” devices can also tailor propaganda down to the individual level.

CONTROLLED OPPOSITION

Persuasive public speakers—“front men,” “Trojan horses” or “dummy leaders”—also make effective propagandists, particularly if they are individuals who the target audience is “likely to listen to or appreciate”³ or are “someone everyone can admire.”¹⁵ These agents of “controlled opposition”—a form of counter-intelligence propaganda—“pretend to oppose the establishment while covertly serving it,”¹⁶ working to “undermine and garble the message of truth and freedom.”¹⁵

Capturing the public’s imagination—often through adept use of the “sonorous language,” careful humor and “artful congeniality” so admired by ancient Greece’s spellbinders—controlled opposition figures skillfully intersperse propaganda with bits of truth, but “only aspects of the truth that the establishment tolerates,” whereas “truths that the establishment wants the masses to ignore or remain ignorant of are omitted or spoken of as half-truths.”¹⁷ As one website puts it, “Controlled opposition gives us

TIMELESS RULES OF PROPAGANDA

A couple of years after the appearance of Edward Bernays’ book *Crystallizing Public Opinion* (1923), *Science* magazine published a few paragraphs about “propaganda based on psychology,”²⁴³ noting that successful propaganda makes use of “simple psychological principles” and “definite rules, well known to the propagandists.” Summarizing those “rules,” the anonymous *Science* author writing in 1925 advised the following [Note: bulleted format added]:

- “If you have an idea to put over, keep presenting it incessantly.
- Keep talking or printing persistently.
- Avoid argument generally.
- Don’t admit that there is another side to the question and avoid arousing any associated ideas except those which are favorable.
- Reserve argument for the small class of people who depend on logical processes, or as a means of attracting attention of those with whom you are not arguing.
- Connect your idea in every possible way with the known desires of your audience.
- Remember that desires are more often the basis of the acceptance of ideas than logic.
- Make your statements clear enough to be understood by your audience.
- Use direct statement only when you are sure that a basis for acceptance has already been established; otherwise use indirect statement and implications.
- Use direct statement in such a way that your audience will take it in, but not think too much about it.”

Ominously, *Science* concluded: “For lasting results, aim your propaganda at children and mix it with your teaching.”

amazing nuggets of information, get[s] us [to] follow them like heroes, then ultimately spin[s] us off into la la land.”¹⁸

Related to the phenomenon of controlled opposition are the terms “limited hangout”—the “deliberate revelation of *some* information in order to prevent the discovery of other, more important information” [italics in original]¹⁹—and “modified limited hangout” (the mixing of “partial admissions with misinformation”).²⁰ According to the Wikispooks website, “By presenting some true and useful information, a source may gain credibility, which can be put to use later, if a credible source is desired to disseminate *disinformation*” [italics in original].²⁰ As Catherine Austin Fitts (former investment banker and founder of the Solari Report²¹) explains it:

“A ‘limited hangout’ is a partial confession, a mea culpa, if you will, that leaves the essence of a crime or covert reality hidden. Because it includes some small part of the truth, the limited hangout is irresistibly attractive to dissidents and political critics whose thirst for such truth makes them jump at the dangled scraps. Once the system’s watchdogs are busy chewing on the limited hangout, the guilty players can go about their illegal business for a new round of unaccountable, semi-secret mayhem.”²²

Johnstone believes it is not possible to ascertain whether someone is controlled opposition or not—and says not to bother trying. Instead of attempting to figure out whether someone is a “hero” or “controlled opposition,” she suggests staying focused on dissecting the narratives being pushed by those in power.¹⁶ However, others assert that an influencer’s history, language and behavior—as well as red flags like improbable overnight popularity—can provide telltale clues.

BRAIN WAVES AND ENTRAINMENT

The modern media and technologies that are now so ubiquitous—movies, “smart” TVs, smartphones, social media, search engines and more—facilitate another powerful programming strategy (one that encyclopedias diplomatically leave unmentioned), which can be implemented at both the individual and crowd levels: subliminal brain-wave entrainment.

Neurofeedback experts explain brain-wave entrainment as “a method to stimulate the brain into entering a specific state by using a pulsing sound, light, or electromagnetic field.”²³ When the brain hears a repetitive pattern—whether “a repetitive pattern of words. . . a repetitive cadence of rhythm, or. . . a repetitive acoustic sound” emitted via loudspeaker—“the brain will follow that sound” and “will fall into rhythm with that sound.”²⁴ This “frequency following response” is a natural tendency of the human brain.²⁴

Entrainment builds on modern scientists’ (and politicians’) fascination with the brain—an interest that burgeoned in the late nineteenth century when European scientists began exploring ways to measure the brain’s electrical activity. In 1924, German psychiatrist Hans Berger identified what he called “Berger’s waves”—the brain waves now known as alpha waves—after recording the first human electroencephalogram (EEG).²⁵ Contemporary neuroscientists describe alpha brain waves as “a bridge from the external world to the internal world, and vice versa,”

FIVE CRITICAL THINKING RECOMMENDATIONS

On February 20, 2022, board-certified internal medicine physician Dr. Annie Bukacek shared some thoughts about the “Defeat the Mandates” rally that took place in Washington, DC, on January 23.⁴⁴ Summarizing Dr. Bukacek’s presentation in *Health Impact News*, Brian Shilhavy noted Bukacek’s five recommendations for mitigating fear-mongering and using critical thinking, “especially for those authority figures who appear to be on ‘our side.’” In Shilhavy’s words, the five recommendations are as follows:

1. “Be vigilant for an upcoming new and invisible enemy used to scare people into submission. If the corona variants lose the fear factor, they’re going to come up with something else.
2. Be skeptical of any authority figure using the CDC exaggerated death numbers from COVID, that we know are based on improper death certificates and flawed PCR COVID testing.
3. Watch out for anyone promoting an upcoming ‘safe and effective vaccine’ for something even by the exaggerated CDC numbers has close to a 99 percent survival rate overall, and statistically 100% percent survival rate for the younger generation.
4. Any authority figure who claims to understand the COVID debacle, but ignores the central role of government in this mess, at those individuals you need to take a closer look.
5. Be of good cheer. A COVID positive test does not mean severe illness or death. Scrutinize any authority figure who talks of a positive COVID test as a reason to fear death.”⁴⁵

In the alpha brain-wave state of pleasant relaxation that entrainment induces, people become less discriminating and thus are more susceptible to subliminal programming.

with the hallmark of the alpha brain state being relaxation and “passive attention.”²⁶

Nazi scientists were reportedly “obsessed” with mind control²⁷ and paid close attention to Berger’s brain discoveries. Though they forced Berger into retirement in 1938 and banned him from conducting any further EEG work (Berger committed apparent suicide in 1941),²⁵ there is little doubt that unsettling forms of brain research (much of it later carried out in concentration camps) remained a top Nazi priority.

As explained by scientist Adam Trombly in a 2011 interview with Catherine Austin Fitts, the Nazis were not only aware of the “frequency following response” but “very intentionally acoustically designed” large stadiums “to augment and enhance alpha entrainment”:

“[W]hat the German scientist community had discovered was, if you played alpha waves to patients who were having problems with their nervous system or psychosis or whatever, or even if they were just anxious, if you played alpha waves to these people they would become calm. Their brains would fall into a rhythm with the alpha waves. . . . They would feel relaxed, and open and therefore more suggestible.”²⁴

In other words, in the alpha brain-wave state of pleasant relaxation that entrainment induces, people become less discriminating—“because that discriminating faculty has kind of been relaxed away”—and thus are more susceptible

to subliminal programming.

Practitioners of neurofeedback warn that brain-wave entrainment, in some instances, can produce “unwanted side-effects,” including “increased anxiety, convulsions, overwhelming subconscious images, nausea, headaches, dizziness or increased heartbeat,” or “feeling a little unusual.”²³ They also warn that the developing brains of those under twenty-six years of age are “more sensitive.”

CELL PHONES AND OTHER ENTRAINMENT TOOLS

The Nazis’ entrainment efforts, as per Trombly, were “very, very primitive compared to what we’re seeing today”—and particularly in the United States, which is as obsessed as Nazi Germany once was with what military personnel refer to as “mind war.”²⁸

Consider a patent approved by the U.S. Patent Office in 1992, titled “Silent Subliminal Presentation System.”²⁹ The system was designed to encode subliminal (meaning “below the threshold of audibility to the conscious mind”) audio frequencies with “desired intelligence.” As paraphrased in 2020 by writer Jeremy James—who defines subliminal entrainment as a “long-term and strategic” technique “where sets of affirmations build on one another over time to produce deeply held convictions which are impervious to reason”—this patented system would “enable a person’s mind to be hacked and a message of any kind implanted—all without his knowledge.”²⁹ Other related U.S. patents include a 1990 patent

ALL IN THE FAMILY

The family tree of serial entrepreneur and former Netflix CEO Marc Bernays Randolph includes both Sigmund Freud and Edward Bernays. According to Randolph’s flattering bio on Wikipedia, Randolph had, early on, a “fascination with using computer software to track customers’ buying behavior” and used this interest to fold market research into the Netflix user interface. One of Randolph’s current roles is board member (and investor) of Looker Data Sciences, a “business intelligence” platform owned by Google since 2019.

Reed Hastings, Netflix’s other co-founder, is the great-grandson of investment banker and scientist Alfred Lee Loomis, who played a significant role in the development of both radar and the atomic bomb and pioneered EEG techniques for the study of brain waves. Loomis’ son Henry Loomis (Hastings’ grand-uncle), also a physicist, joined his father in researching radar and brain waves and provided Navy radar training at Pearl Harbor during World War II. After the war, Henry worked at the Department of Defense, directed the Office of Intelligence and Research at the United States Information Agency, directed and expanded the Voice of America and served as president of the Corporation for Public Broadcasting.

In recent years, Netflix’s role as a tool of elite propaganda has become more blatant, with the company signing multi-year deals with the Obamas in 2018 and Prince Harry and Meghan Markle in 2020 to produce films and series.

for “an apparatus and method for remotely scanning people’s brain waves” and a 1998 patent for the use of directed microwave radiation “to produce certain effects” in humans.²⁸

The mass rollout of cell phones and smartphones introduced further opportunities to influence human moods, thoughts and even bodily functions—in effect operating as psychotronic weapons.²⁸ (Psychotronics—Mind+Device—is “the science of mind-body-environment relationships. . . concerned with the interactions of matter, energy, and consciousness.”)³⁰ The process of brain entrainment, activist Peter Kirby wrote in 2018, “is fundamental to psychotronic weaponry.”²⁸

Providing a “limited hangout” on this topic, *Scientific American* published an article back in 2008 titled “Mind Control by Cell Phone.”³¹ At the time, Nokias were the world’s most popular cell phones and the iPhone had barely been introduced. Explaining that electromagnetic signals from cell phones could alter brainwaves and behavior, the article cited research showing that when cell phones were transmitting, “The power of a characteristic brain-wave pattern called alpha waves. . . was boosted significantly”—in talk mode, cell phones seemed to be “particularly well-tuned to frequencies that affect brainwave activity.” *Scientific American* also noted researchers’ professed astonishment that “the effects of the disrupted brain-wave patterns continued long after the phone was switched off.” One of the quoted researchers disingenuously asked, “One wonders if with different doses, durations, or other devices, would there be greater effects?”

BRAIN-MACHINE INTERFACES

In the twenty-first century, the Defense Advanced Research Projects Agency (DARPA), established in 1958 by President Eisenhower, has become, with its almost four billion dollar annual budget, “the world’s most powerful scientific military agency.”²⁷ DARPA is driving the research agenda for the field known as brain-computer interface (BCI) or brain-machine interface (BMI)—turning efforts to connect the human brain directly with the outside environment into “one of the fastest expanding fields of scientific inquiry.”³² DARPA fund-

ing—distributed among defense contractors, universities, university-corporate consortia and startups—is behind “[a]lmost every advance or major technology in the [BCI] field,” with more of the agency’s funding reportedly going to “invasive” interfaces such as brain implants than to “non-invasive” ones.³³

It is worth noting that DARPA, which works closely with both the Department of Defense and the Department of Health and Human Services, played a lead role in the development of the mRNA technology that made its debut with Covid vaccines.³⁴ It has also worked to develop hydrogel nanotechnology and nanotech biosensors that can be embedded under the skin. As subdermal technologies and implantable microchips exit the realm of science fiction,³⁵ there is good reason to worry about the “possibility of misuse of in-body nanotechnology by totalitarian governments,”³⁴ including for mind manipulation, surveillance and financial control purposes.

An account in *Forbes* about BCI “breakthroughs” matter-of-factly reported in 2019 that BCI and mind control were moving “one step closer to becoming reality,” spearheaded by “high profile and powerful corporations” such as Facebook and Elon Musk’s Neuralink, as well as startups like Kernel and BrainCo.³⁶ In a surprisingly honest assessment of these technologies’ dark transhumanist agenda, the *Forbes* writer noted that BCIs will “allow for the causation to flow. . . from the outside world into our brains,” something “that’s currently better left to a Philip K. Dick or William Gibson novel”:

“[T]he intent and direction is clear: hook people up directly to the internet and to smart technology, and not just to permit them to control things remotely, but to influence or even control how they behave. [. . .] And at the same time, the possibility of being ‘connected to AI’ would mean that our actions will flow less from our own judgments and thoughts on what’s in our best interests, and more from what data and algorithms have decided is best for us.”³⁶

KEEPING OUR WITS ABOUT US


In a prescient 2017 blog post about controlled opposition and the “vaccine frame-up,” health freedom advocate and naturopath Rosanne Lindsay described how the two “sides” of the “vaccine debate” often put forth the same message, albeit worded slightly differently: “The frame of The Establishment (CDC) says, ‘Vaccines are safe and effective.’ The controlled opposition says, ‘We are not opposed to vaccines. We just want safe vaccines.’”¹⁵ From Lindsay’s perspective, these “value judgments” intentionally exclude any consideration of morality. A less artful—but more moral and evidence-based³⁷—assessment would inevitably lead to a different conclusion, namely, that “‘safe vaccine’ is an oxymoron and a contradiction.”¹⁵

One year into the disastrous, genocidal rollout of Covid-19 injections—experimental products with suspiciously secret ingredients and clinical trial data that regulators and manufacturers are trying hard to keep hidden from the public³⁸—Lindsay’s remarks about the “vaccine frame-up” seem even more relevant. As she noted five years ago, the

statement “I am not ‘anti-vaccine’” (uttered by some of the celebrity physicians who spoke at the January 23, 2022 “Defeat the Mandates” rally in Washington, DC) smacks of being a “controlled, simulated message”—a “double-negative meant to confuse” rather than a clear statement of principle.

At our current historical juncture, as Catherine Austin Fitts explains, much is at stake—with “a smart grid, biometrics, vaccine passports, digital ID wallets, and digital currency promising to turn into a full-blown social credit system that ends human liberty in the Western world, if we allow it.”³⁹ These mechanisms constitute, in Fitts’ words, an “individualized high-tech trap that is closing in around each one of us.”³⁶

Unfortunately, it is difficult for many people to grasp the reality and power of the propaganda and mind-control technologies that are helping make the global coup go, or to accept the fact that “these technologies are being purposefully used against [each of] us on a routine, daily basis.”²⁸ Fortunately, as activist Peter Kirby puts it, it is still possible for “a relatively small percentage of intelligent and well-informed individuals [to] push the envelope”—and the size of that group is most definitely growing.

Michael Leshner of *Off-Guardian* also reminds us that while “the essence of humanity is under assault,” the “enemies of humanity have a weak point”—“they do not understand the power contained in each soul that refuses to be duped.”⁴⁰ 

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Homeopathy Journal

HOMEOPATHY TO HELP MITIGATE THE EFFECTS OF CORONAVIRUS “VACCINES”

By Anke Zimmermann, BSc, FCAH

Disclaimer: None of the information in this article is intended to diagnose, treat or prevent any disease or condition. It is intended for educational purposes only. Please contact a health care professional as soon as possible if you experience any of the concerns described in this article. Homeopathy addresses the vital force, not a condition or disease. It supports the innate healing ability of the individual.

Since the experimental mRNA and vector DNA gene therapy injections—sold to an unsuspecting public as “vaccines”—were unleashed onto humanity in December 2020, record numbers of adverse events from the injections have been reported in numerous databases. Homeopaths around the world are now increasingly being asked to assist affected individuals.

This article addresses three questions. First, what data are available on injuries and deaths from Covid injections? Second, what kinds of symptoms have been reported from the shots, and what concerns do scientists and doctors have? Third, which homeopathic remedies may be helpful to assist affected individuals with immediate, intermediate and potential long-term adverse events following injection?

ADVERSE EVENT DATA

The U.S. Vaccine Adverse Event Reporting System (VAERS) is the passive surveillance system co-managed by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA). As compiled by Children’s Health Defense in *The Defender*, from December 14, 2020 to February 18, 2022, VAERS data showed over 1.1 million reported adverse events (1,134,984) across all age groups following Covid vaccines.¹ Over one hundred ninety-six thousand—about 17 percent—of the reported injuries were classified as “serious,” including over twenty-four thousand deaths. (*The Defender* summarizes the weekly releases of VAERS data every Friday.)

VAERS includes both U.S. reports and some foreign reports sent to U.S. vaccine manufacturers by foreign subsidiaries.² With foreign reports excluded, domestic adverse events exceeded seven hundred sixty-seven thousand through February 18—over seventy-three thousand of them rated as “serious”—including over eleven thousand one hundred deaths.¹

The February 18 VAERS data showed, for all age groups combined, that many of the deaths and injuries were cardiac-related, with over sixteen hundred reported myocardial infarctions and over four thousand reported cases of myocarditis and pericarditis. Almost one in five deaths (19 percent) were due to a cardiac disorder. In addition, the injured re-

ported well over thirteen thousand blood clotting disorders. Other widely reported conditions following Covid injections include Bell’s palsy (over thirty-five hundred reports), life-threatening or fatal anaphylaxis (over twenty-three hundred) and Guillain-Barré syndrome (eight hundred fifty).

Although the average age of death was about seventy-two, VAERS also reveals deaths in children and adolescents, including (again, as of February 18) four reported deaths (and over eighty-five hundred adverse events) in children ages five through eleven, and thirty-nine reported deaths (and nearly thirty thousand injuries) in teens ages twelve through seventeen. Sadly, adverse event reports among pregnant women numbered well over five thousand, including over sixteen hundred miscarriages or premature births.¹

To put these numbers into perspective, VAERS has, in a little over a year, received more reports of injuries and deaths after Covid shots than the system accumulated in the previous thirty years for all other vaccines combined—including twice as many reported deaths.³ Moreover, a three-year, U.S. government-funded review by Harvard of data from seven hundred fifteen thousand patients found that “fewer than 1% of vaccine adverse events are reported.”⁴ This could mean that a hundredfold more adverse vaccine events could be occurring than are reported to VAERS. The CDC has nonetheless refused to mandate, automate or otherwise improve VAERS reporting.^{5,6}

In Australia, the Database of Adverse Event Notification (DAEN) collects information about adverse events related to both medicines and vaccines.⁷ According to the analysis and expert testimony of statistician Lisa Mitchell, DAEN received—for calendar year 2021 (Jan. 1 through Dec. 31)—reports of over one hundred

thousand adverse events (100,180) following Covid mRNA injections, including seven hundred thirty-three deaths.⁸ Mitchell writes, “The number of adverse events reported to this database regarding non-Covid vaccines from Jan 1, 1971 to Dec of 2021, a time span of 50 years, were 19,330 in total with 59 reported deaths. This makes Covid vaccines 36 times more lethal than conventional vaccines.” As in the U.S., top categories of adverse events included neurological and cardiovascular disorders as well as “injection site reactions.”

INSURANCE DATA

Are there other—and potentially far more accurate—databases? Indeed, insurance databases are beginning to document a veritable explosion of vaccine-related injuries.

In early January, for example, *The Defender* and other news outlets reported a “bombshell statistic” shared by an Indiana insurance industry CEO executive during an end-of-year virtual news conference.⁹ The executive disclosed a “stunning” 40 percent increased death rate among working-age adults (ages eighteen

through sixty-four) compared to pre-pandemic levels. Rating the extraordinarily high death rate as “the highest we have seen in the history of this business,” he added that the trend is “consistent across every player in that business.” He also described a major uptick in both short- and long-term disability claims.

The following month, a German health insurance company made waves when it hypothesized significant underreporting and underrecording of Covid vaccine injuries, suggesting that vaccine-related adverse events are at least ten times more common than the numbers put forth by Germany’s federal health agency.¹⁰ The company described a “significant alarm signal” emerging from its data on nearly eleven million insured people, and declared that “a risk to human life cannot be ruled out.”

MILITARY DATA

The U.S. Defense Medical Epidemiology Database (DMED) is also revealing explosive findings. The military health records in DMED supply medical codes for medical issues faced by the military. On January 24, 2022, U.S. Senator Ron Johnson held a panel discussion, titled “COVID-19: A Second Opinion,”¹¹ at which Ohio attorney Tom Renz shared whistleblower information about data from DMED (see Table 1), showing radical increases in health conditions of all types in 2021—following the rollout of mandated Covid injections for military personnel—compared to the average for the previous five years (2016–2020).¹² The whistleblowers described “jumps by factors of hundreds to thousands of percent” in cancers as well as neurological, cardiovascular and reproductive disorders.^{13,14}

TABLE 1. Health problems in U.S. military personnel, 2021 compared to 2016-2020 (five-year average)

TYPE OF DISORDER	CONDITION	PERCENT INCREASE
Cancer	Malignant neoplasms	664%
	Breast cancer	487%
	Testicular cancer	369%
Neurological	Neurological disorders	1048%
	Multiple sclerosis	680%
	Guillain-Barré syndrome	551%
	Migraines	452%
	Bell’s palsy	291%
Cardiovascular	Hypertension	2181%
	Pulmonary embolism	468%
	Tachycardia	302%
	Myocardial infarction	269%
Reproductive	Female infertility	471%
	Ovarian dysfunction	437%
	Male infertility	350%
	Miscarriage	279%
	Birth defects	155%

Source: <https://renz-law.com/attorney-tom-renz-whistleblowers-dmed-defense-medical-epidemiology-database-reveals-incredibly-disturbing-spikes-in-diseases-infertility-injuries-across-the-board-after-the-military-was-forced-to/>

Reportedly, the Department of Defense (DOD) panicked about the leak of this information, and it appears that the BBC's "Trusted News Initiative" (a partnership with organizations such as Google and the Jeff Bezos-owned *Washington Post*) and various "fact-check" organizations are now attempting to manipulate the DMED numbers from previous years to cover up the truth. Attorney Renz says, "To believe these brand-new [that is, manipulated] DOD numbers you have to believe that the DOD under-reported all cases on this military database by around 20 million per year, for 5 years. They, the DOD, are now claiming that they have been underreporting cases by 1000% for 5 years."¹³

HOMEOPATHIC REMEDIES: IMMEDIATE REACTIONS

Reactions following receipt of Covid mRNA and vector DNA injections can be broadly classified as either immediate (happening within minutes to hours after the shot), intermediate (onset usually within a few days or weeks) and/or long-term. The latter are beginning to emerge, but their full scope may not be known until years from now. Homeopathic practitioners have used a number of homeopathic remedies to mitigate both short-term and longer-term adverse effects of the Covid injections, including remedies prepared from the various shots. The latter remedies are carried by specialized homeopathic pharmacies (such as the Alchemists Apothecary). However, please do not inquire directly with the pharmacy, as the general public cannot order these remedies directly. Instead, contact your professional homeopath or naturopathic doctor to order them for you. The potencies reported as most often helpful, either before or after the injections, are 30C and 200C. If adverse reactions occur, some practitioners like to use higher potencies as well.

Immediate reactions such as tenderness and swelling at the injection site and arm pain are some of the most commonly reported symptoms after the shots. In the UK, these represent more than one in ten reported adverse reactions submitted to the "Yellow Card" system.¹⁵ *Apis mellifica*, a remedy made from bee venom, may be helpful for local tenderness and swelling

after the jabs. *Ledum pallustre*, often used after insect bites and stings involving local reactions, is another remedy to consider. Both have been reported helpful with post-jab arm tenderness.

Vaccines may also irritate nerves, which can cause sensations of tingling, numbness and even shooting pain. *Hypericum perforatum* is a wonderful remedy often used for acute nerve injuries and irritations. I have used *Hypericum* successfully to ward off development of Guillain-Barré syndrome in individuals experiencing numbness and tingling in the injected arm after diphtheria-tetanus-pertussis vaccination.

Anaphylaxis and allergic reactions are obviously best handled as a medical emergency. However, *Apis mellifica* in a higher potency—200C and up—may be helpful with acute anaphylactic reactions in general. Some people have reported itching of the arm and body post-injection, and *Apis* may still be a useful remedy in this case. Other remedies to consider include *Histaminum*, a homeopathic remedy made from histamine, and *Rhus toxicodendron*, a remedy made from poison ivy. In a very acute situation, the remedy may need to be taken every few minutes.

Thousands of deaths have been recorded following the Covid injections, many within twenty-four to forty-eight hours, and remedies such as *Aconitum napellus* and *Arnica montana* might have prevented many of them. These are two very useful homeopathic remedies for sudden, acute reactions involving collapse and near-death reactions, including possibly fatal cardiac arrest.

The famous *Aconitum napellus* is derived from the strikingly showy as well as extremely poisonous "monkshood" (also known as "wolfsbane" or "kill-panther"). Ingestion of even minute amounts of the leaves or root can cause shock and cardiac arrest within minutes to hours. As homeopathy is based on the similarity principle, if someone is going into shock with cardiac symptoms, *Aconitum* may save the day.

Another remedy to consider is homeopathic *Opium*, often sold as *Papaver somniferum*. This remedy can be indicated for shock with collapse and dullness, especially in cerebral vascular accidents (that is, strokes). There have been many reports of stroke symptoms following the Covid injections.

USEFUL SNAKE VENOM REMEDIES

Adverse events reported within days or a few weeks after Covid mRNA injections include various blood clotting disorders such as cardiac arrest, strokes, pulmonary embolism, thrombosis and abnormal menstrual bleeding.

One possible remedy in these situations is *Arnica montana*, a well-known homeopathic remedy with anticoagulant properties that is often used after trauma as well as shock. A number of other remedies are also commonly utilized for such states. It is important to remember, however, that we are always supporting the vital force and the whole individual; we are not "treating" any "condition" or "disease." It is best to have professional guidance in cases of abnormal clotting, but it may be a good idea to have some of these remedies on hand to assist family and friends quickly, if necessary, without needing to wait for remedies to be delivered.

Considering that post-Covid injection symptoms have been likened

TOP REMEDIES TO CONSIDER FOR REACTIONS TO COVID INJECTIONS

ACONITUM NAPELLUS: Symptoms come on suddenly; may be related to shock; sudden collapse.

ALUMINA: Central and peripheral nervous system; slowing and confusion; neurological disorders.

APIS MELLIFICA: Local swelling and heat (think “bee-sting-like”).

ARNICA MONTANA: May help with symptoms of blood clotting, heart attacks, stroke.

BELLADONNA: Sudden and acute hypertension.

BOTHROPS LANCEOLATUS: Disseminated clotting.

BUTHUS TAMILUS: Marked rhythmical fluctuations in blood pressure preceding cardiovascular collapse and death; neurological changes.

BRYONIA ALBA: Affects mucous and serous membranes; worse from motion; great dryness.

CARCINOSIN/CARCINOSINUM: Used by some homeopathic physicians to help the immune system of those affected by cancer.

CROTALUS HORRIDUS: Angina; chest pain; sepsis.

CONIUM MACULATUM: Stony-hard tumors; hard lymph nodes.

COVID INJECTION REMEDIES: May cover many post-injection symptoms.

EUPATORIUM PERFOLIATUM: Tremendous aching, as if bones were broken; influenza-like symptoms.

GELSEMIUM SEMPERVIRINS: Weakness on mental, physical, emotional levels; trembling; forgetfulness; dullness of the mind.

GLONOINUM: Sudden high blood pressure, angina.

HIV/AIDS NOSODE: Severe immune system weakness.

HISTAMINUM: Allergic reactions.

HYPERICUM PERFORATUM: Nerve irritation and injury, often with shooting pain or tingling and numbness.

LACHESIS MUTUS: Left-sided symptoms; cardiovascular symptoms; menstrual changes in women; abnormal bleeding; stroke.

NAJA TRIPUDIANA: Heart valve abnormalities, especially in children; enlargement of the heart.

LEDUM PALLUSTRE: After puncture wounds.

PAPAVR SOMNIFERUM (OPIUM): Shock or trauma causing mental dullness; may be helpful after strokes.

RHUS TOXICODENDRON: Worse with first motion, better with continued motion; also certain skin eruptions like poison ivy; can be helpful for victims of abuse and torture.

SARCODES SANGUINEA: Potentially helpful for many post-vaccine adverse events.

SILICA/SILICEA: Potentially helpful for many post-vaccine adverse events; helps body to eliminate foreign objects.

THUJA OCCIDENTALIS: Potentially helpful for many post-vaccine adverse events; vaccinosis.

to the effects of a rattlesnake bite, various snake venom remedies may be indicated. The clinical picture for many of the snake venoms includes cardiac symptoms, hypertension and hemorrhage as well as an intolerance to tight clothing around the neck. The snake remedies can also be indicated where there are general feelings of victimization—a strong feeling among those who have been coerced into getting the Covid jabs to keep their jobs, continue their studies, look after relatives, travel and more.

The most famous of the snake venom remedies for symptoms of blood clots is probably *Bothrops lanceolatus*, derived from the venom of the Martinican pit viper. The bite of this snake leads to multiple vascular obstructions, which is exactly what is being seen in some people after Covid injections. Of course, in homeopathic form it may help to alleviate such symptoms by supporting the vital force. *Bothrops* may be useful for clotting, thrombosis, tendency to stroke, pulmonary embolism and retinal hemorrhage.

Lachesis mutus, a homeopathic remedy derived from the venom of the South American bushmaster snake, is associated with similar symptoms. Symptoms are often worse on the left side. One of my patients suffered a mini-stroke after her Covid mRNA injection. She lost some function of her left arm and the left side of her face. Fortunately, she was already well-informed on homeopathy and improved quickly by taking a few doses of *Lachesis mutus*. *Crotalus horridus*, a remedy made from the venom of the rattlesnake, has similar indications.

Other good reasons to stock up on the snake remedies include their usefulness in cases of hemorrhagic fevers or menstrual abnormalities. Many of the snake venoms have affinity to ovarian function, especially left-sided. A patient of mine developed intractable low-grade menstrual bleeding for weeks with pains in the left ovary just from being exposed to spike protein shed from others. *Lachesis* helped.

MYOCARDITIS AND PERICARDITIS

The development of many cardiac symptoms has been reported after the Covid mRNA injections, including the mentioned cardiac arrests and clotting, as well as sudden hyperten-

sion, myocarditis and pericarditis.

Both myocarditis and pericarditis can involve symptoms of chest pain and shortness of breath, and feelings of having a fast-beating, fluttering or pounding heart. Many cases have been reported in young children and young men. I personally have seen several cases of myocarditis in young men. Homeopathic remedies that may be helpful in such circumstances may include the homeopathic Covid injection remedies and the previously mentioned snake remedies as well as the additional snake remedy *Naja tripudians*, which is derived from the venom of the Indian cobra.

Naja has more valvular issues than other snake remedies. The famous homeopath James Tyler Kent (a forefather of modern homeopathy) recommended it as almost a specific for valvular lesions in children.¹⁶ *Naja* is also indicated for violent palpitations, rapid or slowed pulse and enlarged heart. It may be particularly indicated for those who took the jab out of duty-consciousness but are feeling conflicted about it.

There are other remedies that could be indicated, including *Aurum metallicum*, *Spigelia* and others. The message I'm trying to send is that homeopathy may have a lot to offer for these concerns.

OTHER CARDIAC SYMPTOMS

Homeopathic *Belladonna* and *Glonoinum* may potentially be helpful for individuals suffering sudden severe hypertension with intense headaches, shortness of breath and chest pain, even nosebleeds. *Belladonna*, a homeopathic remedy made from deadly nightshade, is famous as a remedy used in situations involving sudden, severe inflammation and other intense symptoms. Homeopathic *Glonoinum* is made from nitroglycerin, which in allopathic medicine is used to relieve angina symptoms.

Jeremy Sherr, a homeopath in Tanzania, has observed great results with a remedy derived from the venom of the Indian red scorpion. The symptoms of being poisoned by this scorpion apparently resemble a serious case of Covid, as the venom contains potent cardiotoxins as well as neurotoxins. The remedy, *Buthus tamulus*, may also cover post-injection events, including the development of vascular damage and thrombosis as well as various neurological problems. According to Sherr, Covid injections can be compared to the effect of a dangerous scorpion sting!¹⁷

VACCINOSIS

“Vaccinosis” is a term that was coined by Dr. Heinrich Goullon of Weimar in a paper published in 1877. He described a state of general malaise and flu-like symptoms after smallpox vaccination. Flu-like symptoms, including fever, muscle aches, bone pain, skin eruptions and weakness have been frequently reported by recipients of the Covid experimental injections.

Helpful homeopathic remedies to consider include remedies commonly used to assist with influenza-like symptoms, including *Bryonia alba*, *Eupatorium perfoliatum* and *Gelsemium sempervirens*. Esteemed homeopath André Saine of Canada recommends *Bryonia* prophylactically after Covid mRNA vaccines.

Gelsemium is famous for great weakness with flu-like symptoms. *Bryonia* is more indicated for dehydration, being worse with motion and

often with great headaches. *Eupatorium* is indicated when there is severe bone and/or back pain.

Another remedy to consider for general, systemic effects after vaccination is *Thuja occidentalis*, a remedy made from a coniferous tree in the cypress family. Many practitioners routinely recommend *Thuja* to offset adverse vaccine reactions. Of course, these mRNA and vector DNA injections are not traditional “vaccines.” Nonetheless, *Thuja* may in some ways help the organism to eliminate some of the potentially toxic effects. James Tyler Kent thought that *Thuja* was helpful after vaccines because of the trace of animal products in them.

Swollen lymph nodes have also been reported as an adverse event after the Covid jabs, as well as a symptom resulting from exposure to “shedding” or “transmission” of spike protein from recently jabbed individuals. Several remedies have been reported helpful for this, including *Silica*, *Conium maculatum* and *Sarcodes sanguinea*. Interested readers could try a 30C potency two to three times a day for a few days, or as needed.

Silica is a remedy made from quartz traditionally used to help the body expel foreign substances. As we still don’t know exactly what is in the Covid jabs, it would be wise to employ *Silica* after the injections. Jeremy Sherr has reported very positive results from using *Silica* post-vaccine, not only for swollen lymph nodes but also for many other post-injection concerns.¹⁸

Sarcodes sanguinea is a recently developed homeopathic remedy that may cover adverse vaccine reactions in general. In the U.S., it can be purchased from I&E Organics Apothecary. I have used it with good effect in a client who developed breast pain and swollen axillary lymph nodes after being exposed to her freshly-vaccinated husband.

Conium is a homeopathic remedy made from poison hemlock that may be used in the management of stony-hard tumors, including hard, swollen lymph nodes.

NEUROLOGICAL DISORDERS

Neurological disorders following Covid injections appear prominent in all of the examined databases, and especially the military database, which recorded a thousandfold increased rate of neurological events in 2021 versus the previous five-year average. A number of high-profile scientists have already noted or are predicting the future development of many neurological ailments as a result of the “vaccines.”

Immunologist and former NIH scientist J. Bart Classen analyzed data on adverse events reported to the UK’s Yellow Card system after Covid injections and found thousands of reports of multiple symptoms that are clear signals of neurodegenerative disorders, including Parkinson’s disease, Alzheimer’s disease, amyotrophic lateral sclerosis (ALS) and more.¹⁹

Dr. Christopher Shaw, a professor in the Department of Ophthalmology and Visual Sciences at the University of British Columbia with cross-appointments in the Department of Experimental Medicine and the graduate program in neuroscience, is predicting a tsunami of neurological vaccine damage that could crush the world’s health care systems.²⁰

Dr. Stephanie Seneff is a senior research scientist at MIT with four degrees from MIT in the fields of biophysics, electrical engineering and

computer science. Since 2008, she has studied “the role of nutrition and environmental toxicants on human disease, with a special emphasis on the herbicide glyphosate and the mineral sulfur.” Speaking on Fox News on January 17, 2022, Seneff stated:

“[B]oth the mRNA vaccines and the DNA vector vaccines may be a pathway to crippling disease sometime in the future. Through the prion-like action of the spike protein, we will likely see an alarming increase in several major neurodegenerative diseases, including Parkinson’s disease, CKD [chronic kidney disease], ALS and Alzheimer’s, and these diseases will show up with increasing prevalence among younger and younger populations, in years to come. Unfortunately, we won’t know whether the vaccines caused this increase because there will usually be a long time separation between the vaccination event and the disease diagnosis.”²¹”

Seneff added that this is “very convenient for the vaccine manufacturers, who stand to make huge profits off of our misfortunes—both from the sale of the vaccines themselves and from the large medical cost of treating all these debilitating diseases.”

Once again, in homeopathy we are not treating any neurological disease per se, but rather a whole person with a constellation of symptoms. And as we are seeing, the experimental injections may cause neurological, cardiovascular, immune system and other changes all in the same individual. My goal here is just to alert readers of the possibility that homeopathy may be helpful in case someone develops long-term adverse events.


The snake venom remedies need to be considered for those developing neurological symptoms, as should the red scorpion remedy, but there are also many other remedies to consider. Depending on the individual’s symptoms, these might include remedies made from the “vaccines” administered, perhaps a remedy made from the spike protein (available, to professionals, at Alchemists Apothecary), *Alumina* (made from aluminum) and numerous others.

CANCER AND IMMUNE DEFICIENCIES

There are several signals pointing to increased cancer risks after Covid injections. Is there anything homeopathy may have to offer to mitigate this risk? Indeed, there may be. Homeopathy has long used homeopathic remedies prepared from cancerous tumors, called *Carcinosin* or *Carcinosinum*. There are different preparations made from different tumors or a combination of different tumors. A famous Indian homeopath, Dr. A.U. Ramakrishnan, has successfully used these remedies to help cancer patients and improve their resistance against a recurrence of cancer.²² These remedies may become more important once we start seeing the longer-term effects of these injections unfold.

Another potential long-term adverse effect of the Covid injections may be the development of chronic immune deficiency, including symptoms grouped under the diagnostic umbrella of “HIV/AIDS.”²³ Even here, homeopathy may have helpful offerings. Although remedies should always be selected with care and individualized, Jeremy Sherr, who has worked in Africa with thousands of patients deemed to have HIV/AIDS, has successfully used a remedy (called a “nosode”) made from the blood of an AIDS patient in some cases of post-Covid injection adverse events involving immune weakness.

CONCLUSIONS

The experimental Covid gene therapy injections (so-called “vaccines”) are racking up alarming numbers of adverse event reports around the world. I’m hoping that this article will help readers recognize adverse events and consider homeopathy for their mitigation, whether as a lay person or with the assistance of professionals. Having some of the remedies on hand may be life-saving for someone you love. As the medical system deteriorates, homeopathy offers real hope for the health and healing of humanity. Let’s all learn as much as we can and help each other! 

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Technology as Servant

PIPELINES: ANCIENT WATER TRANSPORT SOLUTION BECOMES MODERN POLITICAL QUAGMIRE

By James Kirkpatrick

Whether we like it or not, the reality is that Russia is a petrostate and supplies roughly 30-40 percent of Europe's energy imports.

As we watch the global media feeds in early March, the images of the Russian Army streaming into Ukraine have elicited the collective feelings of horror, sympathy and anxiety.

The primary drivers for this conflict, slowly emerging from the fog of war, appear to be the westward pull of Ukraine into the post-WW2 nuclear treaty alliances pitted against the Russian autocratic desire for a strategic reunification of the Former Soviet Union (FSU). Underneath the geopolitical rationale for this sovereign territory incursion, a second less tangible front is likely to emerge if the fighting continues: the retaliatory energy war. As Western nations announce a battery of financial and trade-based sanctions in an attempt to isolate and bankrupt Russia, we should all be wary of the Russian counteroffensive. Whether we like it or not, the reality is that Russia is a petrostate and supplies roughly 30-40 percent of Europe's energy imports. Most of this imported energy

from Russia to Europe is in the form of oil and petroleum products, natural gas (including the liquified form), and a much smaller amount of thermal and metallurgical coal. The majority of these imports is supplied by pipelines, really big pipelines, running from the Russian oil and gas fields in the Ural Mountains and Yamal Peninsula, through Ukraine and Belarus, and then on to continental Europe.

THE RUSSIAN PIPELINE SYSTEM

At the center of the Russian Pipeline System (RPS) are four main pipelines, three of which happen to run through Ukraine (Figure 1). Details of each system are the following:

- Druzhba (translates as “Friendship”), Liquid/Oil, about 2500 miles, 40-inch diameter, built in mid-1960s, 1.3 million barrels per day (pbd), operated by Transneft.
- Brotherhood, Gas/Natural Gas, about 2600 miles, 56-inch diameter, built in early-1980s, 30 billion cubic meters per year, operated by Gazprom.
- Yamal-Trans-Siberian, Gas/Natural Gas, about 2500 miles, 56-inch diameter, built in mid-1990s, 30-35 billion cubic meters per year, operated by Gazprom.
- Nord Stream 1, Gas/Natural Gas, 760 miles, 56-inch diameter, built in early-2010s, 55 million cubic meters per year, operated largely by Gazprom.

These are the four femoral arteries of the Russian energy complex, the oil side delivering about half of the oil to the doorstep of Eastern Europe's refineries and the gas side delivering roughly 15 percent of Europe's total natural gas consumption per year, that becomes a much higher percentage the further east you travel.

An interesting detail about the RPS is the Nord Stream pipeline: since the collapse of the

FIGURE 1: The Russian Pipeline System (RPS)



Soviet Union, the Russian pipelines running through Ukraine and Belarus have been a constant source of friction, as those two countries charge Russia transport fees for use of its pipelines through their land.

The Nord Stream 2 system, completed in September 2021, was originally envisioned as a solution to this issue, as the pipeline is buried deep below the Baltic Sea, thus bypassing these two countries and still allowing Russia to maintain its dominant energy position in Europe.

The opposition to the Nord Stream 2 pipeline has come primarily from the U.S. and the Eastern European countries, which derive transport fees from the existing and older pipelines in mainland Europe. The blocking and objection to the second Nord Stream pipeline is likely to have adjusted the Russian strategic thinking on the value of the existing pipelines laid across Ukraine and Belarus, and may be a driving factor behind the current military incursion. One of the many tragedies of this conflict is that no amount of trade rerouting can fully replace the lost flow of hydrocarbons if Russia decides to close the pipes. If the conflict continues, it will result in acute energy shortages and material economic contraction throughout Europe—and higher energy prices globally.

The current Russia-Ukraine conflict being a case in point, everywhere we look, hydrocarbon pipelines appear to have developed an odd form of pariah syndrome. From the Brotherhood and Friendship pipelines in Eastern Europe, to the Nord Stream 2 pipeline in the Baltic Sea, and closer to home in the Americas, the Keystone XL pipeline, and a host of natural gas pipelines being proposed throughout the U.S. Eastern Seaboard, pipelines appear to be at the center of major political and even armed conflicts throughout the world. The question we should be asking is why? How did a basic piece of societal infrastructure become such a quagmire of contention?

PIPELINES FROM ANCIENT TIMES

Pipelines and their ancestral cousin, the aqueduct, have been a component of human civilization since at least 3,000 BCE. Originally developed by the Egyptians for irrigation purposes, they were constructed of clay, stone, wood, masonry, copper, tin and lead. The aque-

ducts and pipelines of the ancient world provided a key interconnection to bridge the disparate forces of supply and demand, specifically as it pertained to water. The supply of water existed in mountain lakes and other high-altitude reservoirs from glacial melt, with high demand for water in population and farming centers located at lower altitudes. Aqueducts and pipelines acted as the arbitrage closing mechanism that allowed supply to be conveyed to the place of demand.

Although the Egyptians are credited with the first known usage of pipes and pipelines, the undisputed pipeline masters of the ancient world were the Romans—the engineers of antiquity. Over the eight-hundred-year span of the Roman era, they built thousands of aqueducts to deliver water to their exploding population, some even comparable to modern capacity in terms of scale. The longest Roman aqueduct stretched two hundred miles to deliver water from the Turkish highlands to Constantinople; the largest system of twelve aqueducts delivered fifty million gallons of water a day to the capital city of Rome. This works out to roughly seventy million cubic meters of water annually or about the liquid capacity of Russia's Druzhba-Friendship pipeline.

In a rather ignominious irony, Rome's mastery of all things plumbing is often remembered for two unintended and distinctly negative consequences. The first is their extensive use of lead in their small pipeline projects, namely indoor plumbing and to coat cooking vessels, which resulted in a form of society-wide lead poisoning which may have indirectly contributed to the decline and collapse of the Roman Empire. The second consequence was that a thousand years after the fall of the Roman Empire, the aqueducts that they built across Europe began to fail as well, degrading the quality of public sanitation throughout Europe and providing a fertile breeding ground for disease. Outbreaks of the bubonic plague occurred shortly thereafter. That is not to say that derelict thousand-year-old aqueducts caused the "Black Death." However, this did result in a reduction in public water quality, providing an environment for the spread of the disease.

Through the Dark Ages and medieval period, large public works projects, excluding castles and churches, were not a priority, so

Although the Egyptians are credited with the first known usage of pipes and pipelines, the undisputed pipeline masters of the ancient world were the Romans, the engineers of antiquity.

pipelines and aqueducts remained a vestige of a previous era—until the beginning of the Industrial Revolution and the subsequent boom in raw materials extraction and increasing population density in urban centers. Pipelines became increasingly important in public sanitation to provide water for urban communities and also to remove human waste through city sanitation. Much of this technology is as old as civilization itself.

As Europe, and England in particular, began digging deeper into the earth, the use of pipelines took on a new life, allowing miners to pump water out of their subterranean holes. With the digging came danger and opportunity as English miners quickly discovered that where there is coal, there is also coal bed gas, primarily methane. When mass-steel production entered the picture by the late 1700s, more gas was produced as a by-product of the coking ovens used in raw steel fabrication. The combination of surplus gas production and pipeworks quickly evolved into an entirely new business of residential/commercial heating and illumination using this coalbed, coking oven, or what was sometimes referred to colloquially as “town gas.”

By the 1850s, thousands of gasworks had sprung up across England, Germany and the U.S., providing distributed heat and illumination at an estimated cost of 50 percent below the most viable existing alternative, whale oil lamps and wax candles—in fact, the cost of whale oil was accelerating upwards as the sperm whale population was driven close to extinction in the North Atlantic.

One interesting by-product of the town gas boom was that it allowed factories to stay open longer and provided cheap illumination for nighttime reading, both of which helped to power the second phase of the Industrial Revolution and contributed to growing literacy rates in the developing world at the time.

These changes also greatly contributed to the development of modern pipeline technology and erection techniques as pipelines were used to collect the gas and distribute it across cities and homes. Pipes once again

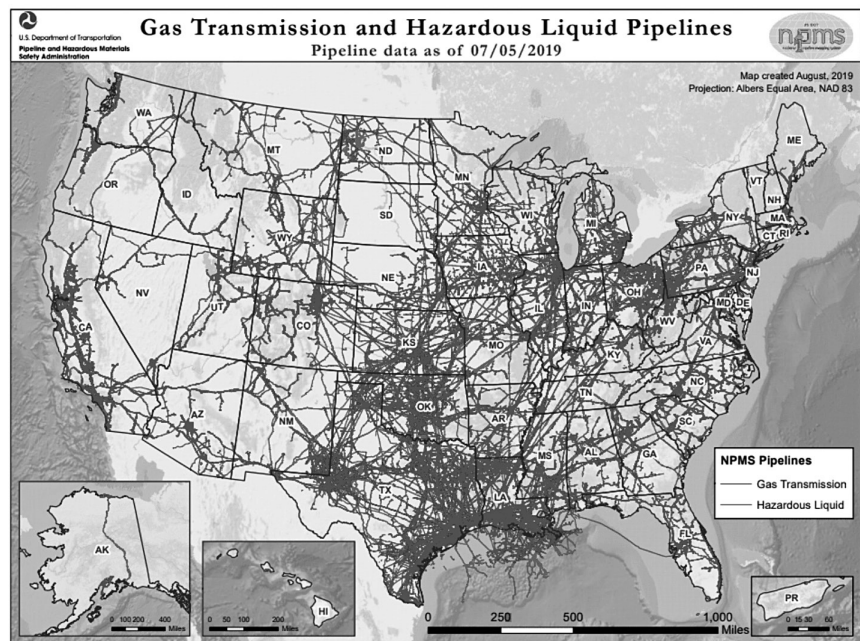
served their ancient function of connecting the place of production to the place of consumption.

PIPELINES FOR OIL

In 1859, a seismic event occurred that ultimately changed the primary use of pipelines from water to energy. The world’s first commercial oil well was drilled in Titusville, Pennsylvania by Colonel Edwin Drake. As the oil began to flow in central Pennsylvania, the age-old problem emerged—the point of production was at a distance from the point of manufacturing and ultimately consumption. In the early days of the oil industry, physical barrels of oil were filled, loaded onto horse-drawn wagons, carried to the nearest railroad depot or river, and moved to the refineries by barge or train. In this process, the average volume of oil that was lost to spillage was approximately eight gallons per standard fifty-gallon imperial barrel, from the production site to market. Since losing 15 percent of your production in the transportation to market is an expensive loss-making exercise, a new solution was required.

Slowly but surely, pipeline experiments began in the Pennsylvania oil fields, but over short distances of one to two miles and with small-bore screwed pipes (one to two inches in diameter) used for gathering purposes. The pipelines created new opportunities to move oil more efficiently and with fewer leaks. The use of

FIGURE 2:
U.S. Energy Pipelines



pipes immediately created a territorial dispute between the pipeline people, the barrel makers and the teamsters, who up until that point had been in control of moving the oil from the Pennsylvania fields.

After a series of sabotage attacks by the teamsters that required intervention from the local national guard, pipeline usage in the early Pennsylvania oil fields took off on the basis of economics. At a time when teamster gangs were charging upwards of five dollars per barrel to transport oil away from the wells, pipelines could achieve the same work for one dollar per barrel and at a fractional leakage rate of less than one gallon per barrel of oil moved.

Next, the web of this new pipeline technology began to spread out away from the Appalachian oil fields, first to Pittsburgh, then to Cleveland and Buffalo, and by 1875, three hundred miles eastward connecting the Pennsylvania fields to refineries in Philadelphia and Bayonne, New Jersey.

From there, as they say, the rest is all details, but to put things in context, by 1905 enough six- and eight-inch steel and cast-iron pipe had been laid in the U.S. to encircle the world twice. Today, there are some two million miles of oil and gas pipelines in operation in just the U.S. alone (see Figure 2), enough pipe to get to the moon and back four times. Similarly, large energy-based pipeline systems are in operation in Canada, Colombia, Venezuela, Brazil, Europe, Saudi Arabia, Russia and China.

WHY PIPELINES?

The ubiquitous usage of pipelines to transport oil and gas today really boils down to a series of straightforward engineering, economic, safety and environmental factors. Those factors, detailed below, include the following:

- The places of oil and gas production in the U.S. tend to be concentrated in the interior, while the places of processing are concentrated on the U.S. Gulf Coast, and the higher places of consumption are on the U.S. Pacific and Atlantic coasts. Pipeline connects all of these supply-demand mismatches to allow the system to operate. This is consistent with the other major pipeline-system countries.

- As in the beginning of the oil industry, pipelines remain the cheapest form of liquids transportation when compared to the alternative of rail or truck or barge, by an order of magnitude. When you are moving oil or gas through a pipeline you are only expending energy to move the actual fluid inside the pipes. Trucks and trains require energy to move the truck or the train as well.
- The technology involved with pipelines is mature and well-understood.
- Ironically, pipelines are the safest and most environmentally friendly method of transporting oil and gas (see Figure 3, page 64). Moving oil by pipelines uses less energy per barrel- or ton-mile traveled, so they naturally emit less emissions. Well-maintained pipelines don't leak, and the spill rate of pipelines versus truck or rail is much less. Pipelines also minimize the interaction between humans and hydrocarbons, making them inherently safer to operate. Pipelines also tend to be buried six to ten feet below the surface, further minimizing accidental interactions. Pipelines offer a leak-free transportation solution as long as they are regularly inspected, have cathodic protection and are replaced when the corrosion allowance is consumed.
- Pipelines are compact and don't really take up that much space for the value they provide. Take the three-thousand-mile length of the Keystone XL pipeline with a typical one-hundred-foot pipeline right-of-way width; the total land usage of the Keystone XL project works out to about thirty-five thousand acres or about one-seventh of the U.S. farmland owned by Bill Gates.

SO WHY THE CONTROVERSY?

If pipelines are so advantageous from an engineering and economic perspective, why are they so controversial? The short answer involves the oil and gas contained within them. The longer answer is a combination of political winds, environmental militarism and a prevailing sentiment of "Not In My Back Yard" or NIMBY.

The most high-profile example of these

Ironically, pipelines are the safest and most environmentally friendly method of transporting oil and gas.

forces converging is the long, twisted and sad saga of the Keystone XL pipeline. The prevailing political and environmental logic against the pipeline goes something like this: if we prevent the pipeline through a combination of lawsuits and permit shenanigans, then the oil won't be able to get to market, and so it won't be produced, which results in less greenhouse gases, which is better for the environment.

There are a couple of problems with this logic. First, let's remember that the U.S. and Canada have already placed into operation over two million miles of pipeline, where Keystone XL adds a paltry two thousand miles of additional pipeline. The original Keystone Pipeline, running roughly the same route, was completed in 2010.

The real kicker is that in the ten years that the Keystone XL pipeline was protested and argued about as a matter of life and death, the oil still got produced and transported, only through a much less efficient and more dangerous method, by rail. Between 2010 and 2014, while the Keystone XL pipeline was debated, crude oil movement by rail in North America increased from virtually nothing to almost one million bpd, just about the pipeline capacity of the Keystone XL pipeline.

Here is the real problem with moving crude oil by rail in large volumes, other than it costing twice as much: it can be really dangerous.

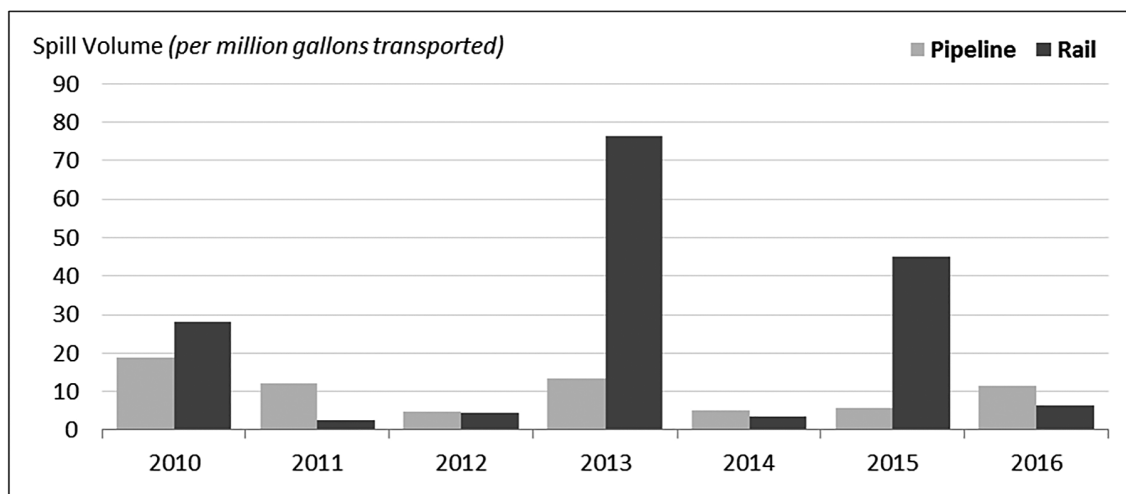
A pipeline is stationary; only the fluid moves. A one-hundred-car rail train, filled with crude oil, traveling at sixty miles per hour, is a bomb. This terrible combination of policy decisions and misguided environmental crusades came to a head in Lac-Mégantic, Quebec (just across the border from Maine) on July 6, 2013 when a combination of human error and faulty brake system design allowed a locomotive hauling seventy-three tank cars of crude oil to accelerate down a hill with a 1.2 percent incline into the six-thousand-person town, derailling at the rail turn near downtown, exploding, and unfortunately killing forty-seven people in the process. This example shows the extreme outcome of various legal and political measures taken to stop the construction of large pipeline petroleum infrastructure.

Such political battles are being waged in connection with hundreds of infrastructure projects across the country and world. The simple reality remains: pipelines are the most efficient, economic, safe and practical way to move liquids and gases from point A to point B. Nothing being developed for the world of tomorrow is going to change that fact, and although pipelines often become a sort of lightning rod of focus because they are large, stationary and permanent, they are simply the messenger and not the underlying root cause of these political-environmental debates.

What really gets lost in these big pipeline infrastructure debates is common sense. The environmental lobby not only opposes new pipelines, they often use the permitting system to prevent the replacement of existing old pipelines mostly installed in the 1950s and 1960s. Putting up barriers to maintenance of existing infrastructure voids the "well maintained" pipeline clause and often leads to losses of containment that are entirely preventable—which just goes to prove the old adage that if something becomes difficult to do, it is less likely that it will be done. ☹☹

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FIGURE 3: Pipeline vs Rail Crude Oil Spill Volume: 2010-2016
Spill Volume per Million Gallons Transported



Source: Prepared by CRS; oil spill data from PHMSA, "Incidents Statistics," September 14, 2017, <http://www.phmsa.dot.gov/hazmat/library/data-stats/incidents>; pipeline transport data from Energy Information Administration, "Refinery Receipts of Crude Oil by Method of Transportation," <http://www.eia.gov>; rail

The Wise Traditions Pantry

SNACK ATTACK: CHOOSING GOOD SNACKS

By John Moody

A few months ago, I hopped onto social media on my phone. I had to make a few posts for work, and while scrolling a bit, I was amazed at the number of ads I saw for . . . snacks. Bars. Chips. Meat sticks. And so much more. I figured my phone somehow knew I was hungry! But I was also intrigued to see just how many new brands and companies were trying to crack the snack market.

Something else stood out to me in the ads—the immense number of so-called “natural” and “organic” snack foods now available. But are they actually good for you? For this article, I want to discuss some categories and stand-out options, along with things you want to watch out for when perusing store shelves, either in person or virtually.

MEAT TREATS

There have been several favorable changes in the “meat snacks” category over the past few decades, making this category, more than any other, the easiest for finding good-quality, on-the-go options. The first bit of good news is that many brands have cleaned up their ingredients considerably. There is far less “icky” stuff in many brands on store shelves, and there are far more options with better (and shorter) ingredient lists.

Second, meat snacks have expanded to include fish options, such as salmon jerky, and some organ meat options, such as the beef liver crisps made by Carnivore Aurelius. It would be great to see a company also create meat sticks that contain organ meats, but so far, I haven’t found anyone offering such an option.

Third, many local farms now offer good-quality meat snacks. For instance, one of the best jerkies our buying club carries is made by a farm in Ohio that also supplies us with grass-fed cheese. Roam Sticks from Singing Pastures

Farm are another option, available nationwide. Nick’s Sticks and Paleovalley offer various types of meat sticks made from free-range and grass-fed animals. The WAPF Shopping Guide lists many more options to consider and farms to support.¹ One thing to note, however, is that these farm-made items are unlikely to be shelf-stable in the same way as large-scale industrial options.

Grass-fed beef jerky and snack sticks are even available in stores such as Costco, usually seasonally, but while the beef appears to be of good quality and the ingredients list relatively clean, be careful about the ratio of ingredients! Many have substantial amounts of added sugar. For instance, in two well-known brands I looked at, one had nine grams of protein and four grams of added sugar per serving; the other had ten grams of protein and six grams of added sugar. It is not a problem to add some sweetness to jerky, but given that meat has zero carbs, many brands are using an excessive amount of refined sugar in their products.

When buying meat snacks, opt for products that use grass-fed and finished meat and simple ingredients—no MSG, no unpronounceable added ingredients—and those that contain a reasonable ratio of carbs to protein.

THE SNACK BAR CRAZE:

BUYER BEWARE

Since their introduction in the early 1960s, snack bars have become a major product category in the U.S. food market. Americans spend more than one hundred billion dollars annually on snacks overall²—representing a whopping 51 percent of all food sales—and about a fifth of that (twenty billion dollars) goes to snack bars.³

Many Americans now consume bars not just as snacks, but as partial or full replacements for traditional meals.² Unfortunately, snack bars

Snack bars are one of the most misleading products out there in terms of health claims.

Pea protein isolate is a denatured protein powder made “by the processes of isolation, homogenization, flash evaporation, sterilization and spray-drying”—three separate applications of high temperature.

are, in my opinion, one of the most misleading products out there in terms of health claims. Most people assume bars are a relatively healthy snack option, adopting a kind of “Hey, at least it isn’t McDonald’s!” attitude. But when you begin to examine the ingredients, you quickly realize that most bars are full of low-quality fillers—pea and soy protein, rice syrup and so much else. Finding bars that are in the range of “decent to good” is a tough proposition.

Take the bars made by “Wild Protein.” Although their super-slick marketing suggests something that might contain elk or venison, the bars contain no meat; instead, their first ingredient is industrially produced and processed soy. If you keep going past the “soy crisp” (soy protein isolate, cocoa and tapioca starch), you will also find they contain an array of other low-quality, processed ingredients—especially sweeteners.

For example, the chocolate-flavored bar includes: dates; maltitol (an artificial sweetener associated with gastrointestinal issues such as diarrhea, flatulence and cramping);⁴ whey protein (whey protein concentrate and soy lecithin); chocolate made from cocoa paste, maltitol (again), polydextrose (a newfangled synthetic fiber additive used to “dress up junk food as health food”);⁵ soy lecithin (again), and polyricinoleate polyglycerol (an emulsifier that allows chocolate manufacturers to use less cocoa butter and lower their costs); the chlorine-containing artificial sweetener sucralose (discovered through the development of an insecticide);⁶ peanut butter (peanuts); and artificial flavor.

In addition, some of Wild Protein’s bars, marketed with the extra descriptor of “plant-based,” contain pea protein isolate, a denatured protein powder made “by the processes of isolation, homogenization, flash evaporation, sterilization and spray-drying”—three separate applications of high temperature. (See Sally

Fallon Morell’s article titled “The Problem with Protein Powders”⁷ for more information about the problems with soy, pea, whey and other plant protein “isolates” and “concentrates.”)

Soy and similar monocrops are indeed common in the snack bar category, and in snack foods more generally. While many companies claim their soy is non-GMO, both the soy and peanut butter are unlikely to be organic, and thus will contain high levels of glyphosate and other industrial agricultural chemicals.

What about “Built Bars,” currently all the rage among YouTubers? Although the protein-to-carb ratio is better, the protein is from conventional, highly processed dairy (whey protein), and again, many other ingredients are suspect, such as the sugar alcohol erythritol. Although often billed as “healthy,” erythritol is usually made from GMO-derived cornstarch—in other words, it is an “ultra-processed food” and “invisible GMO ingredient” that is “very far from a natural sweetening agent.”⁸

Shanti bars, which boast of containing high amounts of plant-based protein, depend on another common low-quality ingredient—rice. Their protein blend includes organic brown rice, sunflower protein, and further down. . . brown rice syrup. And further down again. . . rice milk. In light of rice’s affinity for arsenic—an affinity that pertains, as I have written for years,⁹ to organic and non-organic rice alike—this is not a promising ingredient list. (Note: When preparing rice at home, soaking it before cooking will help reduce arsenic levels.¹⁰)

I could continue, giving breakdowns of other options like KiZE bars or ZENB Bites or dozens of other options—but none really make the cut. Some are not terrible, but in general, you are not likely to find organic, properly prepared and unprocessed ingredients inside the package.

For bars that contain nuts, note that even

INGREDIENTS TO AVOID

SOY: Soy protein, soy isolate, soy crisp, etc.

RICE: Rice protein, rice syrup, rice crisp, etc.

PEA: Pea protein isolate or other processed forms of peas

ISOLATES: Isolates of any kind, including whey

LARGE AMOUNTS OF SUGAR ALCOHOLS: Xylitol, erythritol, manitol and other low-quality sweeteners

“good” bars will, at best, roast the nuts rather than use nuts that have been properly soaked and dehydrated. One exception to this rule is the Go Raw brand, which soaks and dehydrates all nuts, seeds and similar items and also contains all or almost all organic ingredients. My kids enjoy Go Raw’s apple-cinnamon sprouted granola (with sprouted sunflower, sesame and hemp seeds and sprouted buckwheat groats) with raw milk or raw milk yogurt.

Just because a company makes one bar that has “better” to “good” ingredients, don’t assume that all of the company’s products are similarly acceptable! Similarly, just because a bar or other snack product is labeled “keto”—tapping into the resurgence of consumer interest in keto and low-carb options—doesn’t mean it is made with quality ingredients. For example, one “keto-friendly” brand with the tag line “junk-free” offers a brownie mix with erythritol as its second ingredient! (Pea protein powder is fifth.) Although the erythritol is labeled as “organic,” it is neither a natural nor traditional sweetener and certainly shouldn’t be a major component of a “healthy” or “junk-free” product.

FRUIT AND VEGETABLE SNACKS

Dried fruits and certain dried vegetables can make solid snack options or additions when fresh versions are unavailable. However, the problem with dried options is that many contain added sugars, low-quality oils or both. For instance, a few months ago at Costco, when pressed for time, I grabbed a bag of dried organic blueberries without reading the label.

Once at home, I was amazed at how oily the blueberries were, and when I looked over the ingredients, I was shocked by how much extra junk was included with the fruit. It was a reminder—you can never be too careful about checking ingredients, even when a product is “certified organic.”

Generally, dried fruits such as dates, figs and apricots are available in organic versions with no added sugars or other ingredients. Although we do purchase good-quality frozen organic fruits and berries for snacks (checking the labels to make sure nothing is added!), we also make sure to freeze locally available fruits and berries, when in season, for consumption during the winter.

In additional good news, freeze-dried fruits and vegetables are becoming more widely available. Freeze-dried fruit, for example, makes a great addition to yogurt. Freeze-drying has a number of benefits over dehydrating; it generally preserves more nutrients and, if the items are properly packaged and sealed, renders them incredibly shelf-stable. The major brand we often use is Natierra, which offers an array of freeze-dried fruit and vegetable options. Generally speaking, the only freeze-dried item we have found to be inconsistent in quality are their blueberries! Another small drawback is that some freeze-dried fruit items—like blueberries—are quite messy and staining. They don’t always make the best car food for young children, unless you want them looking like a Smurf or Oompa-Loompa at the end of the ride!

In the land of vegetable chips, there is more

Freeze-drying has a number of benefits over dehydrating; it generally preserves more nutrients and, if the items are properly packaged and sealed, renders them incredibly shelf-stable.

CREATING YOUR OWN SNACKS

Here are some of the most popular snacks in our household:

HOMEMADE CHICKEN NUGGETS: These freeze well, and the kids enjoy them straight out of the freezer or warmed up. They also travel well.

SOURDOUGH SPELT MUFFINS AND BREADS: We make an assortment of sourdough spelt muffins and breads. Banana, blueberry, zucchini—the kids enjoy them all. These also freeze well, so we often make a double or triple batch to have extras stocked in the freezer for busier times.

SOURDOUGH PANCAKES AND WAFFLES: Sourdough pancakes and waffles, too, are an easy option for the freezer. These become an unbeatable snack that kids enjoy with just a bit of butter and maple syrup. You can also add fruit, nuts or other ingredients for variety. In addition, these make a great, easy fill-out for an emergency omelet or other quick meal.

EGGS: For growing kids, remember that a few eggs fried in ghee, butter or another good-quality fat can be a hard-to-beat, filling and truly nutrient-dense snack, one that costs a fraction of the price of even the cheapest bars or meat snacks. Eggs are something that even a child of eight or so can easily make for him- or herself.

One tried-and-true and convenient option for growing children and adults alike is cured meats such as salami.

good news. A number of companies have moved away from the corn, canola, sunflower and safflower oils that dominate many modern snack foods and offer organic chips made with better quality oils. Honest Chips has items made with both coconut and avocado oils, while Siete brand uses avocado oil.

MAKE YOUR OWN

When it comes to meat and protein snacks, there are many homemade possibilities. One tried-and-true and convenient option for growing children and adults alike is cured meats such as salami. Sourdough crackers with pastured, raw milk cheese or raw butter also make a great snack. Although it is certainly doable to make homemade crackers, good-quality sourdough crackers such as those made by Jovial are now also widely available.

In addition, we will often cook up large batches of meatballs, which make great snacks for the kids, along with homemade chicken nuggets. Both freeze well, both are tasty straight from the fridge, and both are a fraction of the cost of store-bought meat snacks. Both also travel well in small insulated lunch bags or pouches with a small ice pack when they are needed on the road or on the go.

In the snack bar category, given that there are few truly good store-bought choices, one option is to rely on crispy nuts and organic dried fruit, which are a fraction of the cost of most bars and just as portable. Alternatively, if you have a good blender or food processor, you can take crispy nuts, dried fruit, coconut oil and other ingredients and make your own bars. We have done this many times with great results. Sourdough muffins with added organic fruit or nuts are another nourishing and less expensive option.

Another great “to go” option are yogurt-based smoothies. We love to make smoothies with our own yogurt (made from our local grass-fed raw milk), a mixture of frozen organic fruit and some added grass-fed collagen or gelatin. Blended to your preferred consistency, you can even freeze smoothies (be sure to use jars that will not break and leave enough head space!). We have often made a dozen smoothies like this to use when traveling, going on hikes or

whenever we need an easy, on-the-go snack. Smoothies can also help keep other foods cold, slowly thawing until needed later in the day.

No matter which snack options you go with, it is important to realize that store-bought convenience foods are generally quite costly per ounce. Most good-quality meat snacks, for example, cost about \$1.50 to \$2 per ounce. And what about bars? They generally run \$1.00–\$2.50 per ounce. That makes most convenience foods around \$24–\$32 per pound!

Although our household does take advantage of better-quality store-bought snacks on occasion, this is why we still try to keep a wide variety of good homemade options on hand, both fresh and frozen. ☺☺

John Moody is a Kentucky farmer, researcher and author. His most recent books, The Elderberry Book and Winning the War Against Weeds, are available at johnwmoody.com.

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Wise Traditions Podcast Interviews

INTERVIEW WITH JAMES BARRY

EATING ORGAN MEATS

HILDA LABRADA GORE: Why should we eat liver and other organ meats? Why bother? They can taste funky. Are they as nutrient-rich as we have been told? If we decide to go for it, what's the best approach to adding them to the diet? Our guest, James Barry, has had an interesting career of over sixteen years in the culinary field. After starting out as a private chef, he launched a high-quality food delivery company in the Los Angeles area, but he's mostly known as the man behind Pluck, an organ-based all-purpose seasoning. James provides some of the history of organ meat consumption, explaining where we have been and why we got away from it all in the first place. He also explains why organ meats are Mother Nature's multivitamin and shares how to ease into eating them, offering suggestions for adults and kids alike. Finally, he provides specific information about the best ratio of liver to muscle meats and lists a number of nutrient-dense organs that we may be unfamiliar with.

JAMES BARRY: I am super excited to be on this show specifically because the Weston A. Price Foundation has been huge in my life. After I started cooking, I went to culinary school, where I learned about *Nourishing Traditions* by Sally Fallon. We learned about a lot of books, but when I got this one, I thought, "This speaks to me." Later, I went to my first Weston A. Price Foundation conference. So, this organization and book have been a huge part of my food—and life—paradigm. I would say *Nourishing Traditions* is the biggest influencer of my philosophy of food. Admittedly, it's not the easiest read because it's dense, but you can't deny how powerful the information is.

HG: Yes, it's not just a cookbook.

JB: It is its own school and program. Hands down, it has been the most influential food paradigm of my career, from the soaking of grains,

seeds and nuts to the culturing, to the ancestral foods. Diets and trends come and go, but the *Nourishing Traditions* paradigm has not left. It has been the mainstay. It sticks.

HG: It has stood the test of time. That's why I love it as well. The Foundation is big on eating nose to tail with a special emphasis on organ meats because they are nutrient-dense. What's funny to me is one of the terms for organ meats is "offal." That is not a happy-sounding word to me.

JB: It refers to the parts that "fall off" when they are butchering the animal. Both of us can agree that offal is anything but "awful." It's the most nutrient-dense part of the animal—it's Mother Nature's multivitamin and they are high in protein as well. They are incredible. I think that if people aren't eating offal, it's because they don't have access to it, don't know how to cook it or have the perception of it not tasting good.

When we think about organ meats, a lot of people think of the little organs, but let me encapsulate a little bit of what offal technically refers to. First, there are the organ meats we all know about: liver, kidney, heart, spleen, testicles, ovaries and brain. We also talk about the sweetbreads, which are the thymus and pancreas. Then there's bone marrow. People don't include the bone when they talk about offal, but they do include bone marrow, tongue, lips, ears, skin, tail and blood, which we see a lot in sausages and blood pudding. Next, there's tripe, which is the stomach lining, featured in *menudo*, a Mexican dish made with beef stomach. And there are the feet, which is another cultural food.

It's sad to me that almost every other culture has got some organ meat term or food in its lexicon, but we don't really have much in the U.S. There are not many foods or recipes that constitute an American organ diet. From my research, chitlins, which are the pig intestines,



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are the closest. They came about because that's what slave owners gave to the slaves. Owners were giving slaves the intestines and keeping all the pig meat for themselves, so it became a custom food for those people.

HG: What about scrapple? It's a regional dish made with all the leftover parts of the pig. It's akin to sausage. Sally talks about folks in Maryland eating scrapple. You can get scrapple at the grocery store. Generally speaking, though, you are right. Our diet is woefully low in these very

nutrient-dense cuts. You I wonder if it's almost a classist thing because the rich slave owners may have thought, "These cuts are beneath us," not realizing that what they were saying was "beneath" them was the best part of the animal.

JB: That's definitely been there historically. In World War II, however, they were worried about there being a meat shortage, so they set about trying to educate people on organ meats. That's even when they came up with other names for it. It was known as offal but they started calling it "variety meats" and "organ meats" because they were trying to change people's perspective so that they would not see these cuts as some awful-tasting thing or cheaper meat or product. The education worked,



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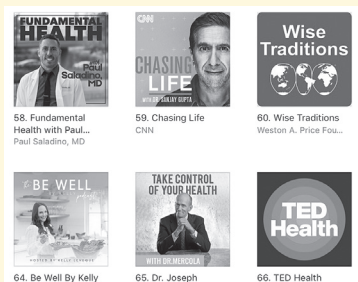
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by Tigerboii – Jun 13, 2021

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

Karen Downey ★★★★★
by KarenAnn1968 – Jun 9, 2021

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

and after World War II, people started eating organ meats again. What originally happened that made them not eat them? I don't know.

HG: I once interviewed somebody who said it became difficult with urbanization. Everyone started living in cities and didn't have access to the whole animal, and transport of those cuts became difficult. They didn't have refrigerated train cars yet, or maybe there was only room for so much, so they left behind some cuts.

I want to ask you about nutrient density, which we have mentioned several times already. What is in these organ meats that makes them so good for us? Can you get specific about the vitamins and minerals they contain?

JB: A better question would be, "What's not in them?" because there's so much. You have a very high concentration of vitamin A. You have all the B vitamins—not just a couple but all of them, and particularly B₁₂. You have vitamins C, D, E and K. You then have essential minerals like iron, calcium, a good amount of copper, magnesium, selenium, phosphorus, potassium and zinc. That's why I call them Mother Nature's multivitamin. We associate organ meats with women getting pregnant. If you are planning to get pregnant or are pregnant, they always say, "Eat your organ meats." That's the one subset of people who are encouraged to eat organ meats. But I'm here to say, "We are a nutrient-deficient society. We should all be eating organ meats."

HG: Honestly, I have never heard that phrase, "When you are pregnant, eat organ meats." I don't think the twenty-somethings or any women in their childbearing years are hearing that anymore, which is unfortunate. If you are in that age bracket and you are reading this, we have some ideas for you!

James, I'm hoping to pick your brain to find out ways in which we can introduce more of these items into our diet. That was the brainchild and the whole idea behind Pluck, wasn't it?

JB: I created Pluck, an organ-based seasoning, because I thought, "If people aren't eating organ meats, maybe it is because they don't have access to them, don't know how to cook

with them, or have this incorrect perception of offal not tasting good." My thought was, "If I can make it taste good and easy to use, there's no learning curve around how to cook with it." That's where Pluck came from.

It's freeze-dried powdered organs—liver, kidney, heart, spleen and pancreas—and then I combine them with organic herbs and spices, which offsets that "organ-y" taste if you are someone who doesn't jive with that. What you get is something that's savory umami. It's good. It goes with everything. You have tried it. How would you describe it?

HG: We love it. We put it all over our popcorn and meat. "Umami" is one way to describe it, and it also adds a little tangy spice. Being Latina, our family enjoys that flavor set and the combination you have made. I know you have a variety of flavors that you are developing and making accessible to people. It's tremendous. I do have a question though. Pluck is no substitute for the real deal, right? What we want is for people to get more organ meats as a bigger percentage of their diet.

JB: Eating the actual organs is, hands down, always going to be your best bet because it's 100 percent. My mix is not a 100 percent organ blend, even though I am going to make that available. However, what I like about Pluck is that I use it more often. I may make organs and eat them once a week or once every two weeks—and you get a lot of nutrients from eating them once a week—but with Pluck, I use it all the time. As you mentioned, we use it on popcorn. My kids put it on toast. We put it in almost every meal. It's like I'm getting these small but frequent doses, which makes an accumulative effect. The way I see it, there's room for both.

HG: What organ meat was the first one to grace your table when you started figuring out how much we need them in our diet?

JB: I did not grow up with organ meats, but when we had a whole chicken, there were the chicken gizzards. That was my first introduction to organ meat. Most people will start by eating liver; liver is going to be the first one because

A better question would be, "What's not in [organ meats]?" because there's so much. That's why I call them Mother Nature's multivitamin.

There is a philosophy that whatever organ you are eating, that it is supporting the same organ in your body.

it's the most nutrient-dense of all the organs. It's the powerhouse. Superman has always been seen as the most dominant superhero, and liver is like the Superman of the organs. It's incredibly nutrient-dense. You mentioned that the Weston A. Price Foundation encourages nose-to-tail eating. My whole thing is, let's try to get people to eat organs besides liver, too, because they all have benefits. The heart has coenzyme Q10 (CoQ10). Spleen is high in vitamin C. They all have great absorbable iron. Spleen and kidney also have folate, which is important. They all have folate, but each organ has maybe a little bit more or less than the other.

HG: Can you break down what CoQ10 and folate do for us, so we can understand their benefits?

JB: Folate plays a role in making and repairing DNA and producing red blood cells, which is why it's in a lot of prenatal vitamins. The heart has CoQ10, which is vital for energy production and the prevention of oxidative stress, which we experience every day. It's also key for cardiovascular health, which makes sense.

There is an ancestral concept of supports. For example, the heart supports cardiovascular health. There is a philosophy that whatever organ you are eating, that it is supporting the same organ in your body. If you eat spleen, it supports your spleen. If you eat heart, it supports your heart. That's true when you look at the vitamins that are predominantly in those organs.

The liver, as mentioned, is high in iron but it's also one of the best sources of retinol, which is vitamin A, which supports skin issues. Vitamin A is such a necessity, and we are all deficient. The spleen has vitamin C. Vitamin C in the spleen helps iron to carry the oxygen from the lungs to various parts of the body. Also—and this is cool, particularly with what's going on with Covid—organ meats have some of the highest concentrations of naturally occurring vitamin D of any source.

HG: That should get folks excited about trying them. Where can you get organ meats? I don't see them laid out among the packages of ground beef and hot dogs at my grocery store.

JB: It's challenging. It's funny that you mention hot dogs. They do not contain the organ meats we were talking about, but they do contain a lot of the parts that I mentioned in describing offal—parts like lips and ears. These are probably not the parts of the animals most of us are gravitating toward, but hot dogs contain up to 85 percent of parts that we wouldn't normally embrace. Pick and choose whether you want to eat hot dogs.

HG: Most people think hot dogs are junk food, but the very thing they might be turning their noses up at is something that we might consider taking in more of, especially if it is pasture-raised. I guess that leads us to where we obtain our meats. We get ours from an Amish farm in Pennsylvania or at our farmers market. Talk to us about what you suggest.

JB: Finding a good source is key because the health of the animal is going to equal your health from eating it. I look for that. You mentioned pasture-raised, 100 percent grass-fed cows. You can get organs from other animals as well. Farmers markets are one of the places you can look. There are some online sources. You can look up whether they will ship.

The biggest issue is that not every butcher has a plan for all of the organs. Here in the U.S., it's easy to find liver, kidney and heart. There's tongue and things like that. But getting some of these other things—like the spleen, pancreas, testes and ovaries—is challenging.

You have to find a local butcher, maybe become part of a cowshare because they can't sell the organs on the open market but they can sell them directly to you as long as you are part of the share. I would vote for joining a cowshare. That's going to be your best bet in terms of getting parts of the animal that you normally wouldn't find anywhere else.

HG: Sometimes it takes making an inquiry. We like to make tongue tacos in our house. You have to do this weird peel-y thing after it's slow-cooked, but the meat is good. It holds on to the different flavors of the added spices. The point is, we had to ask at the farmers market whether they sold tongue. At first, I don't think they did,

but then they started bringing it because we were asking for it. He did have a way to get it from the slaughterhouse to us. That was a boon, but you didn't see it lying out there among the bacon and other cuts.

JB: That's a great point. In any situation, when in doubt, ask—because if they realize there's a market for it, they will start making it available.

HG: When you started to introduce liver into your diet. How did you prepare it? Was it pâté?

JB: I was a little intimidated by it because when you buy liver, it's big. You get it frozen. I always felt a little bit of anxiety: "I've got this huge organ that I'm still new at cooking. If I defrost the whole thing, how am I possibly going to use all of it?" That's where my head went. That's where I started to come up with this idea of what are some techniques that people can use to ease into organ meats so that they are not overwhelmed?

One of them is, when you buy a beef liver, leave it frozen. Instead of defrosting the whole thing, grate it into the food while it's frozen. It comes off as little shavings, and those shavings either melt right into a stir-fry, or you can combine them with your ground meat. It's such an easy way to get liver into any food without anyone knowing. You don't defrost it, so it preserves it longer. You keep it in your freezer and keep using a little bit every time you cook.

HG: What percentage do you recommend putting into, say, ground beef if you are going to make a meatloaf or burgers?

JB: I have found that anything up to 25 percent is good. When I say "good," I mean you won't know that it's in there. It doesn't affect the texture or the flavor. When I have tried a mix that was around 30 percent or more, I found that the actual texture of the ground meat was different. If you are new to eating organs, when that difference is present, it makes you go back into your turtle shell a little bit if it's something you are sensitive to. If you are an organ pro, that's not going to affect you.

I recommend when you are easing into organs for the first time to start as you would

with an animal when you are changing its food. Maybe start at first with 5 percent, then move to 10 percent, then 15 percent—just ease into it. I pretty much guarantee as long as you go up to 25 percent, no one is going to know it's in there.

HG: Which organ meats are most like the muscle meats or the easiest to transition to? What about heart? The heart has a very beef-like texture.

JB: You mentioned one of them was tongue as well. The heart and tongue are much more like muscle meat than they are like organs. It makes sense in the form of a tongue because you don't think of that as an organ. It is a muscle underneath that layer that you talked about peeling off. The heart, too, is more of a muscle than an organ. When I'm recommending how to ease into organs, I always recommend chicken hearts as the very first organ to eat because they are mild in taste. The same with beef heart. It's more mild than any of the other organs, but chicken hearts are even milder. It's because they are like a muscle; the texture is so similar to muscle meat. If you chop it up, they probably won't even know. It will feel very familiar to them.

HG: I know in Peru, they have *anticuchos*, which are beef heart kebabs, and I have seen chicken hearts as well.

JB: With Argentinian food, they show up with chicken hearts a lot on kebabs. Chicken hearts take on flavor well. They cook quickly. None of this is thirty-minute preparation. They cook in five minutes. For all those parents who are rushing for food, chicken hearts are easy. I also recommend beef liver. You can slice it thin. We have a recipe on our website (EatPluck.com). You can marinate and dehydrate it and turn it into beef jerky. I was introduced to that by a cookbook called *It Takes Guts*. When I tried it, I was blown away. It was so good. It's such a great alternative to all those sugary, overly sweet beef jerkies out there.

HG: You mentioned feeding your family or the kids. A lot of kids turn up their noses to anything that's not a chicken nugget. How can you get them to eat a chicken heart?

JB: Whenever you are trying to introduce anything to kids, you either add cheese or you coat it in something—fry it or coat it in cheese. Those are the obvious secrets to feeding a picky eater. It's tough. Honestly, that's why I created Pluck. Pluck is a gateway to organ meats. I haven't met a kid yet who doesn't like it. What's cool about it is this speaks to something. I will give you an example. When I first had bone broth and even when I first ate organs, there was something that happened in my body where I visualized it as something curling around this nourishing comfort of warmth in my body. It almost felt like my body was receiving something that had been missing.

I see that happen when kids try Pluck. They can't stop. They keep dipping their fingers. It's almost like when you start eating butter. You can't stop. It's such a fascinating thing. It's a testament that when we get

When we get these very nourishing, traditional foods in our diets, our body remembers and our body knows. It wants more.

these very nourishing, traditional foods in our diets, our body remembers and our body knows. It wants more. It wants to bask in the nourishing glow of that food.

HG: That sounds wonderful. It makes me happy to picture kids dipping their fingers in Pluck or eating chicken hearts when they are coated with something or fried. I saw two kids walk into school. They must have been around eight and six, a brother and sister. The boy was eating a bag of Cheetos and the girl was eating a candy bar. I was saddened. How many of us with the means are still shortchanging our families because we are not willing to dive into something that's a little bit uncomfortable?

JB: I used to be in the teaching field before I went to culinary school. I used to work with kids about their health. I was blown away. Most kids are eating exactly the way that you described. They are eating Flamin' Hot Cheetos—that was the popular brand when I was in these schools—and they are drinking soda. That's their breakfast.

HG: They are acting up in class and the teacher thinks the kid needs to be on meds when actually they are undernourished.

JB: The first thing I always look at is food. At that time, I was trying to educate the kids on what they put in their body. This is a funny and sad story. When I decided to go to culinary school, it was expensive and I didn't have the money. I was planning on going a year before I went. I spent that year trying to raise money to do it. One of the ways I did it—I'm outing myself—I was in the schools as a substitute teacher, and there was nowhere for kids to get water. There were tons of soda machines, but there were no water machines.

I saw a market and I started buying water, freezing it because the kids loved it as ice. I would bring water and sell the water for one dollar a bottle, not expensive. I was using it to slowly build my money to pay for culinary school. How sad and astounding is that? They didn't have water at these public schools. This was when I lived in L.A.

HG: My friend Hilary Boynton, who's known as the Lunch Lady, was in California trying to transform the school lunches because we are all aware of how much nourishment can transform a kid's behavior and health. Dr. Price started a lunch program, too. He started feeding kids, just one good nourishing meal a day in the school. It was a big bowl of soup with meat and organs, with some sourdough bread and butter, and maybe some raw milk. The kids' behavior was transformed by that one bit of nourishment. Giving the kids water, or selling it as the case may be, was certainly preferable to some of the stuff that they have access to.

JB: One thing we want to remember is that the palate changes. It's a living and breathing thing. Initially, your kids may think that they only like these, so you as a parent might think your kid only does this. But you can take steps toward changing and adapting their palate.

One way to do it is to start incorporating organ meats, whether it's Pluck or the shaving of the liver or incorporating them in some other way. The umami flavor of organ meats, which is completely natural, is one of the ways to start changing the palate because umami is the fifth unique taste. What it does is make all the other taste receptors taste better, so it awakens your palate in a sense.

HG: I hear what you are saying about being able to change the way the palate tastes things because it's always astounded me how some kids will say they don't like shrimp because they didn't grow up eating it. It's a foreign taste to them. The kids in Alaska are eating shrimp all the time and they think it is great because they are accustomed to it. Why not do what we can to shape their palates with nutrient-dense, life- and health-saving foods?

JB: They have discovered that the palate starts forming when you are in utero. When the baby is inside the mom, that palate is forming very early. Even then, mom can be thinking that it is a great time to start. Eat a little bit of spicy food to get your kid acclimated to the spiciness. I think that's important. Another thing is eating organ

meats during pregnancy. It's also a good time to start eating cultured vegetables. Incorporate these sour and umami and bitter flavors to start shaping that palate. I have two girls. My wife ate a lot of cultured vegetables while pregnant with the first, but with the other, not as much. And it's so true. We have gotten both our kids on cultured vegetables. We helped ease the second one in, but the older has always been into cultured vegetables.

HG: Start them young. I love it. This has been a great conversation. You have motivated me to include more organ meats in my diet, and I already eat a bunch. I want to close by asking you the question I pose at the end. James, if readers could do one thing to improve their health, what would you recommend that they do?

JB: What I normally recommend is to drink more water or get better sleep. Those are very important toward making good decisions, particularly sleep. If you get good sleep, then you make better decisions.

The support I would also want to give your reader is something that I'm trying to embrace more and more, which is not to wait for the perfect moment. Don't wait until it feels right. Take action now. What happens is a lot of us look for inspiration to then find the motivation to then take action. What I'm suggesting is

take the action, and let the action provide the inspiration, which then provides the motivation. Change the order of those things and you will find, first, there's no perfect moment, and second, it's pretty easy to take action when you are not waiting for something to make it okay. ☺☺

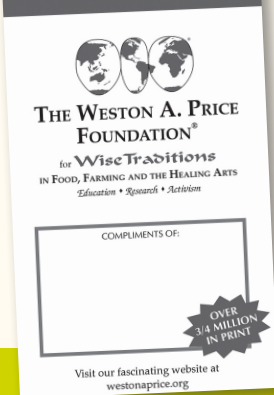
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They have discovered that the palate starts forming when you are in utero.

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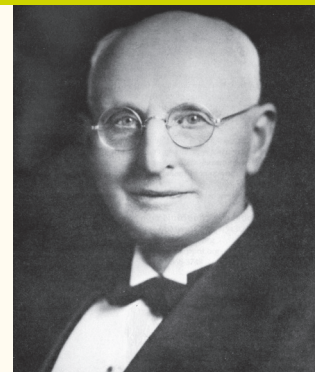
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All Thumbs Book Reviews



Malabar Farm: Louis Bromfield, Friends of the Land, and the Rise of Sustainable Agriculture
By Anneliese Abbott
Kent State University Press

The Malabar Farm was the Polyface Farm of its day, and Louis Bromfield was its Joel Salatin. Current University of Wisconsin graduate student Anneliese Abbott, whose fascinating articles about sustainable agriculture have graced the pages of *Wise Traditions* on multiple occasions, compellingly resurrects the forgotten Malabar Farm story for the modern reader. She notes that she wrote the book “so that people can learn from what worked and what didn’t.”

A famous writer and engaging personality, Louis Bromfield purchased the Ohio farm in the 1930s, a time of crisis in American agriculture. Poor farming practices had washed away soil and depressed yields. Photographs of huge erosion gullies seared the national consciousness. Out of the belief that the nation itself was in jeopardy arose the soil conservation movement, and Louis Bromfield found himself at the cutting edge of the crusade.

The farm that Bromfield purchased was weedy, depleted and eroded; through a combination of contour tillage, new types of plows, manuring, grass farming and managed grazing, Bromfield was able to restore fertility, build topsoil and renew the land. The farm was profitable, too, especially the dairy side of the operation. Each year, thousands of visitors came to Malabar Farm from around the world to observe and learn about conservation agriculture, earning Malabar the title of “the most famous farm in the world.” Bromfield’s books on regenerative farming were best sellers.

Why don’t we hear about Malabar Farm today? Although the soil conservation movement led to the creation of the Soil Conservation Service—as part of the U.S. Department of Agriculture (USDA)—in 1935, agricultural history

books published during the Cold War neglected to mention the movement. From the 1960s on, the USDA emphasis was on maximizing production through chemical agriculture, while the environmental movement of the 1970s focused on forests and wildlife rather than farming.

Unfortunately, the Malabar Farm story does not have a happy ending. The price of milk cratered after the Second World War, so Bromfield discontinued the dairy. He continued to raise beef, grains and produce, with a big emphasis on the fact that the produce was grown without pesticides. However, none of Bromfield’s three daughters wanted to continue his work after he died. The farm was sold to a non-profit and eventually ended up as a state park and tourist destination administered by the Ohio Department of Natural Resources (ODNR). Today, the pesticide-free produce production, the restaurant’s emphasis on farm-to-table vegetables and beef, and even the managed grazing have all been discontinued; instead, the ODNR leases the farm out for conventional corn and soy production.

In 1994, the Soil Conservation Service was renamed the National Resources Conservation Service (NRCS), which serves as the interface between farmers and the USDA. Farmers who work with the NRCS are called “cooperators.” Although they still do good work installing dams and barriers to prevent soil erosion, the agency sniffs at the practice of managed grazing or using pigs to create silvopastures, and they never met a chemical they didn’t like.

To me, the lesson from Malabar Farm is the importance of succession planning, as Joel Salatin has emphasized so well. It’s important for a farmer to instill a love for nontoxic regenerative farming in his children from an early age and to pass on the farm to one or more offspring as an economically sustainable enterprise. In my case, since none of my children is interested in taking up the farming life, I have stipulated that

(Continued on page 78.)

Bromfield was able to restore fertility, build topsoil and renew the land. The farm was profitable, too, especially the dairy side of the operation.

All Thumbs Book Reviews

Jabbed: How the Vaccine Industry, Medical Establishment, and Government Stick It to You and Your Family
By Brett Wilcox
Simon & Schuster

Who could have imagined that in order to avoid censorship on social media, millions would have to replace the word “vaccine” with the word “jab” (along with dozens of other words)? Though most, back in 2017 and 2018, could not see such censorship coming, one person who was trying to wake folks up was Brett Wilcox.

Indeed, the first chapter of *Jabbed*, titled “Pharma, Medicine, Government, and the Religion of Vaccinology,” basically encapsulates the two years of madness we have had to live under in much of the world since 2020—a medical tyranny created by the confluence of government power and corporate greed.

Wilcox has had a singular motivation for some time: “I refuse to be complicit with corporations and governments that injure and kill children for the greater good of corporate profits.” However, I don’t think even he could have envisaged the depths that governments and corporations would go to in just a few years, with a new opportunity to sacrifice millions of lives for the sake of the greatest corporate profit-making scheme in the history of the world.

I debated how best to review *Jabbed*. At around three hundred dense pages—with almost one hundred additional pages of footnotes—it is neither a short nor easy read, but not because Wilcox’s writing is poor. On the contrary, he is an excellent researcher and writer. However, between the depth and breadth of the subject matter and the difficulty in not becoming angry and upset during reading (I took frequent breaks), a book like *Jabbed* hits hard and close to home.

The third chapter alone, “Banking on Fear,” is worth the price. If you were confused about the “hows” and “whys” of the last twenty-four

months, this chapter describes the pharma and government playbook in vivid detail. As Wilcox points out, “In reality, the irrational fear necessary to produce vaccine compliance has little if anything to do with legitimate fear of infectious diseases.” After living under two years of ceaseless fear-mongering designed to gain public compliance with a new, ineffective and dangerous vaccine, this chapter is beyond prescient.

If I were to summarize *Jabbed*, I would highlight three major themes. The first involves the collusion of pharma and media. Yes, big pharma is a horrible catastrophe, but without the help of the modern media, pharma’s power over the public would be a fraction of what it now is.

There is a reason that pharma’s research and development (R&D) budget is eclipsed by its spending on advertising and lobbying. You must first sell the disease in order to make “the cure” profitable. There is also a reason big pharma and its government lackeys actively train and shape media reporting on disease, illness and so much more. As Wilcox explains, “Vaccine sociopaths in the Unholy Trinity control both the creation and the dissemination of the vaccine story. . . by and large, the industry manipulates the herd via the pharma-funded mainstream media.”

The second and related major theme involves the collusion of government and big pharma. On the one hand, media sell the fear and cure, while on the other hand, government both subsidizes and shields big pharma. No industry in the history of the world has enjoyed such a privileged and protected position as the modern medical cartel, and the vaccine side of the cartel is the golden calf of the entire crooked religion.

Can you name any other industry that has its own private court system and government-funded compensation pool to pay out damages to a minority of those injured by its products (that is, if the injured succeed in meeting the formidable legal hurdles)?

Can you name any other industry where,



No industry in the history of the world has enjoyed such a privileged and protected position as the modern medical cartel.

All Thumbs Book Reviews

When you ask doctors privately about vaccines, many say they cannot comment on the subject. Why? Because they would lose their licenses.

to attend school or serve in the military or do hundreds of other things, you *had* to use that industry's product—and show proof?

Can you think of any industry that introduces dozens of bills in the U.S. alone to force small children to use its products (often at taxpayer or insurance company expense)?

Or an industry that refuses to sell its products in a given country until that country's government complies with the industry's various demands, including demands to be indemnified against any harm its products may cause to that country's people?

Can you think of any industry (other than tobacco) that has sued to keep its internal safety data hidden from public purview for decades?

And the collusion goes even deeper. Doctors must have a license to practice medicine in the U.S., and the government controls the licensing boards, as does big pharma. A doctor friend just spent much of 2021 under review, threatened with losing his license because he spoke out and chose not to follow the big-pharma-approved treatment approach. As Wilcox relates, when you ask doctors privately about vaccines, many say they cannot comment on the subject. Why? Because they would lose their licenses.

The third theme of *Jabbed* has to do with the suppression of dissenting science and voices by all parties involved in profiting from the vaccine myth. Indeed, a quote sometimes attributed to Voltaire captures a real truth about vaccines and pharma, a truth that the Weston A. Price Foundation and others have experienced first-hand over the past two years: "If you want

to know who controls you, look at who you are not allowed to criticize." The vaccine religion in the U.S. continues to hold sway because dissent is quickly silenced at all levels of the culture.

Are you confused over the kerfuffle about Joe Rogan and why the U.S. surgeon general is calling for his censorship? Rogan is the first public media figure—and currently the biggest media figure in the nation, with a viewership greater than the next six or seven largest media shows *combined*—to allow honest and open discussion about topics like vaccines. He is also the first media person and platform not owned and influenced by big pharma. And that just can't be allowed.

The treasure trove of primary documents cited and quoted in *Jabbed* is both illuminating and infuriating. Again, the book's only drawback is how hard it is to read about such wanton wickedness and those who are profiting from it, including those who are pushing the agenda even if they are little more than pawns.

As we enter year three of the scamdemic, *Jabbed* is a book that we wish had been read by tens of millions of Americans before January 2020 to inoculate them against the fear-mongering, and had been covered and debated by the media instead of suppressed (as any fair debate and discussion of vaccines always is). We wish it had been in the hands of lawmakers and officials at all levels of government as required reading to help insulate them against industry propaganda. Perhaps more people will listen now. Two thumbs up.

Review by John Moody

(Malabar Farm, continued from page 76.)

the farm be sold—hopefully to someone with the same vision—and not be put into a trust or foundation. Foundation boards are notoriously conservative and usually not willing to "take the risk" of selling raw dairy products, or do the hard work of managed grazing or raising pesticide-free vegetables.

Worst of all is a situation where the state agriculture department ends up in control, for then your farm will be administered by bureaucrats who use non-dairy creamer and who have no idea why you went to such trouble to move your animals every day.

Review by Sally Fallon Morell

All Thumbs Book Reviews

*A Mother's Garden of Galactagogues:
Growing Milk-Boosting Foods & Herbs
from Around the World*
By Hilary Jacobson
Rosalind Press

For nine or so months you watch and wait. The baby grows. Mama does, too! And then, voila, the little one arrives, and it's time to nurse. But something's wrong. . . . Maternal milk supply issues are not uncommon. At least one in twenty breastfeeding women has issues at some point, and the possible causes are numerous—birth control medicines taken earlier in life, estrogens and other toxins and chemicals, the stresses of modern life (such as noise, light or lack of sleep), dietary deficiencies and more.

What to do? Clearly, as WAPF folks understand, dietary interventions are the most important first-line treatment. Yet even cultures with good diets have used nature to help resolve health issues, including milk supply problems. We particularly enjoyed *A Mother's Garden of Galactagogues* (referring to substances used to increase milk production) because of the depth of historical research it contains. Hilary Jacobson combed through ancient, modern and in-between literature—from medieval, Greco-Roman, Asian, European and other sources—compiling foods used historically and globally to induce or increase lactation.

The book is motivated by her personal experience. While living in Switzerland, Jacobson gave birth to a child and unfortunately had issues with her milk supply. She explains, “I struggled with a low supply with my second son too. But when he was eight weeks old, I happened to order a Swiss soft drink named Rivella at a restaurant. The next time we nursed, he swallowed quickly to keep up with the flow. Then he fell asleep in my arms, beautifully content, a smile on his face.”

After asking herself whether the answer was really so close at hand, she learned that Rivella is made from mineral-rich whey, flavored with herbal extracts. However, though a nurse

and lactation specialist told her it was common knowledge that this was an effective way to help women with milk supply issues, it couldn't be openly recommended. When Jacobson asked why not, this was the reply: “No one will study Rivella or similar things because no one makes a profit if a mother breastfeeds her baby.”

Unlike other books on the topic, *A Mother's Garden* not only covers plants that can help with milk issues but also discusses how to grow and prepare them. The plants covered, as the title indicates, are truly global in scope. The book also shows uses for all plant parts—from flowers to roots, leaves to bark—covering annuals, perennials and everything from trees and shrubs to herbs and plants. Some, like dandelion and purslane, may grow in your yard or be commonly regarded as weeds. Jacobson even mentions our beloved elderberry (actually the elder flower).

When it comes to growing and obtaining, she is careful to mention the importance of doing so organically. She encourages readers to grow the plants themselves, even in small spaces or indoors, using pots, sprouting or microgreens. The last thing a mama wants is to contaminate her milk supply with dangerous chemicals.

The book is well-organized, with easy-to-use appendices, detailed, alphabetical breakdowns of plants and parts, and a simple and enjoyable writing style. “Accessible” is another fitting word for this work—even a novice to herbalism and plant-based medicine can easily use the information without stress or fuss.

We especially appreciated Jacobson's recognition of the fact that the causes of milk supply issues are complex, meaning that no one plant or set of plants will solve this problem for everyone. Depending on the underlying cause(s), some foods and plants will help some women more than others. So, if one approach doesn't help, don't despair. Try another of the recommended ideas or combinations. Overall, *A Mother's Garden* is an easy-to-use reference tool that doesn't stray from its stated task. Two thumbs up.

Review by John and Jessica Moody



Maternal milk supply issues are not uncommon. At least one in twenty breastfeeding women has issues at some point, and the possible causes are numerous.

All Thumbs Book Reviews



New England Soups from the Sea
By Craig Fear
The Countryman Press

The subtitle of this delightful, beautifully illustrated cookbook is “Recipes for chowders, bisques, boils, stews, and classic seafood medleys,” but author, Craig Fear, starts in the right place: with stocks and broths.

To make seafood soups right, you need real dinkum broth, and his foundational chapter on stocks and broths is an inspiration. The author provides detailed instructions for two versions of fish stock as well as lobster and crab stock, mussel broth and not just one but two types of clam broth—one for hard-shell clams and one for soft-shell clams!

The chowder chapter provides a fascinating history of this iconic dish. Fear notes that pre-1800 chowders little resembled the chowder soups of today. They were made by layering salt pork, onions, fish and crackers in cauldrons, often with the addition of herbs and spices, and cooking the mixture over an open flame. Added water or wine helped distribute the heat, but the final dish was more like a stew than a soup.

Today’s chowder requires no more than six ingredients: bacon or salt pork, onions, potatoes, stock or broth, fish or shellfish and milk or

cream—and Fear makes it clear that he prefers cream. There’s no canned cream of mushroom soup in any of his recipes, but only real, nutrient-dense ingredients. The great debate is whether to add tomatoes rather than cream—Fear provides recipes for both versions, with recipes for clam chowder from New England, Rhode Island, Maine, Manhattan and Connecticut, along with a Portuguese version in tribute to the strong Portuguese influence along the New England coast.

Don’t like clams? Then you can choose from chowders made from fish, including salmon, oysters, crab, scallops, squid and lobster. The lobster corn chowder, made with genuine lobster stock, is worth the price of the book.

Other chapters cover brothy soups, bisques, stews and boils. The bisque recipes look amazing. The word bisque may come from the French term *bis cuites*, meaning “twice cooked,” because you cook the shells twice, first by sauteing or roasting them and then by simmering in water with wine and herbs. The final soups are blended and creamy, often with added sherry for a real kick.

This book belongs in the collection of every serious cook. For more recipes from Craig Fear, visit his website at fearlesseating.com

Review by Sally Fallon Morell

BOOK REVIEWS IN *Wise Traditions*

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

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

Tim's DVD Reviews

Planet Lockdown

Edited and directed by James Patrick

Early in 2020, the world descended into panic over a new disease. It appeared that it could be quite severe and deadly, but severe cases were relatively rare. Government and health authorities quickly acted, or overreacted, by locking down the whole planet, demanding we mask up while embarking on crash development of vaccines.

Since then, any question or dissent has been immediately censored, even if you are a qualified medical professional. Any suggestion that cheap, safe drugs or supplements might be better than an experimental gene therapy is out of bounds. We are told this is a health emergency, and failure to comply may result in the death of most of the human race. Even definitions—of “epidemic,” “pandemic,” “vaccination” and “herd immunity”—have changed. Do you see anything wrong with this picture?

Planet Lockdown looks at the details and finds a few problems. One problem is the PCR test. If you have a disease with distinct and consistent symptoms, you really don't need a test. The plague that is supposed to kill us happens to look a lot like the flu or pneumonia in the milder cases and even has a similar death rate. So, do we need a test to know what is going on? It should also go without saying that a test should actually work. There, we have a problem.

The PCR test does not work. Technically, it isn't even a test—it's more of a manufacturing method. The inventor of PCR was Kary Mullis, who died in 2019. This film shows a video clip of Mullis explaining that you can find just about anything in anybody with a PCR “test.” It is no good for diagnosing anything. If you know of a better expert than the inventor of the PCR “test,” let me know. Even the CDC has officially admitted it doesn't work. If you want to argue about that, please explain why the CDC posted a “lab alert” about changes to SARS-CoV-2 testing on its website last July. (See “The Great Virus Debate”

in this issue for troubling information about what the CDC proposes to use instead.)

This is fundamental. The entire Covid panic was based on the PCR test, a test that does not work and is not even a test. You cannot possibly know what is really going on when you have a phony test muddying the waters. This by itself should shut down the show, but it is hard to stop a stampede once you have the herd spooked.

Dr. Maria Van Kerkhove, technical lead on Covid-19 for the World Health Organization (WHO), is shown stating that it is “rare” that asymptomatic individuals transmit disease. That is about as close as any official is going to get to admitting that locking down the general population is a completely useless exercise. We even see a clip of Dr. Anthony Fauci saying asymptomatic carriers have never been the drivers of epidemics. Of course, a few minutes later we see another clip of him saying the opposite. Fauci's truth seems to depend on what day it is.

Besides Mullis, we see many experts making many good points. Experts from all over the world—Catherine Austin Fitts of Solari, Inc.; Wolfgang Wodarg, doctor, former German parliamentarian and former public health official; Dr. Scott Jensen, former Minnesota state senator; Michael Yeadon, former Pfizer chief scientific officer and vice president; Vaclav Klaus, former prime minister and president of the Czech Republic; and Bishop Schneider of Kazakhstan's Roman Catholic Church.

Wait a minute. Klaus and Schneider, what is their expertise? I'm glad you asked because this brings up another critical point made in the film. Isolating our elders and children until they lose the will to live is clearly not about health. Fake tests are not about health. Vaccines with record-high death rates are not about health. So what really, is going on?

Klaus and Schneider have a firsthand acquaintance with communism. Schneider says this is very similar to the Soviet Union. “Hate speech” and “conspiracy theory” are terms that come

The entire Covid panic was based on the PCR test, a test that does not work and is not even a test.

Tim's DVD Reviews

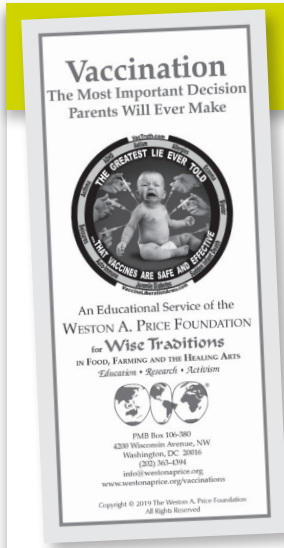
The point is, this looks exactly like a communist takedown to those who have seen it up close and personal.

from communism. Klaus says the communist system wanted to separate people. They didn't call it "social distancing," but it was the same thing. Communism. You remember communism? Some might say this is "just politics." It was "just politics" that promised utopia but slaughtered more millions than any other form of government in history and left the survivors so miserable they envied the dead. Sure, that's "just politics." They should make a bumper sticker: "Genocide. Nothing personal. Just politics."

The point is, this looks exactly like a communist takedown to those who have seen it up close and personal. You can argue about whether it really is or not, but in my little world, if it looks like a duck, and waddles like a duck and quacks like a duck. . . . The uber-rich have made their agenda very clear. "You will own nothing and be happy." If you are not happy, the beatings will continue until morale improves. They are going to "build back better," which means they have to tear down first. Apparently, that includes removing most of that planetary infestation known as *homo sapiens*. Sound good to you?

There are a lot of great quotes here. "Safety is the alibi of tyrants" is a good one. There is a great knee-slapper from Fauci where he says, "We don't want to frighten the American public."

All hope is not lost. This film shows brief clips of massive protests all over the world. Since this film was released, we have seen Canadian truckers paralyze their government and send Trudeau into hiding. They have inspired truckers all over the world, including in the United States, to do the same. Farmers are joining in, too. Millions are waking up. Political leaders and robber barons will not solve the problems they have created. It could well be that truckers, farmers and the grassroots will save the world. It is up to us. My non-compliant thumb is UP. ☹️



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Vaccination Updates

COVID-19 INJECTIONS AND THE GLOBAL CONTROL GRID—JUST SAY NO

By Kendall Nelson, Director, *The Greater Good*

On March 11, 2020, the World Health Organization (WHO) declared a global coronavirus pandemic. By the next month, about half of the world's population was under some sort of lockdown, with governments asking or ordering almost four billion people in more than ninety countries or territories to stay at home.¹ Two years later, many citizens are still locked down, and some have been coerced to take fast-tracked, experimental messenger RNA (mRNA) Covid-19 injections against their will.

While unconstitutional vaccine mandates are implemented, the U.S. Food and Drug Administration (FDA) continues to allow the emergency use authorization (EUA) injections for all Americans ages five and up—despite a mountain of evidence that the injections are unsafe and, in some cases fatal. Over one thousand scientific studies published to date confirm dangers associated with the Covid-19 injections.²

EARLY WARNING SIGNALS

The injections' dangers were readily apparent in Pfizer's clinical trials. Among vaccinated participants, Pfizer's six-month report showed gold-standard, level-one evidence of an increase in illness and death in almost every category, with a 300 percent increase in related adverse events. Seventy-five percent of adverse events were severe enough to interfere with everyday function, and 10 percent were serious enough to prompt a visit to the emergency room or cause long-term side effects.

The FDA granted EUA status to Pfizer's product knowing that the trial design had not adhered to established, high-quality safety protocols. Moreover, when a whistleblower asserted that Pfizer had "falsified data, unblinded patients, employed inadequately trained vaccinators, and was slow to follow up on adverse events reported in Pfizer's pivotal phase III trial,"³ rather than investigate those claims, the

FDA fought in court to conceal Pfizer's pharmacovigilance reports for seventy-five years.⁴ Thankfully, the judge denied the FDA's request and the documents are slowly being released.

Contrary to the FDA's pronouncements, the shots reduce neither severe illness, hospitalization nor death.⁵ The first batch of Pfizer documents reveals that almost thirteen hundred people died during the first ninety days of the clinical trial.⁶ Additionally, the company documented more than ninety-three thousand adverse reactions. Unfortunately, even with more documents in hand, we will never have any meaningful long-term safety data because, after two months, Pfizer unblinded and destroyed its control group by offering placebo recipients the injections.⁵

For many, Pfizer's behavior comes as no surprise. The company's spurious and criminal activities have been going on for years, including lying to get approval for malfunctioning heart valves that killed hundreds of patients worldwide,⁷ conducting clinical trials on African children without their parents' consent (after which some of the children died),⁸ bribing doctors,⁹ suppressing research, manipulating studies, withholding information that its products caused cancer, fraudulent marketing and more. Though Pfizer has paid billions in reparations for its past actions, it is immune from liability for any harm caused by its Covid-19 injections.¹⁰ Meanwhile, Pfizer earned an estimated thirty-four *billion* dollars in Covid vaccine revenue in 2021.¹¹

WHY THE BIG PUSH?

Considering the evidence that the Covid injections are causing widespread harm, one may well question the continued push to "vaccinate" six billion people, including infants. It is also reasonable to query the call for vaccine mandates and passports.

Were Dr. Anthony Fauci and fellow health authorities simply wrong in their approach to the pandemic, making numerous poor choices along the way that "accidentally" intensified the crisis? When officials banned and censored early-intervention treatment protocols and recommended the deadly drug remdesivir¹² and the use of ventilators, were they simply naive? And when they unleashed experimental injections now proven harmful, were they just racing against the clock, hastily skipping steps in order to "save lives"? Or is there more to the story? Is it possible that these actions represent calculated acts of malfeasance?

While it may at first have seemed that health officials were merely inept, it has become increasingly obvious that their efforts were never about a public health response and that the pandemic has functioned as a cover story for something else. As Robert F. Kennedy, Jr. explains in his book, *The Real Anthony Fauci*,¹³ over the past two years, citizens across

Western nations have experienced a rise in totalitarianism, facilitated by mass propaganda and censorship, with liberal democracies effectively collapsing. Writing about measures adopted during Covid, Kennedy says, “The very governmental health regulators, social media eminences, and media companies that idealistic populations relied upon as champions of freedom, health, democracy, civil rights, and evidence-based public policy seemed to collectively pivot in a lockstep assault against free speech and personal freedoms.”

CENTRAL BANKERS BEHIND THE SCENES

In addition to the vehement attack on our health and basic freedoms, why did policymakers pronounce millions of businesses “non-essential” and shut them down? Why was there a push to deny children in-person education? And why have the more than nine hundred thousand scientists and doctors who signed the Great Barrington Declaration¹⁴ been ridiculed and slandered for voicing concerns about the damaging physical and mental health impacts of restrictive policies?

Catherine Austin Fitts, former investment banker and former Assistant Secretary of Housing under the George H.W. Bush administration, has spent decades exposing corruption and fraud within the banking industry and government. As founder of Solari, Inc. and publisher of the Solari Report, her mission is to provide “actionable intelligence” to help people live free and inspired lives. She has also become a hero in the health freedom movement. Fitts’ unique ability to see through and dismantle the official coronavirus story—communicated through governments, industry and the media—and her extensive knowledge of finance make her well-suited to help us understand the deeper motives behind the pandemic.

According to Fitts, the “pandemic” was never about a virus but is “the new euphemism for financial coup and the radical reengineering of global governance,”¹⁵ a calculated plan led by the G7 central bankers. (The G7, or Group of Seven, includes Canada, France, Germany, Italy, Japan, the United Kingdom and the United States.) Contrary to popular belief, it was not the government that shut down the U.S. economy in 2020, but central bankers spearheaded by the privately-owned New York Fed—the largest of the twelve regional banks that make up the privately owned Federal Reserve (“Fed”) system. Among its unique responsibilities, the New York Fed serves as depository for the U.S. government, conducts domestic “open market operations” (buying or selling U.S. Treasury securities), serves as agent for the Exchange Stabilization Fund and has broad latitude to intervene in commodities and foreign exchange markets.¹⁶

On August 22, 2019, Fitts explains, roughly one hundred twenty of the G7’s top global figures in finance gathered in Jackson Hole, Wyoming, and voted to approve a financial plan—the “Going Direct Reset”¹⁷—designed and authored by former central bankers working through the BlackRock Investment Institute.¹⁸

THE LOCKSTEP ASSAULT ON THE UNVACCINATED

Examples of the ramping up of totalitarian controls are on display worldwide. Some countries are continuing to lock down their people, even though more than fifty studies provide empirical evidence that lockdowns are not only ineffective but cause greater harm, including increased mortality.⁶⁷ Others are imposing harsh restrictions, including steep fines, on those who refuse the Covid injections.

AUSTRALIA: As one of the countries implementing the harshest restrictions, Australia is not only locking down its citizens but throwing people into internment camps—without even using a “positive” Covid test as justification.⁶⁸

AUSTRIA: In Europe, Austria locked down the unvaccinated in November 2021. By February 1, while ostensibly lifting the “lockdown of the unvaccinated,”⁶⁹ Austria was launching mandatory Covid vaccination for everyone age eighteen and up; the nation’s draconian enforcement policies include police checks and fines—which can be imposed up to four times a year—of up to three thousand six hundred euros (over four thousand dollars) for those failing to comply.⁷⁰

FRANCE: On January 16, 2022, France passed a law banning all unvaccinated people—including those with negative test results or with proof of recent recovery from Covid—from restaurants, theaters, all domestic flights and some trains.⁷¹ As in Austria, the law allows for random ID checks and tough fines for fake vaccine passes.

GREECE: In Greece, a Covid vaccine mandate is in place for people over age sixty, and older Greeks who remain unvaccinated will face a monthly fine of one hundred euros (about one hundred thirteen dollars).⁷²

VATICAN: Even the Vatican has mandated Covid-19 injections for its employees⁷³ and threatens to fire those who do not comply, apparently not concerned that the shots are derived from aborted human fetal cell lines.⁷⁴

BlackRock, an American multinational investment firm that manages over \$9.5 trillion in assets, assumed unprecedented responsibilities helping the New York Fed implement the Going Direct Reset. One month after the Jackson Hole meeting—on September 17, 2019, well before any hint of a “pandemic”—the sweeping plan for the reengineering of the U.S. monetary system began with the Fed’s implementation of an emergency repo (repurchase agreement) loan bailout program that made “hundreds of billions of dollars a week in loans by ‘going direct’ to the trading houses on Wall Street.”¹⁸

One question Fitts repeatedly asked herself in 2020 was, why would Fed chairman Jerome Powell and his central bank colleagues vote to intentionally put hundreds of millions of people globally out of work? According to the United Nations, in 2020 alone, job losses or reduced working hours cost the world the equivalent of two hundred fifty-five million jobs.¹⁹ As Fitts has noted, academic research from the early 1980s (quoted in a 2020 *New York Post* article “Is unemployment really as deadly as coronavirus?”)²⁰ found that a 1 percent increase in the U.S. unemployment rate was associated with “37,000 deaths [including 20,000 heart attacks], 920 suicides, 650 homicides, 4,000 state mental hospital admissions and 3,300 state prison admissions.” Fitts equates the vote to “go direct” to a declaration of war by central bankers who were cognizant that their economic takedown would kill millions of people. “It was the financial equivalent of dropping a series of nuclear bombs,” she wrote in 2021.¹⁵

THE BIGGEST ASSET TRANSFER EVER

Fitts points out that the takeover of the global economy was facilitated by a “hidden system of finance” that began taking shape at the close of World War II with the seizure of assets from the Axis powers. The subsequent passage of the 1947 National Security Act and the 1949 CIA Act helped create and consolidate the U.S. black budget.²¹

The central bankers’ 2019 decision in Jackson Hole also was made possible by a chain reaction of events that took place in Washington, DC, starting in the late 1990s—when a financial coup d’état began and trillions of dollars started

flowing out of the U.S. government, financed by explosive levels of debt. It was during this time that Fitts realized our government was siphoning money out the back door—and essentially stealing everyone’s retirement. Today, at least twenty-one trillion dollars in “missing money” has been shifted out of the existing system, “much of it into hidden hands, while liabilities are ballooning, with even more being moved onto taxpayers’ balance sheet,” says Fitts.²¹

The financial coup was kickstarted in 1998 when fifty-nine billion dollars went missing from the Department of Housing and Urban Development (HUD), under former HUD Secretary Andrew Cuomo. With Cuomo at the helm, HUD—along with Treasury, the Department of Justice, the Federal Reserve and the New York Fed—engineered the largest housing and mortgage bubble in U.S. history. In 2020, it was again Cuomo, this time as New York governor, Cuomo who led the charge to engineer large numbers of nursing home deaths. The fear created by these deaths helped ensure public compliance with the shutting down of Main Street, distracting citizens from the Fed’s massive money-printing and large corporations’ buying up of Main Street’s assets at bargain prices.¹⁵

As explained by attorney John Titus, who wrote an analysis of the Going Direct Reset for the Solari Report, the “going direct” plan conceived by BlackRock for a supposedly hypothetical “next downturn” represented a massive departure from the Fed’s prior responses to crises—a new strategy designed to get money “directly” into public *and private* hands.¹⁷ The Fed’s unprecedented pandemic “maneuvers” not only expanded its own balance sheet of “reserves” (the electronic money issued by central banks) by over three trillion dollars, but also led to “the parallel, mirror-image creation of more than three trillion dollars in new [retail] bank money.” That money went “to buy low-yielding bonds from the Fed’s billionaire buddies, who then turned around with the proceeds and put them to work in special purpose acquisition companies (SPACs) and high-flying stocks.”

As Fitts and Titus both emphasize, “What is happening is not an economic downturn, but an economic ‘takedown.’” As Titus reiterates, “The popular notion that a virus is the original

Fitts equates the vote to “go direct” to a declaration of war by central bankers who were cognizant that their economic takedown would kill millions of people. “It was the financial equivalent of dropping a series of nuclear bombs.”

force behind the current downturn doesn't stand up to serious scrutiny," not least because the Fed's official monetary response to the pandemic—the “going direct” plan crafted months earlier by BlackRock—“went into effect before there even was a pandemic.”²² The declaration of a pandemic, says Titus, provided the “perfect cover” for the Fed to implement BlackRock's plan: “In a nutshell, the arrival of the 2020 pandemic was about as accidental as an assassination. The pandemic narrative is nothing but a cover story to conceal from the public what in reality is the biggest asset transfer ever.”¹⁷

MARKETING TYRANNY

For those who believe government officials' actions over the past two years have somehow simply been the result of their being misinformed about Covid-19 science, Fitts warns, “Rest assured: they are not misinformed. They are simply marketing the Going Direct Reset.”¹⁵ A prime example of this clever marketing is the “Great Reset” initiative promoted by the World Economic Forum (WEF), designed to popularize some of the radical financial and governance changes currently underway. WEF's roster of members and partners includes some of the world's most recognizable political, economic, cultural and media elites.

Klaus Schwab, WEF founder and executive chairman, claims the Great Reset is a means of addressing the “weaknesses of capitalism.”²³ Fitts counters that what passes for “capitalism” is actually a model reliant on “organized crime financed with taxpayers' money.” The WEF is also marketing its Great Reset as a set of interventions to foster “social justice” and “sustainability.”²³

Ideas behind the Great Reset date back to 1971, when Schwab introduced the concept of “stakeholder capitalism,” arguing that “the management of a modern enterprise must serve not only shareholders but all stakeholders to achieve long-term growth and prosperity.”²⁴ Vague euphemisms like the “build back better” slogan help to hide the real goals of organizations and individuals affiliated with the WEF. Working with strategic partners like BlackRock, those goals are monopoly and control.

In his 2020 book *COVID-19: The Great Reset*, co-authored with Thierry Malleret, Schwab declared that the pandemic represented an “opportunity [that] can be seized,” arguing that “we should take advantage of this unprecedented opportunity to reimagine our world.” What does WEF have in mind? As the two co-authors brazenly noted, European and American history teach us that “acute crises contribute to boosting the power of the state. It's always been the case and there is no reason it should be different with the COVID-19 pandemic.”

In May 2018 and October 2019, the WEF collaborated with the John Hopkins Center for Health Security to conduct the “CLADE X” and “Event 201” simulations of national and international pandemic responses, respectively. The Event 201 exercise predicted “to a tee” the subsequent responses of governments and health authorities to the Covid crisis—the implementation of real-life lockdowns worldwide, the engineered collapse of businesses and industries and the further ramping up of surveillance technologies—and also forecast how the media and the global technocratic class would fall in line and play their part.²⁴

Interestingly, one of Event 201's hosts was Avril Haines, current Director of National Intelligence and former deputy director of the Central Intelligence Agency (CIA). It is important to note intelligence agencies' long-standing involvement in totalitarian takeovers. In a speech in Milan, Italy, Robert F. Kennedy, Jr. warned that the CIA “does coups d'état,” not public health, with involvement in seventy-three coups d'état between 1947 and the year 2000, “most of them against democracies.”²⁵

BUILDING A CONTROL GRID

Fitts' nickname for the elites who run planetary governance is “Mr. Global.” In her view, Mr. Global seeks to preserve secrecy and eliminate political risk through centralized control, facilitated by digital technology and the telecommunications revolution. Early on during the pandemic (May 2020), she wrote, “I believe that Gates and the pharma and biotech industries are literally reaching to create a global control grid by installing digital interface components and hooking us up” to the intelligence agency and Defense Department clouds managed by the likes of Amazon and Microsoft.²⁶

In a comprehensive report published around the same time, titled *The State of Our Currencies*, Fitts hypothesized that the “reset” envisioned by Mr. Global would likely consist of four stages: building out the necessary hardware; building up legal capacity to support central control; concentrating cash flows and assets; and finally, driving the “herd” into the new system.²¹

The hardware necessary to operate a global control grid (Stage One) includes satellites, undersea cables, towers and telecommunications; smartphones, smart homes, smart grids and smart cities; clouds, blockchain, crypto software and exchanges; artificial intelligence (AI) and quantum computing; and related utility capacity. Fitts also notes that infrastructure in space is a particularly critical element for managing telecommunications on the ground, with “control of the population and economy depend[ing] increasingly on the suborbital platform. . . just as it once depended on the global sea lanes.”²¹ Because “[s]atellites provide critical intelligence and military support to make monitoring and enforcement feasible and economical,” Fitts

observes, “it has not been surprising to see the trends toward centralization of the financial system and economy correlate with the build-out of satellite constellations and the orbital platform.” In short, “If data is the new oil, space is the new ocean.”²¹

The creation of legal and financial capacity to support central control (Stage Two)—a critical step in making a global control grid possible—began long before the pandemic, “accomplished through international, national, and local government health agencies and the engineering of special police and enforcement powers.”²¹ For example, vaccine manufacturers enjoy the protection of over a century of legal decisions and laws, including immunity from liability for injuries under the 1986 National Childhood Vaccine Injury Act (NCVIA)²⁷ and, for Covid injections, the Public Readiness and Emergency Preparedness (PREP) Act.²⁸ Describing the 1986 act, Fitts says, “The act made it economically attractive for pharmaceutical companies to engage in large-scale human experimentation with nanotechnology, gene manipulation, heavy metals, and other materials designed to implement transhumanism.”²¹ The 2001 Patriot Act also established unprecedented police powers. Another significant Stage Two step was the adoption in 2018 of the Federal Accounting Standards Advisory Board’s Standard 56 (FASAB 56), which radically reduced transparency of financial and governance systems by asserting that “national security concerns. . . override the need for public financial transparency”—essentially allowing the government to maintain secret books.^{29,30}

A central feature of Stage Three—the concentration of cash flows and assets—has involved throwing governments and businesses around the world into a debt trap, right where Mr. Global wants them. At the country level, Fitts explains, nations that have borrowed in dollars but cannot earn new dollars are left “at the mercy of their dollar creditors.”²¹ At the state and local government levels, while central banks can print money, debt-entrapped state and local governments cannot. Many wonder how the state and local governments that were ordered to shut down their tax bases³¹ during Covid will now fund their expenses.

Another key goal of debt entrapment—applicable to the millions of small businesses, small farms, churches and cultural, sports and civic institutions struggling with increased debt and sudden drops in income as a result of the Covid “takedown”—is “to shift assets out of the old system (at below-market prices) into the new system, where insiders and their allies now own them at low cost.” As Fitts explains, this game between “Insiders and Outsiders” goes something like this:

“The Insiders crash the economy. They declare the Outsiders’ enterprises non-essential. . . Insider enterprises are deemed essential and are allowed to stay open. As the economy collapses, the government offers government subsidy to the unemployed to ‘help them during these hard times.’ Recipients of subsidy are now wholly dependent and must do what they are told Meanwhile, Insiders receive stimulus monies and cheap central banking capital to roll up land, real estate, and businesses that heretofore belonged to Outsiders.”²¹

Within just a few months of the declared pandemic, U.S. billionaires had increased their wealth by an estimated 20 percent—and by August 2021, the wealth of the world’s billionaires had surged by over five trillion dollars, a 68 percent gain.³² Billionaire wealth grew more over seventeen months of the pandemic than in the fifteen years leading up to 2020.

To drive the “herd” into the new system (Stage Four)—a system that amounts to a “digital concentration camp”—central bankers and other globalists must “sell people on a vision of the world where the average person has a much smaller command of resources and assets and is subject to complete central control” via an all-digital financial transaction system, digital identification and tracking using some combination of vaccine passports, digital ID wallets and central bank digital currencies (CBDCs) and/or cryptocurrencies. The goal “is to end currencies as we know them and replace them with an embedded credit card system that can be integrated with various forms of control, potentially including mind control.”²⁶

Central bankers have already indicated, quite openly, that CBDCs will give them the power to take money directly out of an individual’s account. . . or turn off their ability to transact.

This is a very dangerous proposition, and—bearing in mind that currency and financial systems are a subset of governance²¹—one that inevitably leads to the end of individual sovereignty. Central bankers have already indicated, quite openly, that CBDCs will give them the power to take money directly out of an individual’s account (particularly if they do not “behave”) or turn off their ability to transact—with the implication being that central banks can control what people can spend their money on, where they can travel, who they can associate with and much more.³³

VACCINE PASSPORTS AND DIGITAL IDENTITIES

Fitts and others have gone to great lengths to highlight the dangers of “vaccine passports” and their integration into an all-digital financial transaction system. Author and former Democratic political advisor Naomi Wolf bluntly explains that “vaccine passports equal slavery forever,” warning that a vaccine passport platform “is the same platform as a social credit system, like in China that controls eight billion people.”³⁴ The widespread acceptance of vaccine passports, either via a QR code on one’s phone or an embedded chip in one’s body, says Wolf, is likely to spell the end of human liberty.

The vaccine passport agenda is part of a much broader and even more intrusive digital identity agenda.³⁵ In January 2021, for example, Microsoft (in partnership with Oracle, MITRE Corporation and health care companies) announced the launch of SMART health cards through the Vaccination Credential Initiative (VCI), “dedicated to the development of the ‘issuance of verifiable health credentials’ bound to an individual digital identity.”³⁶ For now, VCI’s SMART Health Cards include six variables—name, gender, date of birth, phone number, email address and vaccination status—but the developers intend them eventually to become “all-encompassing universal digital identities that reside within a universal digital wallet.” The ID2020 Alliance³⁷—led by Microsoft, Accenture, IDEO, Gavi and the Rockefeller Foundation—aims to offer a persistent digital identity from birth using cutting-edge biometric technologies and microchip implants.³⁸

Many of the people who have chosen to accept Covid injections and vaccine passports have done so for perceived “convenience,” not realizing that, as Robert F. Kennedy, Jr. told tens of thousands assembled in Washington, DC, in January 2022, “The minute they hand you that vaccine passport, every right that you have is transformed into a privilege contingent upon your obedience to arbitrary government dictates.”³⁹ Kennedy has been warning us since the beginning of the pandemic that globalists will never give back our freedoms willingly—we would need to fight for them.²⁵

Unfortunately, dozens of countries and cities have rolled out vaccine passports, including the twenty-seven member states of the European Union with its EU Digital COVID Certificate (EUDCC).⁴⁰ In the U.S., as of early 2022, fifteen states and territories had issued SMART Health Cards—one of at least seventeen other initiatives focused on development of digital vaccine passports.⁴¹

INTERNET OF THINGS AND THE FINAL INCH

Like vaccine passports, the components of the Internet of Things (IOT)—whether self-driving cars, drone delivery systems or the “Alexa” many people already have in their homes—are marketed as tools for greater “convenience.” But buyer beware: these “things,” as Wikipedia tells us, “are embedded with sensors, processing ability, software and other technologies that connect and exchange data with other devices and systems over the Internet or other communications networks,”⁴² including 5G networks. As Fitts sees it, the IOT is part of the digitalization of life and living systems. Rather than tools of convenience, she warns, they are tools for 24/7 central control and surveillance that ultimately could amount to “electronic prisons that severely restrict and manage access to physical space and transportation.”²¹

Moreover, whereas one’s community, home and car “represent the final mile for the IOT build-out,” Fitts suggests that the globalists’ vision for the “smart grid” is to run “its train tracks all the way into the final inch—not just electromagnetically but physically—meaning, into your body and brain.”²¹ In a 2020 report titled *The Injection Fraud*, Fitts wrote:

“[A] primary goal of this pandemic and future engineered crises—and of central banking powers—is to install and update ‘the software of life’ in our bodies through mandated injections, tests, other nonconsensual procedures, and secret ingredients so that we can be connected to government-funded clouds managed with AI through digital systems.”⁴³

Quantum-dot tattoos,⁴⁴ microchips,⁴⁵ injectable nanotechnology⁴⁶ and brain-machine interface technologies⁴⁷ are all being developed, tested or rolled out, often in conjunction with vaccine delivery, vaccination record-keeping or digital identities. At the end of 2021, for example, the Swedish company Epicenter announced under-the-skin biochip technology to monitor and track vaccine status.⁴⁸

A January 2022 video⁴⁹ that described evidence of self-assembling nano-circuitry in

at least some Pfizer vaccines also pointed out that at a 2018 WEF conference, Pfizer's chief executive officer Albert Bourla expressed enthusiasm for invasive nanotechnology in the form of an FDA-approved "electronic pill" that incorporates a microchip sensor, allowing health authorities to monitor patients' "compliance."⁵⁰ Noting that Pfizer has a large research and development plant in Wuhan, the video also explained that one of the world's leading brain-machine interface experts, American chemist Charles Lieber, was convicted in late 2021 of lying about his collaboration with the Wuhan Institute of Technology. Lieber holds patents for injectable nano-mesh lattices made up of nanoscale wires with "the potential to self-assemble into tiny computer systems. . . capable of controlling human neurology."⁵¹

MAN AND MACHINE

Another Schwab-authored book intended to market the control grid and make it fashionable, *The Fourth Industrial Revolution*, discusses the technological zeitgeist that seeks to fuse "the physical, digital and biological worlds, impacting all disciplines, economies and industries, and even challenging ideas about what it means to be human."⁵² This perspective on the merger of man and machine is shared by Yuval Noah Harari, WEF advisor and author of the book *Sapiens: A Brief History of Humankind*, who says, "Today we have the technology to hack human beings on a massive scale."

Harari hails under-the-skin surveillance as the most important development of the twenty-first century.⁵³ Summarizing his views in the form of a mathematical "equation," Harari has explained that "biological knowledge" multiplied by "computing power" multiplied by "data" equals "the ability to hack humans"—including "hacking" their body, brain and even life. Harari told a lecture audience: "You can know my personality type, my political views, my sexual preferences, my mental weaknesses, my deepest fears and hopes," and enthusiastically added, "A system that understands us better than we understand ourselves can predict our feelings and decisions; can manipulate our feelings and decisions; and can ultimately make decisions for us."⁵³

SpaceX chief engineer and CEO Elon Musk has communicated plans to start implanting his Neuralink chips—called "the Link"—into human beings in 2022, claiming the chips will be able to put humans "fully into virtual reality."⁵⁴ The Link must be inserted by a neurosurgeon-guided robotic system because its threads are too "fine and flexible" for insertion by the human hand.⁵⁵

While all of these marketing efforts cheer developments that aim to connect human brains directly to the cloud for the sake of "data mining" our thoughts and memories, Fitts and other brave souls like Michael Rectenwald—author and chief academic officer for the education platform American Scholars—warn that if successful, these efforts at technical mastery over decision-making will threaten human autonomy and undermine free will. As Rectenwald sees it, the Fourth Industrial Revolution agenda promotes a world in which all information—including genetic information—is shared, and every action, thought and motivation is known, predicted and possibly precluded.²⁴

WHAT WE CAN DO

Make no mistake—the technological developments described in this article are not about health or "convenience." Mr. Global, says Fitts, is intent on implementing nonconsensual transhumanism, literally by building "the train tracks of the smart grid. . . into our bodies and our minds."²⁴³ If Fitts is correct and Mr. Global is able to go the "final inch," we will likely see a return to the most profitable industry in history—human slavery.²¹

Clearly, the "Going Direct Reset" is at full throttle. In their war on human liberty and Western values and culture, global leaders have leveraged the chaos they orchestrated—via lockdowns, social distancing, masking, forced injections and social exclusion of the uninjected—to push their control grid agenda forward and build a world driven by social credit scores where, we are told, we "will own nothing and will be happy."⁵⁶ However, "Mr. Global's values are not our values," Fitts points out, explaining, "If we want to have a human future, we have to own the culture and work to preserve the things that give value above and beyond mere survival."²⁴³

We can also fight back by, as much as possible, withdrawing our support and finances from the Reset agenda—understanding that we face a critical choice between building our own prison or standing on the side of freedom. For example, rather than shop online or patronize the big-box stores that used the lockdown-engineered destruction of small businesses to increase their market share,⁵⁷ find ways to support local farmers and ranchers and strengthen local food systems.

The central bankers may have a potent "secret weapon," namely, "the extraordinary profits to be made—on land and real estate, on data as the new oil, on the reengineering of government credit and cash flows, on lowering the cost of energy with breakthrough energy, and on lowering the cost of labor with robotics and slavery,"²¹ but we can take steps to act and transact without them. "Start a local currency system now," Fitts also suggests.

Fitts notes the importance of learning "how to identify, avoid, and manage weaponized people," and making sure "you do not become one

The most effective long-term solution is mass non-compliance.

of them.”⁷¹ This includes understanding how globalists use divide-and-conquer tactics and “propaganda, entrainment, subliminal programming, and other types of mind control, as well as fake news, fake science, and other forms of disinformation”—and learning to avoid those traps.

The most effective long-term solution is mass noncompliance. The plans of a relative few can only succeed if people go along with them. Rest assured—the tide is turning. People are waking up in droves, and they are taking to the streets by the tens of thousands. If millions of people stand up and refuse to comply with mandates, vaccine passports, QR codes and digital identities, we stand a chance of turning the tide. We can break the spell of fear by recognizing the invisible technologies that seek to control us one person at a time,⁵⁸ turning off mainstream media and supporting—with our time or money—cou-

rageous, high-integrity individuals fighting for the rule of law and freedom.

Piece by piece, the official Covid narrative is collapsing, seemingly forcing some health officials to change their tune. In January 2022, for example, the WHO warned against booster shots,⁵⁹ while the CDC suddenly began discussing natural immunity.⁶⁰ Meanwhile, health authorities admitted that statistics on Covid-19 deaths and hospitalizations were artificially inflated and unreliable.⁶¹ For the time being, some nations also have softened their messaging or policies about Covid injections. For example, Japan affirmed a commitment to voluntary rather than compulsory vaccination and called for an end to discrimination against the unvaccinated,⁶² while the Czech Republic, with a new government in place, became the first EU country to announce that Covid vaccinations will not be mandatory.⁶³ As of this writing, Sweden and

ADVERSE EVENT MAYHEM

As of February 11, 2022, the Vaccine Adverse Event Reporting System (VAERS) had received over one million reports of adverse events (U.S. and non-domestic) following emergency use Covid-19 injections, including almost twenty-four thousand deaths.⁷⁵ However, because only 1 to 10 percent of adverse reactions are ever reported, it is likely that there are hundreds of thousands of deaths we do not know about.⁷⁶

The iceberg of hidden deaths is hinted at in recent data showing a rise in all-cause mortality in 2021 that coincided with the rollout of the injections—a story largely ignored by the mainstream media. In twenty-nine European countries, all-cause mortality in those under sixty-five years of age rose by as much as 50 percent in 2021 compared to 2020.⁷⁷ In the U.S., excess mortality for those between twenty-five and sixty-four years of age went up by approximately 85 percent.⁷⁸

The media and health officials also have barely whispered a word about the development of myocarditis (inflammation of the heart muscle) in healthy teenagers following Covid vaccination. In late 2021, the American Heart Association journal *Circulation* published findings that an astonishing 98 percent of youth less than twenty-one years of age admitted to hospitals with suspected myocarditis had received mRNA Covid injections within the previous thirty days.⁷⁹ A CDC study published around the same time in *JAMA Network* estimated the risk of myocarditis to be one hundred thirty-three times greater for individuals receiving an mRNA injection than for the general population.⁸⁰

Researchers discovered early on that the spike proteins in the Covid injections do not remain in the arm and shoulder but travel throughout the body, wreaking havoc in the ovaries, kidneys, liver, heart and brain.⁸¹ Histopathological analyses of individuals who died after vaccination show “clear evidence of vaccine-induced autoimmune-like pathology in multiple organs” in 93 percent of those examined.⁸¹ In a UK study, authors examined five months of government data that seem to show the “vaccinated” steadily lose “immune system capability” week after week—a deterioration of approximately 5 percent every week.^{82,83}


Adverse events known to be associated with the injections include (but are not limited to) anaphylaxis, autoimmune diseases, Bell’s palsy, cancer, Guillain-Barré syndrome, myocarditis, neurodegenerative diseases, pericarditis, reproductive disorders, vascular disorders (hemorrhaging and blood clots) and death.^{84,85} Recent data also show that Covid injections are causing alarming rates of infertility, miscarriages, birth defects, cancer, neurological damage and much more among our military personnel.^{86,87} In addition, an unprecedented number of professional athletes have collapsed or died from heart attacks, strokes, blood clots and other cardiac events; a worldwide count as of February 10, 2022 listed more than four hundred twenty-eight dead in 2021 and early 2022.⁸⁸

As VAERS numbers continue to rise, many who once believed the injections were safe are now speaking out about their vaccine-related injuries. For example, when a Detroit news station posted a Facebook request asking for people to submit stories about losing a loved one to Covid-19, what they got instead was well over sixty thousand responses from or about people who had suffered heartbreaking injection-related injuries and deaths.⁸⁹

a handful of other European countries, including England, have declared rollbacks of some Covid restrictions.^{64,65}

That said, the push for a global control grid will not be defeated that easily, and we must remain vigilant as central bankers and their marketers move the next cover story—most likely climate change—into place. Already last May, the WEF was signaling that central bankers would be “leading the way” in “incorporating climate change into. . . investment decisions.”⁶⁶ While the simulated “global health crisis” may seem to be over, Fitts cautions, “We are likely to witness a daily clashing of top-down power and bottom-up sensibilities for years to come.”²¹

We are under no obligation to go along with the destruction of our country, our liberty or our Constitution. We need not comply with self-appointed dictators who seek to force human experimentation without informed consent. Together, we can peacefully resist through civil disobedience. We can walk in the footsteps of the truckers who will inevitably land on the right side of history. The American dream does not encompass tyranny.

Most importantly, we can be faithful and courageous. As Fitts has so eloquently stated, “it matters what you dream, what you pray for, and what you think. It also matters where you put your time, attention and money. We are all in the global invention room with the central bankers, and you get a vote—whether you want it or not, and whether the central bankers like it or not.”²¹ 

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Farm and Ranch

CHICKEN TRACTORS 2.0

By Brian Wort

What is a “chicken tractor?” The term conjures an image of a chicken driving around on a miniature tractor, but it really just refers to a movable coop for broiler chickens (chickens raised for meat production). A movable coop for layers is typically called an “eggmobile.”

Although first coined by authors Andy Lee and Patricia Foreman in their book *Chicken Tractor: The Permaculture Guide to Happy Hens and Healthy Soil*,¹ I initially learned of the term “chicken tractor” from Joel Salatin in his book *You Can Farm: The Entrepreneur’s Guide to Start & Succeed in a Farming Enterprise*.² For a deeper dive into meat birds and how to raise them in chicken tractors, Joel’s book *Pastured Poultry Profit\$* goes into greater detail, including providing plans for chicken tractors.³

You Can Farm was my personal bridge from *thinking* about farming to actually *doing* some form of farming. It started with a backyard garden, the garden led to honey bees. . . and then to chickens. Once you get chickens, you’re really into it!

Joel Salatin encourages readers to start with whatever they can do today, however small. *You Can Farm* provides many examples of projects that can be incorporated into one’s farming endeavors, and helps would-be farmers assess which projects are more suitable as a “center-piece” operation as opposed to a supporting project. For example, raw milk artisan cheese is our centerpiece operation here at P.A. Bowen Farmstead, but we also produce pasture-based eggs, chicken, beef and woodlands pork.

TRACTOR TRIAL AND ERROR

At P.A. Bowen Farmstead, we built our first fleet of chicken tractors using Joel’s design (originally designed by his brother for rabbits). Essentially, it is a short box with an open floor, covered in chicken wire and solid tin panels on at least two sides and most of the top, with a hatch door on top for entrance and removal. The water buckets sit on top with a hose to gravity-fill a waterer inside; feed troughs are placed inside on the ground and removed while moving the pen.

These worked fine for the first few years, but we learned a few things about how we

could improve our construction. First, chicken tractors need to be built strong enough to deter predators. They must also withstand rigorous weather conditions, and stand up to being moved twice daily across rough fields—while being light enough to pull easily. We also found

that we liked easier access to the chickens.

These insights led to our first round of improvements. First, we added one-half-inch hardware cloth over the chicken wire all along the sides. Chicken wire on its own is not strong enough to stand up to a persistent fox or dog, and its holes are big enough to allow a raccoon, opossum or cat to reach through and grab your birds.

Second, we added wheels to help ease moving the pens over the rough terrain. There is a chicken tractor dolly available that slips under one end and helps ease pulling from the front, but we wanted to see if we could build this capability into the tractor itself. However, the pens need to be flush with the ground (so the birds don’t

Chicken tractors need to be built strong enough to deter predators. They must also withstand rigorous weather conditions, and stand up to being moved twice daily across rough fields.



Six chicken tractors all in a row.

get out and predators don't get in). We tinkered with fixed wheels, wheels on retractable pivots, different sizes of wheels, different placements on the pen, and so on. We run six tractors of birds on the fields from late spring to early- to mid-fall, so we had a few to play with!

As a third improvement, we reinforced the frame with larger lumber because it was starting to pull apart halfway through the season. We also found that screws hold the wood together better than nails.

The problem we ran into was that all of our improvements added weight to the tractor, making it more difficult to pull, so the next step was to look for other ways to lighten the tractor, such as replacing the metal panels with corrugated plastic. Used yard signs such as old campaign signs from local elections are an excellent free resource that serves this purpose. Some people use aluminum tubing or small-diameter PVC pipe for the tractor frame, which makes a lighter

and easier-to-pull tractor. However, chicken tractors can't be too light, or the wind will lift them up and tip them over.

TIME FOR A DESIGN OVERHAUL

Eventually, the inspiration and real impetus for a complete design overhaul came to me while collecting meat chickens for harvesting. In a Salatin-style tractor, the top hatch means someone has to climb into the pen, crawl through the "schmear" and hand the chickens out the hatch to someone else. This is a messy job. I wanted a chicken tractor that had a real door that we could walk through to feed, water and tend to the birds without being on our hands and knees.

After I spent some time researching coop designs online and perusing the plethora of books on do-it-yourself (DIY) chicken coop designs that have popped up over the last few years, I selected the options I wanted that could be combined into our new tractor design.

The biggest change was in the overall shape. Our current design, which we have used satisfactorily for the last several years, is a "hoop house" structure using cattle panels bent over a wooden frame and a door in front to allow easy access. No more crawling—and a structure that makes it much easier to feed, water and collect chickens.

This design also has better air circulation. A simple tarp bungeed



The new and improved "walk-in" design.



Reinforced sides to keep out predators.



Reinforced corners add strength with minimal weight increase.



Garden-hose handle for easy pulling.

across the top and sides can be configured as needed and provides flexible control for protecting against the elements. The tractor is lighter and easier to pull, and one person can collect the birds on processing day.

DESIGN DETAILS

Our chicken tractor is basically a ten-foot-square frame of two-by-fours, with the left and right boards placed vertically (two-inch sides facing up) and the bottom corners cut to resemble a sled; the front and back boards are attached horizontally (four-inch sides facing up) and flush with the top of the side boards, to allow for clearance while pulling.

Each corner has a small triangle of one-inch board to strengthen the frame. Then, I use two cattle panels attached to the side frame boards, bent over to create the arch and secured with twisted wire (zip-ties are great to attach initially but will break after they become weathered).

A third cattle panel is cut to cover the whole back and front sides. I use two-by-twos to frame the doorway and to build the door.

We cover the entire structure with good-quality, galvanized chicken wire (holes no larger than three-quarter-inch) and then run half-inch hardware cloth around the entire bottom, going two to three feet up the sides.

There is also a two-by-two across the top on the inside to provide more stability. If it is built strongly enough, you can hang feed and water on this, but it is also important to be mindful of not “overbuilding”—you want it to be light enough to pull easily.

We fashioned a pull by attaching a cable or rope to each front corner, run through a section of garden hose for a handle, which makes it easier on the hands.

This tractor has no wheels—just sled action. Though you can certainly add wheels, we have not had much success with keeping the wheels on, and these pens are light enough to pull without wheels. This decision depends somewhat on your terrain.

To cover the top, as mentioned, we use a tarp with bungees; the tarp can then be adjusted as needed for wind, rain and sun.

We find that our ten-by-ten-foot frame will house approximately eighty meat birds comfortably until they get to be about five pounds in size.

WHAT DO THEY EAT?

At P.A. Bowen Farmstead, we use a poultry feed specifically designed for pasture-raised birds by Jeff Mattocks, author of *Feeding Pasture-Raised Poultry* (second edition).⁴ While conventional broilers are bred to thrive on very specific diets, birds on pasture have a different gut ecology that allows them to tolerate more diversity in their diet.

Adult chickens on pasture get a lot of their protein through access to bugs, worms, snakes, mice and anything that crawls or squirms around enough to catch the chickens’ sharp eye. Consequently, the supplemental feed we provide does not have to be as high in protein as the feed for a growing chick in a brooder. We also soak the feed overnight in fresh whey from our cheesemaking, which adds more protein and other nutrients as well as enhancing the flavor.

The three components of the basic feed preparation (which we grind fresh weekly) are as follows:

- One-third organic barley
- One-third organic sorghum seed (replacement for corn)
- One-third organic field peas (replacement for soy)

To this total weight of basic feed, we add:

- 6 percent fish meal
- 4 percent aragonite (calcium source)
- 3 percent Fertrell Poultry NutriBalancer

Similar to lime, aragonite is a calcium carbonate, but the biggest difference is that limestone is rock while aragonite is predigested seashells, which makes the calcium more available to the chicken.

This mixture is soaked overnight in whey before feeding. The acidity of the whey helps neutralize phytic acid and releases more nutrients from the grain. (If you do not have access to fresh whey, use a little organic apple cider vinegar mixed with water.)

For more information about the nutrient needs of pasture-based poultry and how to select the best feed options for your birds, Jeff has a more recent book (released in 2020) *Pastured Poultry: Feeding and Management* (fourth edition).⁵

ENTER THE CHICKENS

How many chickens in a tractor is best? Layers should have at least four square feet of coop space per bird, not including run space (approximately ten to fifteen square feet per bird). However, because meat birds have a shorter existence, most recommendations for meat bird space are one to two square feet per bird, so theoretically a ten-by-ten-foot pen could house up to one hundred birds.

In practice, we find that our ten-by-ten-foot frame will house approximately eighty meat birds comfortably until they get to be about five pounds in size. We keep them in brooders in the barn for the first two to three weeks (depending on weather); then they go out onto the fields in the tractors for the last five to six weeks of grow-out. Fewer birds is probably better if you're going to raise them larger than that, or you could try a twelve-by-twelve base. We have found that the sweet spot in terms of our customers' preference is a meat bird of about four and a half pounds.

Use observation to make adjustments to the number of birds. If they are too crowded, thin them out.


Remember, in our system, the birds are moved to a new ten-by-ten-foot area of fresh grass twice a day, which means they get fresh "space" twice a day. Conventional confinement birds, in contrast, get the same one to two feet of space all day, every day. Ironically, we cannot be Animal Welfare-certified, while a confinement system that has the same two-square foot space per bird—a bird that never even has to be outside—can be certified.

OBSERVE AND CUSTOMIZE

There are a handful of hard-and-fast rules for raising meat birds, but fundamentally, observation is your biggest and best tool for making decisions on how, when and why to make adjustments.

A chicken tractor is fairly inexpensive to build, especially if you are resourceful in finding recycled materials. Chicken tractors can be scaled down for a half dozen backyard chickens, or scaled up for a small com-

mercial operation. I recommend you build one and let that process determine any changes you want to make in the next one. It's an iterative process to get the design (and materials) that works best for you.

It can be helpful to get several books on chickens—each will provide a useful perspective. However, while it's good to have a handful of these resources on hand for information, ultimately, they should only serve as a guide while you customize your own operation. Don't be afraid to think outside the box and come up with a new way. It just needs to work for you. 

Brian Wort is the farm manager at P.A. Bowen Farmstead in Brandywine, Maryland. He has been raising pastured chickens since 2012.

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SHOPPING GUIDE UPDATES

CHEESE

Good: SACH's Paneer sachfoods.com/pages/contact

BUTTER AND GHEE

BEST: Full Moon Ghee (413-695-5968)

SALT AND SPICES

BEST: Pluck organ-based seasoning eatpluck.com

BEST: Ava Jane Kitchen's Colima Sea Salt sealsalt.avajaneskitchen.com

INCORRECT LISTING

911caviar.com is now Markys.com which is listed later in the guide.

REMOVED FROM SHOPPING GUIDE

Buchi Kombucha (now contains added "flavors")

Legislative Updates

FOOD POLICY UNDER COVID

By Judith McGeary, Esq.

The last two years have been dominated by the Covid-19 pandemic and our government's and society's response to it. What has it meant for farming and food safety laws and policies?

There isn't a simple answer. We've seen some new regulatory flexibility, as well as an increased focus on the problems stemming from corporate control of our food system. But many of the changes are still not directed at the real problems, and there are troubling signs on the horizon on animal ID.

TESTER AMENDMENT: GOOD NEWS

Starting with a measure that is nothing but good: the Food & Drug Administration (FDA) chose to apply the Tester Amendment (the qualified exemption) in a surprisingly common-sense way. Under the Tester Amendment, farmers who sell less than half a million dollars of food a year and who sell more than half directly to consumers or local restaurants and retailers ("qualified end users") are exempt from the substantive provisions of the Produce Safety Rule. The cutoff for total sales is adjusted for inflation and determined based on the average sales over the previous three years. For example, the threshold for 2021 is based on the three-year average of sales between 2018 and 2020, with a cut-off of \$571,214.¹ Thanks to this provision, thousands of small, direct-marketing farms have been saved from the expensive and potentially crushing burdens of the Produce Safety Rule.

With the pandemic restrictions, we've seen a significant growth in direct sales, but many farmers also lost their local restaurant buyers and had to start doing more indirect sales, which normally would have resulted in them losing their qualified exemption and potentially being driven out of business by regulatory burdens. But the FDA has provided that any farm that was qualified exempt based on its sales prior to the pandemic will remain exempt so long as its

total sales remain under the threshold amount, regardless of who they sell to, for the duration of the "Covid-19 public health emergency."² For farms with less than three years of sales history, FDA is just looking at the total sales.³ Given the FDA's historical ambivalence, if not outright opposition, to the Tester Amendment, this flexibility is a welcome surprise.

ADDRESSING MEAT SUPPLY PROBLEMS

Once we move past the application of the Tester Amendment, the developments are less clearcut. In January, the administration announced several initiatives intended to address the problems in our meat supply. While people within the local food movement have been aware that the conventional system was fragile, it took the shortages during the pandemic to make the average American aware of the dangers of letting our food supply be controlled by a handful of large companies. After decades of "get big or get out" policies, the federal government is rethinking that approach—although the concepts, assumptions and biases are deeply entrenched and far from being abolished.

The January announcement contained multiple parts. The first part involves grants through the U.S. Department of Agriculture (USDA) for "independent processing plant projects that fill a demonstrated need for a more diversified processing capacity." The agency will also work with lenders to provide advantageous loans for independently-owned food processing and distribution infrastructure. While the agency committed to funding only truly independent operations not connected with "the largest meat and poultry processors," it did not do what many groups had asked—add a condition to the funding that prevents the independent processors who receive funding from later selling out to the big companies. In other words, while these new processors and distributors may provide a

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needed service, they can be co-opted by the large operations in the future.

The administration also announced efforts to “build a pipeline of well-trained workers and support safe workplaces with fair wages.”²⁴ The need for this is two-fold. First, the exploitation of workers in the huge processing plants has been one of the elements helping the meatpackers to maintain their market dominance. Second, a skilled workforce has often been one of the major limiting factors for small processors that are located in rural areas. Unfortunately, the agency didn’t acknowledge that these communities have had their financial and intellectual prosperity drained away by decades of government policies designed to encourage people to move out of agriculture, nor did it commit to changing those policies.

The USDA is also investing tens of millions in technical assistance, research and development to help independent business owners, entrepreneurs, producers and other groups, such as cooperatives and worker associations, create new capacity or expand existing capacity. Finally, the agency has reduced the overtime inspection fees for small and very small processors.

The policy commitments go beyond the USDA as well. The January announcement included a joint effort by USDA and the Department of Justice (DOJ) to address the anti-competitive and unfair tactics used by the meatpackers to dominate the market.

Yet, with all this, the USDA is not doing any examination of how its own regulations put small and very small processors at a disadvantage. In effect, they are giving money and advice to processors to try to overcome the barriers that are in part created by the agency’s regulations. I raised this in two calls with senior USDA officials in December and January. The January call was notable because it was a White House stakeholder call that was focused on the new “whole agency” approach to addressing the meat supply. I pointed out that a “whole agency approach” should also include its regulatory arm, something that apparently had not occurred to them before.

MEATPACKER MERGERS

On another front, both the agencies and the members of Congress are paying more attention to the problems with corporate consolidation and the dominance of international meatpackers in general. In early February, thirteen members of Congress came out against the proposed merger of Sanderson Farms and Wayne Farms. Poultry is already one of the most heavily concentrated industries, with the dominant “Big Four” companies—JBS Foods, Tyson, Perdue, and Sanderson—holding a combined 54 percent of the market. First announced in August 2021, this latest merger would combine the third- and sixth-largest poultry processors in the United States. Sanderson would be sold to Cargill and Continental Grain for over four billion dollars, and then merged with the Continental-owned Wayne.

In a letter to the DOJ, the legislators wrote, “The proposed merger raises significant antitrust concerns in an industry already marked by price fixing, labor violations, and intense consolidation.”²⁵ This letter follows an earlier one from Senator Elizabeth Warren that discussed how “American consumers were hit with disproportionately high prices on poultry while major poultry companies enjoyed record profits, massive stock buybacks, and CEO raises.”

The DOJ has issued what is known as a “second request for information,” which indicates that the agency is taking a closer look at whether the merger may violate antitrust laws. Past mergers have been met with disinterest by the regulators, so this scrutiny on the Sanderson/Wayne merger is a very promising development.

COOL

In a parallel development, grassroots calls for greater transparency in the food system have gained significantly greater bipartisan support despite continued opposition by major meatpackers and their nonprofit mouthpieces. For those who have missed past discussions of Country of Origin Labeling (COOL), you may have noticed that the labels on many foods in the grocery store include what country the food comes from. You can choose to buy tomatoes from Texas or Mexico, and you know whether your apples come from the U.S. or Canada. But that’s not true for beef and pork. COOL has been missing from beef and pork since 2015, when the World Trade Organization claimed that it was a “trade barrier”—and Congress caved in to the international pressure, repealing mandatory COOL on pork and beef.

The lack of mandatory COOL (mCOOL) allows the massive meatpacking companies to import meat from less expensive countries, place a USDA label on it (since USDA supposedly inspects the meat coming in) and mislead consumers into thinking the meat is American-raised.

For people who buy their meat directly from local farmers, this may not seem like a big deal—after all, you know where your meat comes from far better than any label could ever tell you. But it’s still an important issue for everyone: farmers and consumers, conventional and holistic. Imports (grass-fed beef included) often create unfair price pressure and mislead consumers about the real costs of raising food in this country. While many American consumers are willing to pay more to support domestic food production, they simply don’t know what to buy at the stores in order to do so. And the more American ranchers get squeezed in the conventional system, the more we lose vital infrastructure that is critical to rebuilding local and regional food production.

The American Beef Labeling Act of 2021, S.2716, would reinstate mCOOL for beef, so that consumers would know where their beef was born, raised, slaughtered and processed. In an extremely rare show of bipartisan support, ten Senators—five Democrats and five Republicans—have signed on to this bill: Senators John Thune (SD), Jon Tester (MT), Mike Rounds (SD), Cory Booker (NJ), John Hoeven (ND), Ben Ray Lujan (NM), Cynthia Lummis (WY), Martin Heinrich (NM), John Barrasso (WY), and Kirsten Gillibrand (NY).

BAN MEGA MERGERS ACT

In addition, there is greater attention being paid to the broad issue of corporate consolidation. As this article goes to press, Senator Warren is poised to introduce a new bill, to be entitled The Break-Up and Ban Mega Mergers Act, that aims to rein in rampant corporate consolidation. It has three parts:

1. It makes all “mega mergers” illegal. These are deals between parties earning over twenty-five billion dollars annually, or that result in market share of over 33 percent for seller or 25 percent for employers.
2. It overhauls the merger-review process by empowering antitrust agencies to stop the most harmful mergers without court orders, which not only saves litigation costs, but also prevents the review from being limited to questions only about the impact on consumers (for example, it allows mergers to be stopped based on impacts to the producer base and/or workers).
3. It contains a lookback provision which requires the government to review all mega mergers from the past twenty years, which would include such unions as the Monsanto-Bayer merger and several others that have severely affected farmers and food producers of all types.

Even with all the caveats noted so far, these developments are generally positive. Yet even if all these efforts come to fruition, there is a long way to go before the federal government could truly be said to have changed its “get big or get out” policy approach in order to restore a

competitive market in which local farmers face a fair playing field. The pro-big business attitudes permeate every aspect of government policy, resulting in innumerable policies that are driven by the interests of Big Ag even if they appear to be about other topics, such as animal health.

ANIMAL ID

One of the prime examples is mandatory animal ID. While the USDA withdrew plans for mandatory electronic ID back in 2010, the issue has never gone away completely because of the benefits it would create for Big Ag and their global markets. Most recently, the USDA has been addressing an outbreak of high-pathogenic avian influenza. Cases of high-path avian influenza have been reported in ten states in a mix of large-scale commercial flocks, “backyard” flocks and captive wild birds. Back in the mid-2000s, avian influenza cases were used (along with Mad Cow Disease and Foot & Mouth Disease) as one of the reasons that the U.S. supposedly needed to electronically ID and track every livestock and poultry animal in the country under the proposed National Animal Identification System (NAIS). Now, in the wake of Covid and its supposed roots as a virus that was transmitted from animals to humans, the USDA has even more cover to push overreactive measures to this virus. The agency hasn’t announced plans yet, but we are watching this issue very closely.

FARM BILL

Hovering over all these issue is next year’s Farm Bill, which is already the subject of committee hearings in Congress. Will it simply have some increased funding for the few programs that support local foods, or will it include reforms to the numerous provisions that have driven large-scale, consolidated, chemical-dependent, export-focused conventional agriculture? It’s vital that our community be involved in this work to push for the latter result, building a resilient food system now and into the future. ☯

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RAW MILK RISKS FROM A MICROBIOLOGIST'S PERSPECTIVE

By Peg Coleman, MS



The late Dr. Theodore (Ted) Fairbank Beals, MD, made significant contributions to bringing more science into dialogues about raw milk benefits and risks.

Dr. Beals was instrumental in obtaining data through the Freedom of Information Act (FOIA) from U.S. states that monitor microbes in raw milk from farms licensed at the state level. Dr. Beals introduced these FOIA data to readers of this journal before his death last year in 2021.¹

My collaborators and I share the belief articulated by Dr. Beals that policies without a sound basis in scientific evidence cannot promote health and well-being in the populations subject to those policies. Yet, policies around pasteurizing raw milk, both human donor breastmilk and milk from ruminants, are *not* based on 21st-century scientific evidence. This article will introduce readers to highlights from the FOIA data project report and provide information about its application in Microbial Risk Assessment (MRA) (See sidebar, page 103).

HIGHLIGHTS OF THE FOIA DATA AND EXPOSURE ASSESSMENT

The objective of our project was to summarize the data from routine testing for microbial pathogens in fresh unprocessed milk from

licensed farms obtained by FOIA through Dr. Beals as mentioned above. Results from the Microsoft Access database project are summarized below in Table 1 below.²

A more extensive table on pathogen testing results for raw milk was developed from multiple documents, which summarized the data from FOIA as well as data from multiple countries (Canada, Finland, Germany, Poland, U.S., and U.K.). The overall results are shown in Table 2, page 102.³ Note that pathogens were detected in 0.01 percent or fewer of all samples.

Although just knowing data on the occurrence (frequency or rates of pathogen positives) in foods is insufficient to estimate risk, it is reasonable to ask how a food with such extensive recent data from around the world documenting that more than 99 percent of routine samples were undetectable for major foodborne pathogens is an “inherently dangerous food.” From my experience, experts with pro-pasteurization biases provide no recent evidence or analysis that supports this opinion.

GROWTH AND SURVIVAL OF PATHOGENS

Regarding growth and survival of pathogens for exposure assessment, analysts may select growth models that intentionally over-

Policies around pasteurizing raw milk, both human donor breastmilk and milk from ruminants, are not based on 21st-century scientific evidence.

TABLE 1. Results Reported under FOIA on Detection of the Presence of Major Microbial Pathogens in Raw Milk from Licensed Dairy Farms in Four State Sampling Plans.²

STATE	<i>Campylobacter jejuni/coli</i>	<i>E. coli</i> O157:H7/STECs	<i>Listeria monocytogenes</i>	<i>Salmonella</i> spp.
California	0/61	0/61	0/61	0/61
New York	6/783 (1.3%)	0/782	1/781 (0.1%)	0/780
Texas	4/601 (0.7%)	0/596	4/596 (0.7%)	11/606 (1.8%)
Washington	0/497	0/502	0/502	0/494
TOTALS	10/1,942 (0.5%)	0/1,941 (<0.1%)	5/1940 (0.3%)	11/1,941 (0.4%)

Fear and dread of many (or all) microbes as “germs” that will kill us (germophobia) appear to factor strongly into policies requiring pasteurization.

estimate risk, such as using data for optimal growth of pathogens in pure culture broth.

However, a recent pilot study conducted by a certified laboratory⁴ and funded by the Raw Milk Institute (RAWMI) documented the inability of the major bacterial pathogens to grow in raw milk for a week of storage at the temperature that U.S. regulatory agencies recommend for refrigerated foods: 4.4 °C (40°F).⁵

20TH vs 21ST-CENTURY SCIENCE

Many 21st-century studies of the microbiota of milk^{3,6} are inconsistent with beliefs based on 20th century science. Certainly, 20th-century science, opinions and beliefs selected by Food Standards Australia New Zealand (FSANZ)⁷ in 2009 swayed the Toronto judge in the recent decision maintaining Canada’s prohibition on access to raw milk.⁸ The judge apparently believed the pro-pasteurization argument that milk should be sterile and the microbes present are the result of fecal contamination.

Apparently, the Toronto judge relied on an outdated quantitative method whose models simulated not data from sound scientific studies, but a series of worst-case assumptions, extrapolations and opinions that intentionally overestimated risk and underestimated uncertainty. Further, the judge and others mistakenly assumed that evidence from outbreaks was sufficient to estimate risk, while evidence from predictive microbiology was excluded, dismissed or ignored.

Contrary to FSANZ’s view, pathogens in feces are *not* predictive of pathogen presence or levels in raw milk. My recommendations to FSANZ from a technical review⁹ included abandoning its outdated views on fecal contamination for raw milk and conducting a reassessment of their 2009 simulations using recent evidence for benefits and risks.

I am not the only scientist to question the

assumptions and outputs of the 2009 FSANZ simulations. The European Food Safety Authority (EFSA)¹⁰ also considered the FSANZ 2009 report and peer-reviewed publications on more recent risk assessments for raw milk. EFSA concluded that risks for raw milk consumers can be mitigated and reduced significantly by controlling temperature, limiting shelf life and engaging consumer compliance with controls (that is, maintaining proper refrigeration temperatures for raw milk).

Further, EFSA concluded that many potential pathogens are *not* main hazards to consumers in the European Union including *Listeria monocytogenes* and *Staphylococcus aureus*.

Those familiar with New York state regulations for raw milk monitoring may be puzzled about the EFSA determination that these two pathogens are *not* considered main hazards to raw milk consumers. In fact, farmers who pay the licensing fee in New York state are paying for routine testing for two pathogens *never* linked to an outbreak associated with raw milk in the state, based on data obtained from the Centers for Disease Control (CDC).

The FSANZ modeled or simulated potential risk based on a series of intentionally conservative (biased) assumptions and indirect or extrapolated data that have not been validated then or since. FSANZ seems to have selected assumptions, opinions and extrapolations that exaggerated risks and underestimated uncertainties, consistent with their pre-conceived pro-pasteurization bias articulated throughout the report.

The FSANZ simulations were not soundly based on science, nor were alternative assumptions tested to increase transparency. In short, FSANZ did not comply with principles and guidelines stipulated from international consensus.¹¹ My peer review of the FSANZ report,⁹ undertaken twelve years after its release,

TABLE 2. Recent Results on Pathogen-Positive Rates in Raw Milk Reported in Peer-Reviewed Studies and Recent FOIA Data.³

COUNTRY	<i>Campylobacter jejuni/coli</i>	<i>E. coli</i> O157:H7/STECs	<i>Listeria monocytogenes</i>	<i>Salmonella spp.</i>
Canada, Finland, Germany, Poland, U.S., U.K.	93/9,740 (0.01%)	26/10,934 (<0.01%)	40/9,118 (<0.01%)	14/7,976 (0.01%)

identified many relevant studies available before release of the report that were intentionally or inadvertently excluded by FSANZ. I strongly recommended that FSANZ update the assessment and incorporate scientific data from technological advances of the last decade to improve the credibility of the assessment.⁹

Fear and dread of many (or all) microbes as “germs” that will kill us (germophobia) appear to factor strongly into policies requiring pasteurization and regulations on the presence of potential pathogens, not their levels or their risk for causing illness. The fear of microbes as “germs” appears to be entrenched even among well-meaning scientists and regulators in misconceptions of 20th-century science, and wall them off from any consideration of the tremendous advances in knowledge about

the microbiota of milk, particularly the rich body of evidence for both benefits and risks of raw milk from both humans⁶ and cows.³ At present, the pasteurization and zero-tolerance policies for potential pathogens in raw milk appear inconsistent with the available evidence and the state of the science in the 21st century.

FUTURE FOR EVIDENCE-BASED POLICIES ON RAW AND PASTEURIZED MILK

Readers of *Wise Traditions* may be aware that many factors influence what is published and what is rejected about science and its applications in risk assessment. According to a recent report by the National Science and Technology Council,¹² novel scientific discoveries that challenge established dogmas may be suppressed, manipulated and inappropriately influenced by political pressures and interference to distort outcomes to maintain the status quo or meet preferred policy objectives or decisions. To quote from this report, scientific integrity can be impeded by “mischaracterizing, fabricating, removing, or disregarding relevant scientific information.” Undoubtedly, there is great need for developing or

MICROBIAL RISK ASSESSMENT

Microbial or Microbiological Risk Assessment (MRA) is a rigorous interdisciplinary process organized around a consensus framework ratified in 1999 by the one hundred sixty-three member countries of the Codex Alimentarius Commission.^{11,20} MRAs may apply qualitative methods and report categories of risk levels (such as negligible, low, moderate, high risk) or quantitative methods (QMRAs) and report risk estimates per year or per serving.

Foodborne risk is estimated by conducting a series of discrete and interconnected technical analyses illustrated in Figure 1.²¹ These involve:

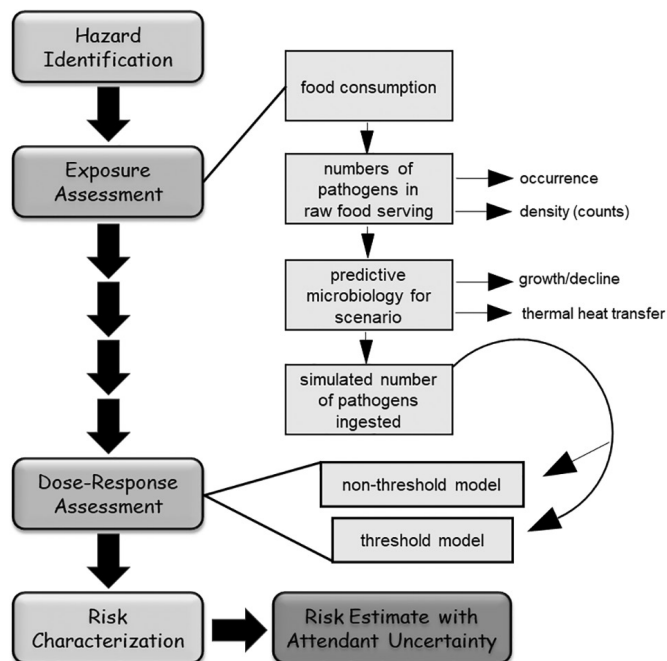
- Hazard Identification
- Exposure Assessment
- Dose-Response Assessment
- Risk Characterization

This article emphasizes Exposure Assessment because the data received through the Freedom of Information Act (FOIA)¹ and the growth study are useful for estimating and assessing the likelihood and magnitude of pathogen exposures to consumers in servings of contaminated foods.

It's important to understand one basic principle of Dose-Response Assessment: as the number of pathogens ingested increases, the frequency (likelihood) and severity of illness increases. “Low levels equal low risk.”²²

Some key general principles of the eleven listed in the 1999 consensus document on principles and guidelines for Microbiological (Microbial) Risk Assessment¹¹ are as follows:

- 1 Microbiological Risk Assessment should be soundly based upon science.
- 5 The conduct of a Microbiological Risk Assessment should be transparent.
- 11 A Microbiological Risk Assessment may need reevaluation, as new relevant information becomes available.



improving evidence-based decisions guided by the best available science and data, recognizing that scientific and technological information and data are central to the development and iterative improvement of sound policies. The report further describes political interference as “inappropriate, scientifically unjustified intervention in the conduct, management, communication, or use of science.”

Just as scientists are not unbiased or immune to economic, political and social pressures, neither are editors and reviewers for scientific journals. A recent *New York Times* article by Gina Kolata and Benjamin Mueller¹³ mentioned an innovative scientific paper “summarily rejected” by two prestigious journals (*Nature* and *Science*) before its eventual acceptance in a “niche publication called *Immunity*.” Similarly, our work on bovine milk was rejected by two scientific journals before acceptance by the Open Access journal *Applied Microbiology*. Certainly, my co-authors and I improved the publication and its communication of the evidence map work in responding to reviewers in three separate peer-review processes. However, I have no doubt that pro-pasteurization biases delayed publication of a comprehensive and simultaneous analysis of benefits and risks for raw milk for more than two years.

If you followed the Toronto case involving raw milk farmer Michael Schmidt, you may have realized that the U.S. government is on record for attempting to interfere with an independent scientific journal that published the 2018 Whitehead and Lake analysis of CDC data on raw and pasteurized milk outbreaks (see Table 3).¹⁴ The U.S. government expert (Mr. John Sheehan, FDA) testified that U.S. government analysts were working to repeat both the Whitehead and Lake analysis (2018)

and a subsequent analysis of the same data by statistician Dr. Nick Azzolina¹⁵ who submitted an affidavit with his analysis of the same CDC dataset. The important point is that for the years 2005-2017, the CDC recorded more illnesses from campylobacter and listeria in pasteurized milk compared to raw. I am collaborating with Nick Azzolina, Joanne Whitehead, Bryony Lake and Michele Stephenson to extend the analysis for more recent outbreak data from the CDC for 2005 to 2019.

In cross-examination, Toronto attorney Ian Blue asked the government official whether the results of their reanalyses would be published if consistent with prior analyses. To date, I am aware of no subsequent publication that either refutes or confirms the findings of Whitehead and Lake or Azzolina. Yet the Toronto judge appears to have succumbed to blatant political intrusion and aligned her decision with the unsupported opinions of the government official over independent statistical analysis of U.S. outbreaks by an accomplished statistician.

Clearly, processes for scientific peer review are subject to political and other pressures. Yet, peer-reviewed studies are crucial to providing credible evidence about raw milk benefits and risks to courts, legislatures and regulatory agencies around the world. Even when some opinions and claims are made that pasteurization is a silver bullet that decreases risk and increases benefits to consumers, peer-reviewed studies with robust statistical analysis are crucial to helping judges, legislators and regulators to properly acknowledge and weigh the evidence.

RECOMMENDED DAILY ALLOWANCES FOR MICROBES?

A question that may be of interest to WAPF members concerns the concept of expanding Recommended Daily Allowances (RDAs) for vitamins to RDAs for microbes.^{16,17} These studies were the subject of my Society for Risk Analysis webinar last year entitled “Resilience and the Human Superorganism: Give Us this Day Our Daily Microbes.”¹⁸ Foods naturally enriched in microbes, including raw milk¹⁹ and fermented foods (such as cheese, kefir, kimchi and kombucha), certainly could contribute to RDAs for microbes.

I strongly believe that questions from raw milk stakeholders are essential for consideration of the evidence (or lack thereof) behind pasteurization policies and monitoring requirements for farms licensed to sell raw milk. Consumers deserve to have a voice in decisions about pasteurizing donor breastmilk and cow milk, particularly to maintain and extend freedom of choice to consumers around the world.

In summary, recent research on the benefits and risks of raw milk³

TABLE 3. CDC Outbreak Data for Two Pathogens.¹⁴

	Campylobacter Outbreaks	Campylobacter Illnesses	Listeria Outbreaks	Listeria Illnesses
RAW MILK	99	1266	1	2
PASTEURIZED MILK	2	1844	1	5

does not support the outdated assumptions that raw milk is inherently dangerous, and that existing hygiene management programs, including Hazard Analysis and Critical Control Points, and Test-and-Hold Programs, cannot ensure a safe, low-risk product for raw milk consumers.



Peg Coleman, MS, is a medical microbiologist, a microbial risk assessor and a fellow of the Society for Risk Analysis (SRA). Her long career as a microbial risk assessor began with the U.S. federal government (USDA/FSIS) and continues as a consultant. Her primary interests are benefit-risk analysis and resilience of human superorganisms, Homo sapiens complete with microbial partners in health.

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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.

GEORGIA – HOUSE BILL 1175 FOR RAW MILK SALES

If there ever was a sign of how much the political and regulatory landscape for raw milk has changed, it is House Bill 1175 (HB 1175), legislation that is currently before the Georgia Senate Agriculture and Consumer Affairs Committee after having passed out of the House by a 100-62 vote. HB 1175 would legalize the licensed sale of raw milk for human consumption direct to consumers—something many bills in state legislatures around the country have proposed in recent years. Georgia law has long allowed the sale of raw milk for pet consumption. What’s different about this bill is that the driving force behind it is Georgia Milk Producers (GMP), marking the first time in memory that a conventional dairy industry group is pushing for legal raw milk sales.

GMP is a producer organization located in Watkinsville, Georgia; its mission is to support, sustain and help the Georgia dairy industry grow. On March 10, 2021, GMP Executive Director Farrah Newberry testified before the Georgia House Committee on Agriculture and Consumer Affairs that GMP had changed its position on raw milk and now supported legalization of sales for human consumption. In her testimony, Newberry disclosed that Georgia had declined from five hundred twenty-five dairies producing raw milk for pasteurization in 2000 to one hundred fourteen in 2021. She noted that Kroger and Publix operate the only processing plants in the state; Georgia has no plants producing either ice cream or cheese. Newberry told the committee that Grade A pasteurized milk was selling for \$2.99 to \$3.99 per gallon in Georgia while raw pet milk was going for \$8 to \$12 per gallon. She concluded her testimony by stating that legal raw milk sales for human consumption would protect the dairy industry in Georgia by having adequate safeguards in law for the production of safe raw milk and would provide market opportunities for smaller Grade A producers.


HB 1175 contains provisions not usually found in raw milk bills, such as clauses governing adding water to the milk, the use of “processed animal waste derivatives used as feed ingredients for any portion of the total ration of the lactating dairy animal,” and the prohibition against “unprocessed poultry litter and unprocessed recycled animal body discharges being fed to lactating dairy animals.” The bill gives broad power to the Georgia commissioner of agriculture to adopt regulations implementing and enforcing the bill’s requirements; the regulations must be of uniform application. The bill is written for Grade A dairies also wanting to sell raw milk for direct consumption; it’s unlikely that micro dairies looking to sell raw milk direct to the final consumer will be able to afford the cost of compliance.

ALASKA - REGULATIONS TO LEGALIZE RAW MILK SALES

Another sign of how much the political and regulatory landscape has changed for raw milk is a proposed regulation the Alaska Department of Environmental Conservation (DEC) issued on January 17 that would legalize sales of raw milk, cheese, butter, cream, yogurt, kefir and ice cream direct to the consumer and at retail stores. Less than a year ago, Governor Mike Dunleavy signed House Bill 22 (HB 22) into law, legislation that legalized the distribution of all raw dairy products through herdshare agreements; DEC opposed the measure when Representative Geran Tarr introduced the bill in 2019. The impetus for the proposed regulation was a survey DEC conducted in August 2021 through the Office of the State Veterinarian to determine the level of interest in raw milk sales; one hundred seventy-nine people responded, with nineteen animal owners interested in selling their animals’ milk and one hundred four consumers interested in purchasing raw milk.

In support of its decision, DEC posted the following statement on its website: “The most critical concern Alaskans hold for the future of food is the security of its food supply;” read a 2014 study on food security commissioned by the Alaska Department of Health and Social Services, with collaboration from the Alaska Food Policy Council. The supply chain disruptions that Alaskans have observed during the Covid-19 pandemic have further highlighted Alaska’s need to enhance the security of its in-state food supply.

Under the proposed regulations, producers are not required to have a permit but must register with DEC and obtain a registration number. DEC would not conduct routine inspections; the department would inspect only in the event a consumer complaint is filed or if either a foodborne illness or an animal health outbreak is suspected. There are container labeling, recordkeeping and physical facility requirements as well as a requirement to keep milk samples taken from each batch for fourteen days after milking; there is no routine testing mandate. The proposed regulation also mandates a “veterinarian-client patient relationship to oversee the health of the herd.”

There are provisions in the proposed regulations that could be amended to help producers. The draft regulation prohibits the sale not only of raw milk but any other raw milk products, including butter, more than four days after the production date. The draft could have amended the state food code to allow retail stores to sell raw milk without having to obtain a variance to do so; under current law, retail stores can sell only Grade A pasteurized milk products (except for raw cheese aged sixty days). It is also unclear how many of the dairies interested in selling raw milk and raw milk products would be able to meet the physical facility requirements in the proposed regulation. 

Healthy Baby Gallery



Baby Laurel was born after an easy six-hour labor, robust and weighing over nine pounds. Her mother consumes a nutrient-rich diet that includes raw milk from her own goats, soy-free eggs and chicken from her family's pasture-based farmette, and lots of vegetables from the family garden. Laurel is the third sibling in her family, and the fifth grandchild of long-time chapter leader and WAPF outreach coordinator, Maureen Diaz.

Glorious cherub Roman loves to eat all his egg yolk, nice and runny! He is gorgeous inside and out—which his mother would say has much to do with his diet.



Max's mother learned about WAPF when she was pregnant with Max. His first foods were egg yolks, liver and chicken broth. After weaning, he started on raw dairy products. He is now seventeen, a six-foot-three-inch high school basketball player and straight-A honor student. Unlike so many of his peers, he has no anxiety, depression or mental health issues. The family is grateful for WAPF's invaluable impact.

The "Butter Baby" grew up! Charlotte Calvert is pictured as a baby on our butter flier. She attended our Winchester event last year and happily volunteered when we needed extra help.



Local Chapters

Local chapters help you find locally-grown organic and biodynamic vegetables, fruits and grains; and milk products, butter, eggs, chicken and meat from pasture-fed animals. They also represent the Weston A. Price Foundation at local fairs and conferences and may host cooking classes, potluck dinners and other activities to help you learn to integrate properly prepared whole foods into your lifestyle. Local chapters may be able to put you in touch with health practitioners who share our philosophy and goals. **IMPORTANT WARNING: This chapter list is meant for individuals to contact a local chapter for food sources and small farms or food producers to contact chapters near them. It is not for use by vendors and marketers. If you use the chapter email addresses to promote a product, even a free product or giveaway, we will not allow your company to advertise in *Wise Traditions* journal or exhibit at our conference.**

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

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CONTRA COSTA TRI-VALLEY, CALIFORNIA

At a chapter meeting hosted by chapter leader Myra Nissen, Martha Apaza took those who attended on an adventure through the Soul of Sourdough.



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DENVER, COLORADO

The Denver chapter had a wonderful program learning all about solar ovens, cooking hard-boiled eggs and yams with the energy of the sun. The chapter and WAPF are attracting increased interest from all over Colorado.

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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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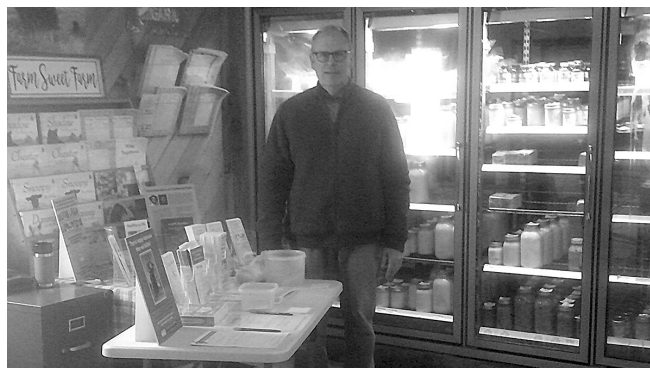
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SAUK COUNTY, WISCONSIN

Rich Braun, chapter leader in this rural Wisconsin county, held a two-day membership drive in January at the “Pantry Store” of Vernon Hershberger’s Grazin’ Acres in Loganville. Vernon and his family have a raw milk dairy and offer a variety of milk products to over three hundred members of their buying club in south-central Wisconsin.



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CHAPTER RESOURCES

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

The Weston A. Price Foundation currently has 403 local chapters:
331 serve the District of Columbia and every state in the U.S. except
Mississippi and 72 serve 26 other countries!

LOCAL CHAPTER CHAT GROUP

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

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SWITZERLAND

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Bern: Judith Mudrak - Wasem rohmilchjudith@gmail.com

UNITED KINGDOM

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Cardiff and South Wales: Lydia Lux Brumalis 07980153008, lydiaandmia@live.co.uk

Cheshire: Carol Dines +1 01270873322 wapf.cheshire@outlook.com & Silvie Hall, facebook.com/WAPF.Cheshire?ref=hl

Derby: Russell Davison +44 7973 123836, russell@davisonproperty.co.uk

Scotland: Central Belt: Urara Donohoe 07812 606 272, uhiroeh@gmx.com

Sussex: Lyann Kemal 0-731-060-1143, lyannkemal@gmail.com

South East Hampshire: Mart Speyers 07939 084888, SouthEastHampshireChapter@hotmail.com & Libby Farmer 07551 908550

Surrey and Hampshire: Diana Boskma +44 1252 510 935 dboskma@gmail.com, facebook.com/groups/336421596766813/

Staffordshire: Cara Tissandier +447968056466 wap.staffs@pm.me, facebook.com/WAP.Staffs

2000 Raw milk available in 27 states

2021 Raw milk available in 44 states

(thanks to the efforts of A Campaign for Real Milk)

Our Goal: Raw milk available in all 50 states! Help us make raw milk sales legal in the remaining 6 states.



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CO

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

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

ID

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

IL

Honeysuckle Farm, Morris, Illinois is a family-owned and operated small-scale, pasture-based farm. We offer pastured eggs, chicken, turkey, and pork, raw honey, syrup, and raw A2 milk. Locally milled non-GMO feed, antibiotic and chemical-free. Order online at honeysucklefarm.net. (574) 323-7919.

IN

DEVON BEEF, 100% grass fed, no antibiotics, no growth hormones. Full cow, 1/2 cow or individual cuts from my ranch in St. Leon, Indiana. Pastured pork, 100% antibiotic free, fed minimum amount of organic corn, 100% outdoors on pasture and woods. All meat USDA inspected. Information on how we raise our beef and pork plus important health links at abundantgreenpastures.com or Mike at (812) 637-3090.

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

Health Hero Farm on the agricultural island of South Hero, VT, ships high-quality 100% grass-fed beef to the Boston area. Our

farm is certified humane and our pastures are certified organic. See our video at <https://HealthHeroFarm.com/video>.

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

MD

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

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

MN

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

NY

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OH

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

WANTED: PRIVATE MEMBERS to raise nutrient-dense grassfed food on our farm through herd share program. Raw milk. Beef. Pork. Lamb. Chicken. Turkey. Eggs. Vegetables. Honey. Members have access to a 1 mile hiking trail through the farm. For an appointment to visit the farm, write to Byler Family Farm 14912 CR 3, Frazeyburg, OH 43822.

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

OR

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

Windy Acres is a raw milk dairy. It provides families with raw cheeses, Gouda, Jack, Jalapeno Jack, Tri Colored Peppercorn Jack, White Cheddar, Swiss (Jarvisberg 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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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 - grassfinished beef, veal, and whole raw A2A2 milk from 100% grassfed Jerseys. Everything is organically raised in harmony with nature, and is sold at the farm. Contact address and farm location: Martin Family Farm 959 Co Rd 423, Athens, TN 37303.

VA

Salatin family's Polyface Farm has salad bar beef, pigaerator pork, pastured chickens, turkeys and eggs, and forage-based rabbits. Near Staunton. **Nationwide delivery available.** Call (540) 885-3590, polyfacefarms.com.

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finished beef and lamb, Soy Free pasture raised pork, turkey and chicken, and lots more. Order online and utilize our convenient home delivery or pick up locations. Shop farmmatch.com/pleasantpastures or call (717) 768-3437.

VT

Health Hero Farm on the agricultural island of South Hero, VT, ships high-quality 100% grass-fed beef to the Boston area. Our farm is certified humane and our pastures are certified organic. See our video at <https://HealthHeroFarm.com/video>.

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

Farm Operator Position, Pahoehoe, 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.

Meadows Bee Farm, located in southern Vermont, is hiring for this summer's annual Farm Camp July 11-15 & July 18-22! We are looking for teachers, lead counselors, assistant counselors, and cooks who love farming, working with children, and healthy food. Please contact raquel@meadowsbee.com for details and inquiry. Visit meadowsbee.com for more info on what we do! Prairie Foods is seeking a marketer. We are a group of plain select farmers currently growing and shipping dairy, beef, pork, chicken and eggs. We are seeking a dedicated individual that is passionate about healthy food to create and manage a website for

us. Contact: (570) 855 3715; email: prairiefoods@mailbug.com.

Successful retiring farmer seeking paid apprentice. Rural S. Oregon Cascades 100-ac. forested/9-ac. pastured organic beef main operation. Very established customer base. Seek mature, responsible, teachable person with desire/willingness to learn. Basic Ag/Husbandry is necessary but the willingness to learn is most important. Ongoing projects in construction, soil/pasture management, agronomy, large composting, husbandry, agriculture, irrigation, gardening, forest management, heavy equipment, mechanics, welding, etc. We try to do it all here. Looking for a long-term potential partnership. Opportunity of a lifetime. inforoc@posteo.net.

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.

HEALTHY PRODUCTS

FLUORIDE FREE AMERICA Mission: Enhancing communication between individuals and organizations to exchange information and create strategies to end water fluoridation. facebook.com/waterliberty * [Twitter.com/FluorideFreeAmerica/waterliberty](https://twitter.com/FluorideFreeAmerica/waterliberty) * 70% of Americans are fluoridated. JOIN IN THE EFFORT TO END FLUORIDATION - You have the right to safe drinking water.

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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 or call John Delmolino, Amherst, MA. (413) 210-4445.

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DVDS/ON-LINE VIDEOS

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

Business and farm in Oregon looking for a buyer. The farm is a turn key operation. It has a 30 cow 30+ heifer herdshare dairy, with over 100 members. Includes cheese room operation, USDA-inspected raw dairy cheese room for extra revenue, underground fodder container and green room, smaller greenhouse, and orchard that haven't been completely developed for revenue. On one side of the parlor is for cows and one for sheep or goats. A large walk-in freezer and milk equipment for milking sheep and cows. Deliveries to Portland, Medford, Ashland, Dalles, Bend, Redmond, and on-farm sales. See pictures windyacresdairy.com. Call (541) 613-5239.

Raw milk dairy farm for sale 30 miles south of Atlanta, Georgia. The business has a solid customer base and is very profitable. 10 minutes from I-75 and in a convenient location

to all areas of Atlanta, but still feel like you are in the country. Business comes with two great houses, barns, necessary equipment and 20 acres. We have blueberry bushes, figs and muscadine vines and plenty of garden space. We also have a huge walk-in freezer and outdoor chicken processing facility. Property is also available for sale without the business. Call Kevin at (770) 584-6164 or email allthings828@lavabit.com.

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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 or (802) 645-1957. 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.

WITH THE AUSTRALIAN DAIRY INDUSTRY STRUGGLING, farmers walking off the land and suicides at dismal highs—it's time for urgent action. Our biggest project this year will road test the 2009 risk assessment by Food Standards Australia New Zealand (FSANZ). Please DONATE here ausrawmilk.org/donate.

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SOUTHERN MARYLAND – Farm stay at P A Bowen Farmstead. Living room with kitchenette, 1 bedroom, plus cots, to sleep 4, even 6 total. Barbeque, pool, private entrance. Tree house for children. Walks, farm activities. 1 hour from downtown Washington, DC and Annapolis. Listed at AirBNB or contact Lindsay at farmstay@pabowenfarmstead.com. 15701 Doctor Bowen Rd, Brandywine, MD.

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, (802) 645-1957. www.larsonfarmvt.com.

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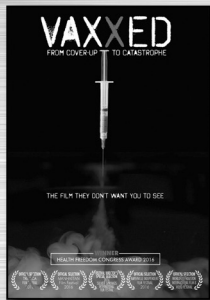


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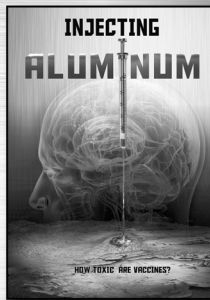
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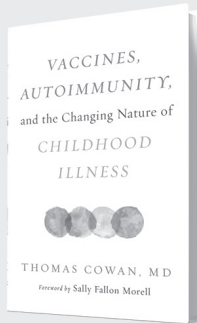


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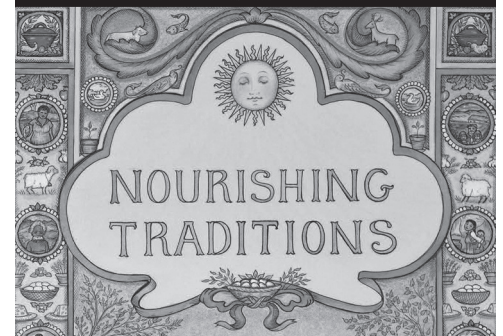


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The Weston A. Price Foundation

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Upcoming Events

2022

- Apr 23** **Berkeley Springs, WV:** The Contagion Myth (full presentation) by Sally Fallon Morell. **Contact:** arlingtoninstitute.org/event/sally-fallon-morell-the-contagion-myth/.
- May 1** **P A Bowen Farmstead, Brandywine, MD:** Nourishing Traditional Diets for Health and Happiness, with Sally Fallon Morell. **Contact:** westonaprice.org/May1
- May 7** **Polyface Farm, Swoope, VA:** The Extraordinary in the Ordinary. A Holistic Hilda event at Polyface Farm featuring Joel Salatin, Hilda Labrada Gore and Sally Fallon Morell. **Contact:** holistichilda.com.
- Jun 11-12** **Polyface Farm, Swoope, VA:** Nose-to-Tail Eating with Sally Fallon Morell, Joel Salatin and others. **Contact:** godsgoodtable.com.
- July 8-9** **Nashville, TN:** IABDM@TheDental Festival featuring Sally Fallon Morell and many other speakers on holistic dentistry. **Contact:** events.iabdm.org.
- Sept 15-18** **Phoenix, AZ:** Collaboration Cures 2022 featuring Sally Fallon Morell and many other speakers on holistic health. **Contact:** aaosh.org/collaboration-cures-2022.

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Last words of Dr. Weston A. Price, January 23, 1948



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