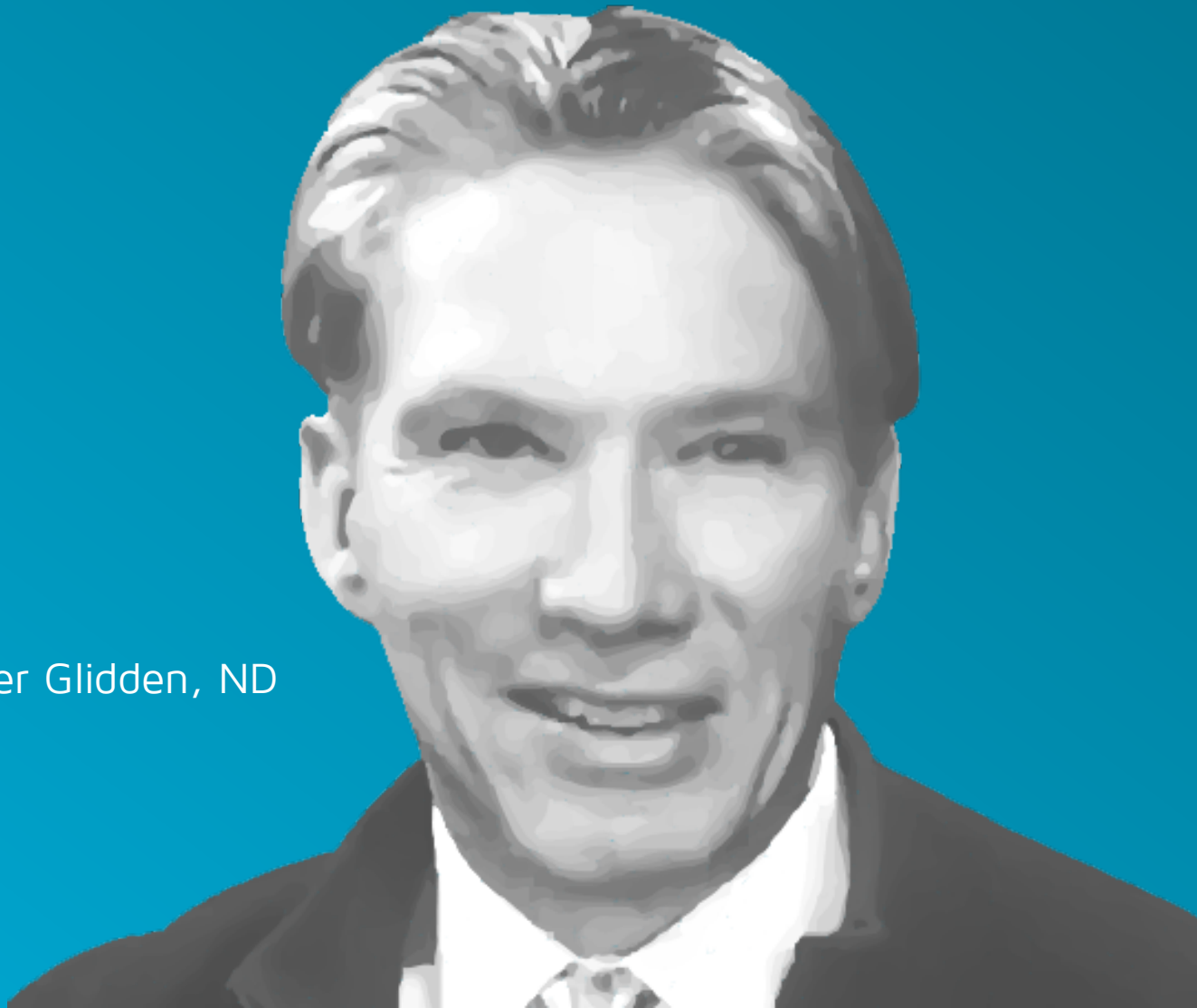


THE MD EMPEROR HAS NO CLOTHES

Dr. Peter Glidden, ND



Prologue

My name is Peter Glidden. I am a licensed Naturopathic physician. I received a BS in pre-med biology from the University of Massachusetts in 1987, and a Naturopathic medical degree (ND) from Bastyr University of Naturopathic Medicine in 1991. As of October 2010, the date that this book was first published, I have had 22 years of clinical experience delivering primary care Naturopathic medical treatments.

Naturopathic physicians are trained in science based, clinically verified, safe, effective and affordable Wholistic medical treatments such as clinical nutrition, homeopathy, herbal medicine, bio-identical hormone balancing, acupuncture, and detoxification programs. Naturopathic medicine is a full-fledged, licensed & regulated, primary care medical discipline. In order for someone to become a licensed naturopathic physician, they must secure the following:

- ☐ 4 years of pre-med education from an accredited academic institution.

- ☐ 4 years of naturopathic medical education (from fully accredited naturopathic medical schools)
- ☐ 900 hours of clinical supervision.
- ☐ Pass national board exams.
- ☐ Pass state board exams.
- ☐ 25 hours of continuing medical education credits each year.

In the states that license and regulate the practice of Naturopathic medicine, NDs can prescribe drugs, perform minor surgery, deliver babies, work in hospitals, order all diagnostic tests, refer to themselves as physicians, and have their services paid for by insurance companies. As of 2010, 15 states, the District of Colombia, and the territories of Puerto Rico and the U.S. Virgin Islands license and regulate the practice of Naturopathic medicine.

Naturopathic medical treatments are designed to support and promote the healthy function of the human body. They stimulate the body's built-in self healing mechanisms. More often than not, the treatments delivered by Naturopaths help people to completely recover from whatever illness they have been suffering from. Below is a partial list of the conditions that I have seen people completely recover from:

- ☐ Osteoporosis
- ☐ Fibromyalgia
- ☐ Osteopenia
- ☐ Rheumatoid arthritis
- ☐ Kidney Stones
- ☐ Insomnia
- ☐ Carpal Tunnel
- ☐ Depression
- ☐ Kidney Disease
- ☐ ADD
- ☐ High Blood Pressure
- ☐ Osteo-Arthritis
- ☐ Down's Syndrome
- ☐ Migraine Headaches
- ☐ Asthma
- ☐ Autism
- ☐ Celiac disease
- ☐ Type 2 Diabetes

Let me be perfectly clear. The conditions listed above were *completely* eliminated through the application of Naturopathic medical treatments. The person had the condition *before* they started the treatment and they no longer had it *after* the treatment. In common parlance this is referred to as a “cure.” The Down’s syndrome case is interesting, don’t you think? Down’s syndrome is a genetic disease which is irreversible once the child is born. In this

particular case, the diagnosis was made *during* the pregnancy. Sometime in the first 3 months of the pregnancy, fluid from the mother’s womb was collected through a procedure called “amniocentesis.” Analysis of the fluid determined that the developing fetus had Down’s syndrome. Upon receiving the diagnosis, the mother started an aggressive Naturopathic nutrition program and about seven months later, the child was born completely normal. This happened because the gene that codes for Down’s syndrome is turned on by the *absence* of nutrients in the mother’s system. (This is true of all genetic diseases, not just Down’s syndrome). When the mother became 100% nutrified by taking nutritional supplements, the genetic expression of the disease was turned off. In this case, it was turned off before it was too late, and the child was born with perfect health. Not bad. Do you think the mother was happy? What about the child? This is just the tip of the Naturopathic iceberg called “cure.”

You would not believe the conditions that I have seen people recover from.

Regretfully however, this is probably the first time that you have even heard the terms naturopath (nature o path), naturopathy (nature

op a thee), or naturopathic (nature o path ik). More regretful is the fact that the practice of naturopathic medicine is probably *not* licensed nor regulated in the state that you reside in. There is also a high degree of probability that your health insurance will *not* pay for the services of a licensed Naturopathic physician who is working in your area. More's the pity.

In the 1800s and the early 1900s the medical marketplace in the United States was quite different than it is today. The Naturopaths, the chiropractors, the osteopaths, the herbalists, and the allopaths (MDs) were all vying for patients, recognition and turf. Many times the competition between medical practitioners from different camps would even spill over into violence. In the 1800s, a medical group in Boston used a cannon aimed at the front door of their competitor's hospital to coerce them to cease and desist what they were doing! If you have seen the movie, "Gangs of New York," you will have an idea of what I am talking about. Even though there was a lot of competition in those days, the medical playing field was relatively level, and nobody really had the upper hand. In the second decade of the 20th century (1910-1920) there was a dramatic shift of power in the medical arena, and everything changed.

A gentleman named Abraham Flexner was hired by the The Carnegie Institute to tour the country and compile a list of all of the medical schools and hospitals that practiced MD directed drug delivery medicine. This of course was well before the age of the Internet, the airplane and the interstate highway system. Flexner travelled the country mostly via train and stagecoach. 5 years after he started, Flexner returned with his list (which is historically referred to as "The Flexner Report"). The Carnegie Institute subsequently donated millions of dollars to the medical schools and hospitals on Flexner's list. Other groups like the Rockefeller foundation followed the Carnegie Institute's lead and donated large sums of money to the medical schools and hospitals that delivered MD directed synthetic drug treatments. Can you guess why? The Carnegies and Rockefellers were heavily invested in pharmaceutical companies. It was a good move. Within 10 years of the Flexner Report, the medical stage in the United States had completely shifted in favor of the MDs. By 1920 the medical turf war game was over, and the MDs were squarely in the driver's seat of medicine. They have been there ever since. Most Americans, being unaware of these goings-on, mistakenly assume that MDs are in the driver's seat of medicine because their treatments are

better than those of their competitors. This couldn't be further from the truth. MDs are in the driver's seat of medicine *only* because of financial coalitions that were organized at the turn of the 20th century. Or, an easier way to say it: MDs owe their pre-eminent medical and social status to drug money. Go figure.

Now, at the beginning of the 21st century, we are in the middle of a health care crisis in the United States, because all of Flexner's chickens have finally come home to roost. If you do not think that we are actually in a Health Care Crisis, consider the following:

- ❑ The leading cause of bankruptcy is the high cost of medical care.
- ❑ The leading cause of harm is MD directed medical treatments.^{1,2,3,4}
- ❑ The 3rd leading cause of death is medical errors.⁶
- ❑ The US spends almost 3 times as much per person on health care as every other industrialized nation in the world and we are 2nd from the bottom in the health of our citizens.⁵
- ❑ The war on all chronic diseases, including cancer, has been lost.^{7,8,9}

The root cause of our country's Health

Care Crisis has nothing to do with Medical Insurance or a lack thereof, nor does it have anything to do with the high cost of MD directed medical treatments. The root cause of our Health Care Crisis boils down to 3 simple facts:

1. MD directed pharmaceutical medicine **DOES NOT WORK** in the treatment of chronic disease.
2. MD directed pharmaceutical medicine is the only system of medicine that our hospitals provide, that our medical insurance pays for, and that most people know about.
3. The American Medical Association has successfully orchestrated a 100 year long slander and smear campaign against all of their "alternative" competitors. If you are not an MD, you are a labeled (by the MDs) as a quack, and your profession is outlawed from the practice of medicine. This has made the average person hesitant and suspicious of anything other than MD directed medicine.

MDs consistently *fail* to fix conditions that Naturopaths take care of *easily*. Arthritis, high

blood pressure, type 2 diabetes, osteoporosis, insomnia, depression, asthma and anxiety (to name a few) are eliminated by naturopathic physicians *all of the time*. But because there are less than 3000 licensed naturopaths in the entire country, the teeming mass of suffering humanity is completely unaware of the fact that safe, effective, and affordable alternatives to MD treatments exist. It also doesn't help that it is illegal to use the word "cure" for anything that is not a drug. (See Chpt. 16)

The MDs have driven the bus of medicine over a cliff, into a ditch, in the middle of a swamp. Naturopathic physicians (and you) are the only ones with the ability to get us out. That's right – I said *you*. You have the ability to change how health care is practiced in the United States.

That is why I wrote this book.

It makes absolutely no sense for *anybody* to pay for medical insurance that will *only* provide them with access to a system of medicine that consistently fails to cure things, and which is the number ONE cause of suffering in the country! But as a rule, we become anxious and nervous when we don't have, or can't afford medical insurance. We all need to collectively have

our heads examined. The only reason that we continue to act in this ass-backwards manner is simply because we don't know any better. You don't know what you don't know, and one of the things that you don't know is that Wholistic medicine *excels* at treating chronic disease.

If you knew what I know about the treatments that MDs use, you would run away from them as fast as you could. You would only use their services for emergency trauma care and for surgery (when it was absolutely necessary).

If you knew what I know about Naturopathic medical treatments, you would camp out in front of your State House with all of your family members, friends and neighbors and *demand* that your legislature license, regulate, and protect the practice of Naturopathic medicine in your state.

Consider this book a wake-up call.

If you pay attention to what you will learn here, you will be able to recover your health to a remarkable degree. I will show you how to become so healthy that, with time, you will be able to stop taking all of your prescription medicines. I will eliminate the anxiety that exists in the back of your mind about your health failing in your old age because I will show you how to dramatically increase your odds of living

a long and healthy life. For the icing on the cake, not only will I show you how to do all of this, but I will even show you how to get paid for doing it – and I will show you how to become an essential gear in the engine of social change.

If you are wearing a seatbelt, I would tighten it right about now.

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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 1

Pavlov Would Be Proud

Dr. Peter Glidden, ND



Perspective is everything. It allows us to see things clearly, and to better understand complicated issues. As a society, we need a better perspective on the types of medicine that we use to help us overcome our health issues. Even though we have a number of health treatment choices: Allopathic medicine (what MDs & DOs practice); Naturopathic medicine; Homeopathic medicine; Chiropractic medicine; Acupuncture, Traditional Chinese medicine; Ayurvedic medicine; and Clinical nutrition (to name a few), *as a culture we lean heavily in the direction of allopathic medicine* – for no real reason other than the fact that it is just what everybody around us has always done, and it is the

only type of medicine that our insurance will cover. Most of us just *trust* that our MD knows what's best for us, and leave it at that. But what if our MD *doesn't* know what's best? What if our MD only knows what he/she has been trained in, and what if that training only focuses on a small percentage of what actually constitutes valid medical treatment? In a situation like this, we are basically just rolling the dice and hoping against hope that our doctor has the correct knowledge and tools to help us. Often, wagers like these fail. As evidenced by a recent Journal of the American Medical Association article, (JAMA 1998; 279(15):1200-1205) the 3rd leading cause of death in the U.S. is MD supervised medical errors! Furthermore, when you add this number to all of the infections, side-effects and outright deaths created by MDs in hospitals and in private practice, the MD profession becomes the number one harmer of people in the United States. This means – you go to your MD with a health complaint, the MD prescribes a treatment, and you get sick, maimed, or die from it! Imagine for a moment what would happen if a Chiropractor or a Naturopath killed just 1 patient with their medical treatment – there would be public outrage, and a stoning in the town square! But when an MD prescribes a treatment that kills someone, everyone just ac-

cepts it as part of the deal, and nobody goes to jail. Not to mention that this predilection for harm is a direct violation of the Hippocratic Oath that every MD swears to uphold... This is cultural conditioning “par-excellance” and is testimony to the sad fact of how much we have been conditioned into believing that MD directed allopathic medicine is the only valid medical system in today’s world.

In every culture there exist preconceived and fixed beliefs - hidden biases that inform the collective’s world-view - the forest that hides the trees. Here are a few examples: “The earth is flat; the sun orbits around the earth; women are not smart enough to vote; slavery is OK, because black people are just animals, and not human beings; child labor is a valid economic necessity.” These suppositions seem absurd to us today, but not that long ago they were accepted as fact, and very few people questioned them. One of the hidden cultural biases we are suffering from *now* is the (false) belief that allopathic medicine (what MDs do) is the only valid system of medicine in the world, and that all other systems of medicine are inferior (read: ‘alternative’) to it. Cultural conditioning, savvy political strategies, misleading PR campaigns, and business affiliations between pharmaceuti-

cal companies, legislators, medical schools, and hospitals have had us hog-tied to the *MD-As-King* belief for the last 100 years. You may like to think that you are immune from this type of thinking, but when push comes to shove, if you become afflicted with a serious or painful illness, like Pavlov’s dog salivating at the sound of the bell, you will most likely run to your local neighborhood *MD* – even though the odds are strong that the medicine he/she prescribes will hurt you...

For the last 100 years, medicine in the United States has been completely monopolized by the MDs, and very few people have any idea at all of how that happened. Most of us think that the MDs are the big dogs on campus because their treatments are better than those of their Wholistic competitors. This couldn’t be further from the truth, and in most cases, the exact opposite is true. Additionally, very few people have a good working knowledge of what Wholistic medicine really is - let alone what it can do. If the teeming mass of suffering humanity had any real understanding of the ability of Wholistic medicine to positively impact their health, the allopaths would soon be out of work. One of the best kept secrets in the 21st century is that for most of the conditions that

most people go to the doctor for most of the time, Wholistic treatments are *far superior* to anything that the MDs have to offer – and it is about time that we all collectively snapped out of it and got a clue.

One of my goals here is to help you to snap out of it and to get a clue. I will help you to understand how MD directed medicine works and how Wholistic medicine works. They each have their place, their strengths and their weakness. The only thing necessary for you to figure out which one is most suitable for your situation is to have a clear perspective on the philosophies and treatment strategies of each. In these pages, I will attempt to break your pro-MD conditioning. I will empower you with the knowledge necessary to substantially increase your odds of a successful outcome when your health is failing. I will also attempt to make you laugh.

Remember – from the proper perspective, everything becomes crystal clear. So let's begin.

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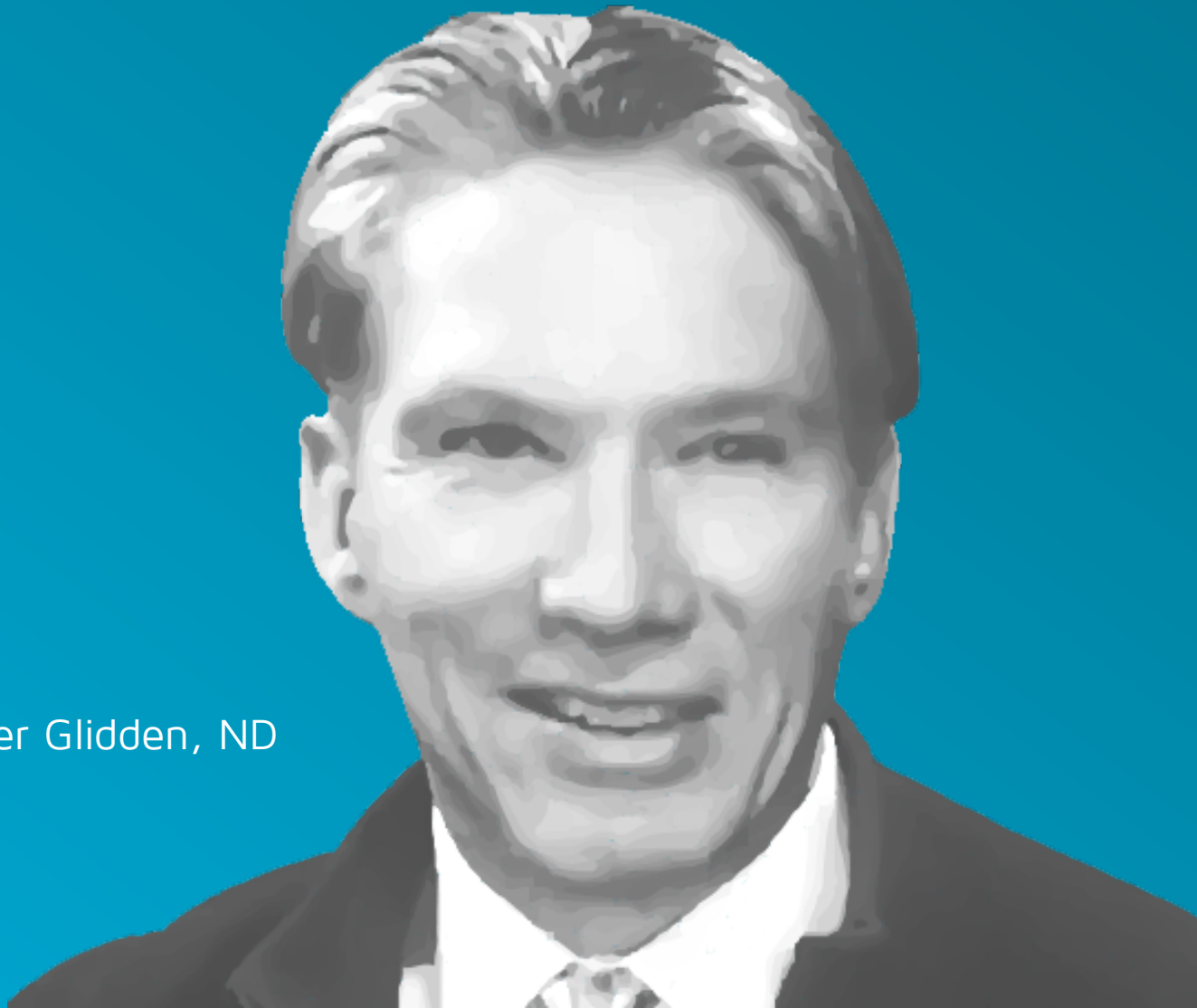
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CHAPTER 2

The Nature of the Beast

Dr. Peter Glidden, ND



There are two differing schools of thought prevalent in today's medical arena: 1) Reductionistic medicine (what MDs practice – also referred to as “Allopathic” medicine); 2) Wholistic medicine (what NDs, DCs, Acupuncturists, etc. practice.) These 2 schools of thought are based on philosophies that are radically different each from the other.

Most Wholistic practitioners will tell you that MDs are pompous, close-minded, symptom suppressive lap-dogs to the pharmaceutical industry who don't know the first thing about health, and who use medicines that are just as likely to hurt you as they are to help you. Most MDs will tell you that Wholistic medical practitioners are quacks, have sub-standard training, and use therapeutics that are unproven and dangerous. The reality of the situation is that the Wholistic practitioners are right, and the MDs are wrong.

There are, however, a few things that the MDs are good at – and there is room in the world for both of these systems of medicine. So let's break each of them down in order to better understand what's going on.

ALLOPATHY

The medical philosophy that MDs are trained in is referred to as “allopathy.”(rhymes with “shall op a thee”). Allopathic (rhymes with “shall o path ik”) medicine is atheistic, reductionistic and oppositionally- defiant in its philosophy of treatment. Its greatest achievements have been in the fields of surgery and emergency care. It believes that the human body must be controlled and dominated. It relies on the use of synthetic drugs and surgery to affect changes in the physiology of the body. It does not believe in the existence of a human soul - or for that matter, anything metaphysical. Its practitioners are not trained in how to make a sick person healthy. Its treatments are used to *manage* the disease state and, with the exception of surgery and infectious disease, they are rarely *curative*.

The term “allopathic” was coined by a German physician named Samuel Hahnemann in the 19th century. It is derived from the two

Greek words, “allos” meaning “opposite” and “pathos,” meaning “disease.” Hahnemann was a homeopathic physician (a type of Wholistic medicine), and he came up with this term to describe and separate himself and the members of his profession from the MDs of his time that espoused the use of dangerous and harmful medical treatments such as blood-letting, and the use of large doses of toxic substances, like mercury. Modern day MDs are not so happy with the term “allopath,” and will go out of their way to try to convince you that what they do is practice “Medicine,” - that they in fact are the *sole proprietors* of the entire medical field. But they are not. What they do is just ONE PIECE of the medical pie. “Allopathic” is an entirely appropriate eponym for what MDs do, and Hahnemann should be applauded for his insight.

An important aspect of allopathic medicine to understand is its adherence to a *reductionistic* philosophy. Reductionism takes the view that the human body is a machine made of parts. It argues that, when an illness is present, the body must be taken *apart* in order to discover the defective piece. This reductionistic view is exemplified by the diagnostic tools that MDs use – Blood work, X-Ray, MRI scans, CT scans, Laparoscopies, Colonoscopies, etc. These de-

vices are all used to take the body apart into smaller and smaller pieces in the desperate hunt to find the part of the body-machine that is broken. This is why CT scans and MRIs are ordered for just about everything now, and also why gene therapy and embryonic stem cell research are all the buzz today – as they represent the ultimate end of the reductionistic road, with scientific technology allowing physicians to visualize the body at very tiny levels. This “machine made of parts” viewpoint is also the reason why patients are prescribed *so many* different medications. One medicine is given for each part that is broken. So, in an MDs office, patients are routinely prescribed one blood pressure medicine; one arthritis medicine; one osteoporosis medicine; one hormone medicine; one sleep medicine; one depression medicine; one heartburn medicine; and one medicine to take care of the side effects of all of those medicines. Sound familiar? The reason that so many people are on so many medications is not because MDs have stock in drug companies (although many do), but because their reductionistic philosophy demands that they treat people in this manner.

Control of the body is another important point to ponder regarding allopathic philosophy. It is rarely talked about in such blatant or

naked terms, but it impacts 100% of allopathic treatments. The logic goes something like this: “If somebody is sick, they are sick because their body lacks the ability to fix the problem on its own, and therefore medicines which alter the natural workings of the body must be imported into the system to control the situation, or the offending tissue must be surgically removed.” Nine times out of ten, the medicines that are imported into the body to treat an illness by an allopath are synthetic, and are prescribed in a manner which overpowers the inherent biochemistry of the body, orchestrating a violent takeover of its physiology. So for instance, if you have colitis, your colon is removed; if you are depressed, you are given a synthetic prescription drug which artificially increases the levels of Serotonin in your blood, thereby making you feel better. (Kind of, but not really, like tequila). If you are in pain, you are given a synthetic medication which blocks the transmission of pain signals along nerve pathways, thereby making you feel better. (Kind of, but not really, like tequila). If you are having menopausal symptoms, you are given synthetic estrogens or synthetic progesterone to try and push the biochemistry of your body in a direction that results in the elimination of your symptoms. (Kind of, but not really, like tequila).

Also, the medicines used by allopaths are designed to *oppose* the illness. This is how the medicines got their names in the first place: *anti*-biotic; *anti*-inflammatory; *anti*-depressant; *anti*-coagulant; *anti*-histamine; *anti*-acids, serotonin re-uptake *inhibitor*; MAO *inhibitor*; etc. Lastly, because these medicines are prescribed in an oppositional way, (e.g. to *combat* and to *oppose* the disease), the effects of them on the body are often violent, and full of side-effects - not the least of which is death. When you think about it, allopathic medicine is 100% congruent with the political philosophy of Communism – which believes that people are not smart enough to be left to their own devices and must therefore be dominated and controlled. Coincidentally, the father of modern day communist China was... You guessed it - an MD! His name: Sun Yat-Sen. Ouch!

Synthetic drugs are the medicines of choice in the world of the reductionistic allopath. Did you ever stop to consider why this is so? Many of the drugs that are used today come from plants. So why not just use the plant? I mean, from an evolutionary point of view, plants and humans have co-existed for thousands of years. So why go to all of the trouble and expense of analyzing the plant's chemical constit-

uents, and then synthesizing a drug from one of them? The answer might surprise you. The reason that synthetic drugs are the main-stay of the allopaths boils down to two words: “Ca-Ching!” OK, maybe those aren’t real words – so here are two that are: “Profit Motive”.

It is illegal for anybody to hold a patent on a naturally occurring substance. You couldn’t go to Washington DC and secure a patent for “water” or “calcium” or “garlic.” Patents, which guarantee the patent holder the *exclusive production rights* to whatever was patented, can only be granted for things that are not naturally occurring. This is why drug companies go out of their way to create *synthetic* medicines. Since synthetic medicines have never occurred before in nature, the drug company can secure a patent for it, and then they are the only ones that are allowed to produce and to sell it. This, of course, dramatically increases the drug company’s profits. Those of you who grew up in the 50s and 60s can probably recall hearing the term “patent-medicine” – well, this is where it came from, and guess what – patenting a drug *does* create profits – massive profits: Statin drug sales top 30 billion dollars a year, and synthetic hormones like Premarin™ and Provera™ generate approximately 275 million dollars a year.

Ca Ching. Ca Ching.

This is also why there is no widespread or significant research done on vitamins or herbs. There is no profit motive in that arena. If somebody found a mineral that cured breast cancer, anybody could make it, so why pour hundreds of millions of dollars of research and development into something that, once discovered, anybody and everybody could make and sell? From a humanitarian point of view this of course is a good idea, but medicine in the industrialized nations of the world is not driven by humanitarianism, nor is it driven by results. Medicine in the 21st century is driven by profits. If modern medicine was results-driven, the MDs would have been out of work a long time ago.

The exclusion of the soul is one of the most startling aspects of allopathic medical thinking. Interestingly, it is concept that is not even thought about by most allopaths – even though it is fundamental to their medical philosophy. Just go ahead and ask your MD what the relationship between the soul and the health of the body is – and see what you get for an answer. The relationship between the soul and the body is completely discounted in allopathic medicine because Reductionism argues that

if you can't measure something objectively, it doesn't exist. Since nobody has ever dissected the soul out of a human body, nor measured it with some type of reliable instrumentation, it therefore doesn't exist – to the allopath. If it doesn't exist, then it can't impact the health of the body - or anything else. Of course, if the soul *does* exist, then it *must* have an intimate connection to the body's health. By discounting this possibility altogether, however, allopaths have effectively thrown the baby out with the bath water. To add yet another layer of irony to this situation, even though many allopaths are deeply religious people, the concept of the soul's interface with the human body and its influence on health is completely left out of their reductionistic medical model. This is like believing in democracy when at home, but practicing communism when at work.

Because surgery and emergency care are the epitomes of reductionism - breaking the body down into smaller and smaller pieces, and then targeting for treatment the parts that are broken, the major advances in modern medicine in the last 100 years have *all* been in the surgical arena, and ironically, with military field medicine. However, in the same time span very *few* advances have been made in the treat-

ment of *most* of the chronic diseases that affect *most* human beings *most* of the time. Things like heart disease, obesity, arthritis, asthma, kidney failure, migraines, anxiety, depression, hypertension, cancer, diabetes and eczema are still around, still causing massive amounts of suffering, and are still considered incurable (even though Naturopaths cure these conditions all of the time). It is telling, don't you think, that modern medicine with all of its technological sophistication, still hasn't been able to figure out what causes arthritis, or asthma, or depression, etc. I mean, let's think about it - If you were a chef and only used one recipe, and your lasagna ALWAYS tasted bad, wouldn't it be time to try a different recipe? It is one of the great ironies of the modern day that while allopathic medicine claims to be the only legitimate, scientific, and effective type of medicine on the planet, it has consistently failed for 100 years to find a cure for most of the diseases that afflict humankind.

The distinction between *health* and *disease* is also an interesting thing to consider in the upside-down, "through-the looking glass" world of allopathic reductionism. If I was an automobile mechanic and didn't understand the process of how gasoline is converted into energy to make the engine parts move, then I wouldn't be

very good at fixing broken automobile engines, would I? Conversely, if I am a physician and I don't understand what "Health" is, then I won't be very good at fixing unhealthy bodies. Right? Right! If you want to have some fun with your MD, the next time you are in their office, ask them to define "Health."

Another of the great overlooked ironies of modern day medicine is that most MDs simply have no idea whatsoever of what constitutes "Health" – and therefore are not capable of helping their patients to recover, nor to sustain it.

Clinical nutrition is, at best, an afterthought in the practical application of allopathic medical treatment, and is at worst, irrelevant. When nutrition is applied, it is always used as secondary or tertiary to the main drug treatments, and never as a primary intervention. Vitamins are rarely, if ever, used. This is because there is little room for nutritional thought in reductionistic philosophy. Why worry about how the body is fed if you don't believe in its natural self healing ability in the first place? If 100% of your treatments are geared at *over-riding* the body's natural tendencies, then why bother to try to support them with nutrition? Additionally, most allopaths are incorrectly taught that the

human body can derive all of the nutrition that it needs through food. This is perhaps the most harmful concept ever promulgated on our population by the medical industry. We absolutely and positively DO NOT get all of the nutrition that our bodies need from our food. (See chapter 25)

Lastly, the medical foundation that underlies and informs allopathic medical treatments is one that they constantly change. It has no integrity. They just make things up as they go along, decade by decade. First it's leeches, then it's blood-letting, then it's large doses of mercury, then it's purgatives, then it's antibiotics, then it's designer drugs. What next? When you really boil allopathic medicine right down to its barest of bones, what you are left with are the juvenile notions that to recover from disease, the body must be controlled with some synthetic substance that is dangerous and strong, or the anatomy of the body must be altered with surgery.

What type of results then, would you expect to see from a medical system that has no working understanding of what "Health" is, and that specializes in the use of dangerous synthetic medicines designed to suppress the body's symptoms? Would you expect to see

cures? No! From a system of medicine like that, one would expect to see treatments that only *manage* the symptoms of the disease – and that is *exactly* what allopathic medicine delivers – *disease management*. Your depression is tuned down a little, but only if you *keep taking* your anti-depressant. Your asthma is kept in check by the *daily* doses of Albuterol™. Your arthritic knee pain is reduced, but only as long as you take your pain meds *every day*, and if you have to stop taking them because they are destroying your liver, well you can always have surgery to implant an artificial knee. You might want to ask yourself who benefits from a medical model like this. Pharmaceutical companies that make the medicines that you have to take *every day* to *manage* your symptoms, the surgeons who replace the *unhealthy* parts, and the hospitals that provide the facilities for it all to happen in are, for better or for worse, the direct beneficiaries of a “for-profit” medical model that does not understand what “Health” is, and which focuses on disease *management* instead of disease *cure*.

Lastly, when you use a symptom suppressive synthetic drug which targets the *part* to treat an unhealthy *system*, it will screw things up, and that is exactly why MD directed treatments are the 3rd leading cause of death in the US, and

why (according to the World Health Organization) the United States ranks 72nd in the world in overall health of its citizens. 72nd in the world!!! Twenty years ago, we were in 14th place! Thank you Dr. MD. Under your guidance we have gone from 14th to 72nd place - and it only took 20 years! This absolutely unacceptable situation is the price that we have paid for our unquestioning allegiance and our abject subjugation to a medical system that rarely cures anything and that relies on the exclusive use of strong, synthetic and suppressive patent medicines which have a high probability of hurting us. Like lemmings following each other over a cliff to their doom, every time we get sick we run straight to the MD's office - even though the chances are *high* that their treatments will not fix what is bothering us, and that the medicines they use will hurt us.

The only reason that we persist in this self destructive behavior is because we don't know any better. Allopathic medicine is the only type of medicine that we are familiar with. It is the only type of medicine that our insurance pays for. It is the only type of medicine that is used in our local hospitals, and every night when we go home and try to relax, we are bombarded with television commercials telling us how great and

necessary prescription medicines are. Then we watch “House” or “The Doctors” or “ER” and are fed a complete and utter fantasy world of what MD medicine is like. If they did a reality show like “Cops” for MDs, we would quickly lose our infatuation with allopathic medicine.

WHOLISM

On the other side of the medical coin, we find Wholism.* This subject is a little bit confusing to the average person, because there are many *different* Wholistic medical disciplines, each of which uses a unique type of treatment. Homeopathy, Naturopathy, Acupuncture, Ayurveda, Traditional Chinese medicine, Tibetan medicine, Chiropractic, Touch- For-Health, (and many more) are examples of Wholistic medicine, but they all require different types of training for their practitioners, they all offer different types of treatment, and they are all regulated differently by each State in the U.S.A., (and by different countries around the world). The *philosophy* of Wholistic medicine, however, is universal to all of its differing systems of

treatment. This is what we will now discuss.

Wholistic medicine is “Systems – Oriented.” It argues that the body is a complex *system* of inter-related parts. It believes that the human body has a built-in, natural ability to regulate, maintain, and fix itself. Its treatments are designed to promote and to stimulate these processes. It believes that the body must be properly nutrified in order to be healthy. It believes that detoxification procedures are necessary to optimize the health of the body. It believes in the existence of a spiritual “Vital Force” which animates the physical body and impacts its health. Its treatments are, more often than not, curative. It has a sophisticated understanding of the definition of “Health.” Its treatments are evidence-based, safe, effective, affordable and clinically verified.

Where does the mind *stop* and the body *begin*? Why do emotions affect both the mind *and* the body? Why can 100 people experience the same stress and have 100 different reactions to it? Why can 100 people, all with the same di-

*As Wholistic medicine has risen in prominence over the last 10 years, it is being referred to in the media as “Holistic.” Leaving off the “W” at the beginning of the word makes people think of *holes* instead of the *whole*, as was the original intent, and should be avoided.

agnosis, have radically different symptoms, each from the other? What role does nutrition have on health and well-being? These are some of the questions that the Wholistic medical model takes into consideration as it formulates its philosophy of healing. The philosophical underpinnings of Wholism are gleaned from the scientific study and analysis of both *objective* (autopsy, blood work, microscopic tissue examination) and *subjective* (observation of the *dynamic* symptoms that people get when they are sick) symptoms. Wholistic medicine is extremely pragmatic and is completely grounded in good, old fashioned, common sense.

One of the 4 foundation principals of *Naturopathic* medicine is the belief that the human body possesses a strong and sophisticated ability to maintain and repair itself. This concept is not exclusive to naturopathy. It is found in *all* Wholistic medical systems. It forms the bedrock of all Wholistic medical thought, and is extremely important to understand. When you cut your hand, do you have to think about how to direct the cells of your body to fix the problem? No! The body fixes it all by itself. When you eat an apple, do you have to mentally direct the process of digestion? No! The body does it all by itself. This innate ability of the body to

manage its own affairs is what Wholistic doctors take advantage of in formulating their treatments. The fundamental belief here is that living organisms possess inherent self-healing processes which are able to be stimulated by the correct application of the proper therapeutic agent to effect a cure. So, for example, instead of taking an anti-biotic which is (allopathical-ly) designed to kill certain bacteria, a Wholistic doctor will give a treatment that stimulates the body's immune system, so that the body eliminates the bacteria through its own means. This is what is meant when Wholistic doctors say that their treatments are working "with Nature." This concept, however, is often a cause of great confusion. Most people mistakenly assume that Wholistic doctors will only prescribe *natural* medical treatments (whatever that means). But this is not true. For example: *All* of the medicines used by classical Homeopaths are Not found in Nature; *All* vitamin supplements are man-made. I could go on and on.

The point here is not that the medicines used by Wholistic doctors are "natural" or only found in nature (although many are), but that they stimulate the Natural Healing Power inherent in a living organism.

The application of Nutrition in a wholis-

tic medical setting is an extremely sophisticated process. It is evidence-based, thorough, and makes the recommendations of your registered dietician look childish. Medical Nutrition is a primary medical intervention. The following is an excerpt from a monograph written by Abram Hoffer, MD* – one of the pioneers in the field of Vitamin Therapy.

“An elderly woman appeared and when I asked her why she had come she replied that she had cancer in the head of her pancreas. She had developed jaundice. Her surgeon discovered she had a large tumor in the head of the pancreas which occluded her bile duct. He promptly operated, created a by-pass, and when she recovered from the anesthesia advised her that she had about 3 to 6 months to live. She worked in a book store. She had read Norman Cousins book Anatomy of an Illness and thought that if he was able to take so much vitamin C with safety she could too and she began to take 10 grams each day. The next time she consulted her doctor she told him what she was doing. He referred her to me since he was familiar with my interest in mega doses of vitamins. I reviewed her program and increased her vitamin C to 40 grams

daily trying to reach the sub laxative level... I then added vitamin B-3, selenium, and zinc sulfate. Six months later she called me at home in great excitement. She had just had a CT scan. No tumor was visible. The CT scan was repeated by the incredulous radiologist. Her original bile duct had reopened and now she had two. She remained alive and well until she died February 19, 1999, nearly 22 years after she was told she would die.

Pretty good! Now that’s what I call Clinical nutrition!

Detoxification of bodily tissue is a concept which is completely foreign to allopathic medicine. If you can mask the body odor with strong enough perfume, why take a bath? In systems-oriented Wholistic medicine however, the process of detoxification is extremely important. Because all of the systems of the body are inter-related, if we are attempting to stimulate the body’s ability to fix itself, we will maximize the effectiveness of our treatments if certain parts of the body are not gummed-up with substances that should not be there. One of my

*There is a growing trend in American medicine which is worth mentioning here. In the last 15 years, more and more MDs have been adopting and incorporating Wholistic medical treatments into their practices of medicine. Ironically, some of the greatest pioneers in the field of Vitamin Therapy and Clinical Nutrition have been MDs. Some of the most talented Homeopaths in the world are MDs! Most of the pioneers in the field of Hormone Replacement Therapy have been MDs! There are exceptions to every rule, of course. So it is possible to find an MD with...

most noteworthy cures of Ulcerative Colitis was accomplished by identifying and removing extremely high levels of Arsenic in a 9 year old boy whose parents brought him to my office because he wasn't responding to conventional drug treatment (Prednisone, Sulfasalazine). His allopathic doctors wanted to remove part of the boy's colon with surgery. After 12 weeks of my treatment, his problem disappeared completely – in direct proportion to the decreasing levels of arsenic in his system. How did a 9 year old become exposed to arsenic? Pressure treated lumber manufactured in the U.S. was routinely injected with arsenic as a preventive pesticide. It is called CCA (copper, chromates & arsenic) or "Wolmanized" lumber. There is approximately 1 ounce of arsenic in one 12 foot long 2x6 piece of wood. This is enough arsenic to kill 250 people – in ONE piece of wood. The house this child lived in had a deck off of the kitchen that was made out of arsenic-injected lumber. Over

the course of nine years, arsenic from the wood had slowly been absorbed by his body from the times he had crawled, touched and walked on it (with bare feet).

When was the last time your doctor recommended you be checked for Arsenic poisoning?* Did I hear you say: "Never?!" More's the pity...

The Wholistic concept of "The Vital Force" deserves an entire chapter, and gets one (Chapter 7). But for now, here's an easy way to understand this concept: The elusive "something" that differentiates a living person from a dead person; the elusive "something" that brings light to the eyes of the living – that is the Vital Force. Because the Vital Force is that thing which differentiates a living person from a corpse, Wholistic medicine theorizes that it must therefore be intimately connected to the

Wholistic leanings, or even one who has completely eschewed allopathic reductionism and has embraced the Wholistic medical model, but these individuals are rare. Please keep in mind that the vast majority of medical professionals with an "MD" after their name are rank and file allopathic reductionists and should be viewed as such when considering their services for medical assistance. Also - having an enchilada at a Taco Bell in Chicago is not the same thing AT ALL as having one in a 200 year old restaurant in Puerto Vallarta. My personal experience with (most) MDs who practice Wholistic medicine is similar, in as much as I find that their wholistic treatments are watered down and just not as good nor as effective as those delivered by a Naturopath, Traditional Chinese Medical doctor, Homeopath, Chiropractor, Ayurvedic doctor, or Licensed Acupuncturist. 'Nuf said...

*To complicate matters further, Arsenic is an essential nutrient to the human body. It only becomes toxic when there is too much of it present. Kind of like sunlight – moderate amounts are necessary, but too much will kill you.

life, health and functionality of the human body. Allopaths dismiss the concept of the Vital Force as unsubstantiated metaphysical folly, but Wholistic medical practitioners observe how the Vital Force is affected by the stress of life and structure their therapies in accordance with their observations. In his book, *Lectures on Homeopathic Philosophy*, James Tyler Kent, MD – one of the pioneers in the U.S. of homeopathic medicine wrote the following piece which underlines the concept of the Vital Force nicely:

“(Regarding a sick individual) There is nothing in the nature of (the) diseased tissue to point to a cure; the tissue change is only the result of disease. Suppose there is a tumor of the mammary gland, there is nothing in the fact that it is a tumor that would lead you to the nature of the change of state (in the patient, that caused it to appear)... the changes in the tissue are of the least importance. What you see in the (living) patient herself, how she moves and acts, her functions and sensations, (these) are (the) manifestations of what is going on in her internal economy (her Vital Force). A state of disorder (disease) represents its nature to the physician by signs and symptoms alone, and these are the things to be prescribed upon... It is astonishing that (allopaths) should expect to find out by post-mortem

and examinations of (dead) organs, what to do for (the living) sick...”

Now – this doesn’t mean that Wholistic medicine completely discounts objective scientific discovery (like autopsies and blood cultures). As a matter of fact, autopsy and tissue cultures are two of the cornerstones of applied medical nutrition. Wholistic doctors, because they are Wholistic, look at *both* the objective and the subjective sides of the coin. They consider the *whole person*. Therefore, in addition to autopsy and tissue samples, Wholistic physicians also consider the subjective side of things – how the patient feels, and how the illness is manifesting itself by way of signs and symptoms.

By the way, as you may have guessed, your allopathic MD *only* looks at the objective side of the coin.

OK – so now it’s time to unveil the Wholistic definition of “Health.” Because of the eclectic nature of Wholistic medicine, different disciplines (Chiropractic, Naturopathic, Traditional Chinese medicine, etc.) will all have slightly different addendums to this definition. So it’s appropriate to view what I am about to say as the trunk of the tree of the Wholistic defi-

inition of “Health,” which will then be added to, branch by branch, by each discipline’s own unique philosophical orientation. OK, here it is (drum roll, please):

*“Health is the ability of a living organism to experience stress and remain symptom free, wherein the systems of the body exist in a natural state of harmony and equipoise, each to the other.”**

Chew on that for a while. Now, a Chiropractor would say that to accomplish this, the spine must be in its proper anatomical alignment so that the nerve transmissions can carry their signals optimally, and a Naturopath would add that in order for this to happen, the body must be properly nutrified and detoxified, and an Acupuncturist would add that for Health to occur, the subtle energy or “Qi” of the body must be able to flow properly, and unimpeded.

Get it? All of the different disciplines of Wholistic medicine all have the same goal – to make the patient *Healthy*. They just go about it in different ways. All of the different Wholistic paths up the mountain eventually lead to the top, and in this metaphor, the top is Health. This is why Wholistic medicine is curative – because its treatments help the patient to recover their Health. Imagine that! My colleagues and I practice a system of medicine that makes our patients HEALTHY... and *we’re* the quacks?

*Special thanks to Jeremy Sherr Ph.D, of the UK, and Joel Shepherd, MD of Illinois for elucidating this eloquent definition of Health.

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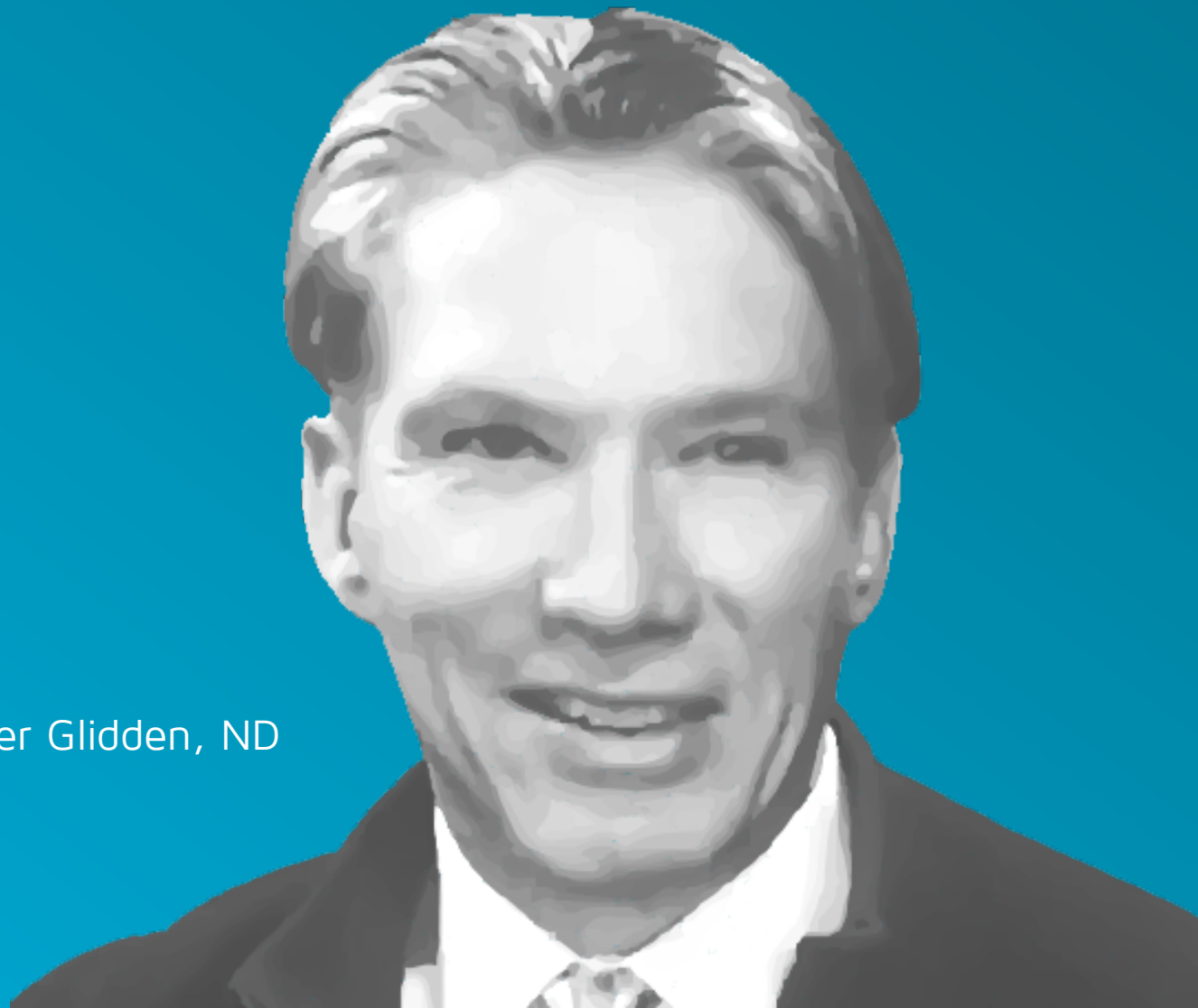
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CHAPTER 3

The Stress of Life

Dr. Peter Glidden, ND



When most people think about stress, they think about mental or emotional stress – divorce, re-location, working for a boss who is an idiot, speaking in front of a group, too much tequila, etc. But stress is much more sophisticated than this. It is a phenomenon with two faces, and many arms – most of which reach into the very fabric of our lives, profoundly affecting our health. Stress can be either positive or negative. An example of positive stress is exercise. Exercise stresses the physiology of the body. The body then reacts to the stress by making its tissues stronger. Our circulation, muscles, and lungs all benefit from their exposure to the Positive Stress of exercise. On the other hand, as its name implies, *Negative* stress exerts a deleterious effect on the body. Without negative stress, there would be no illness, no disease, and no death. From now on I will be discussing *Negative* stress exclusively.

Let's review the definition of health that was presented in the last chapter. "*Health is the*

ability of a living organism to experience stress and remain symptom free..." The operative word in this definition is stress – and to understand it better in this context, we must paint the definition of "stress" with a broad brush. Weather, temperature, bacteria, viruses, pollution, bad food, bad water, not enough food, too much food, not enough water, too much water, malnutrition, not enough sleep, too much sleep, worry, arguments, aging, prescription medications, and water-boarding are all examples of *negative* stress, and they all impact our health adversely. But stress all by itself is not enough to make us sick (unless it is a very strong stress), it is the strength of the body and its degree of health, that makes the difference and tips the scales in the direction of health or illness. Let's look at it this way: 5 people are standing right next to each other at a Rock concert. The band starts a song and then giant strobe lights start to flash on and off, keeping time with the music. One of the people in the group of 5 starts to get sick to their stomach, and then develops a migraine headache. The other 4 are OK. Everyone was exposed to the stress of the flashing lights equally, but only 1 out of the 5 had a reaction to it. Why?

An allopath will tell you that the person who got the migraine did so because of the

flashing lights. Gee, thanks – but didn't we already know that? This is like going to the doctor with a sore throat and the doctor tells you "You have "pharyngitis" (which is a Latin word meaning – "sore throat"), that'll be \$175..." A *Wholistic* doctor will tell you that the migraine sufferer reacted to the stress of the lights because there was a physiological *weakness* in his system which allowed the negative stress of the strobe lights to push his system out of balance. Once it was off kilter, his body then generated the symptoms of nausea and head pain.

This concept of system strength/weakness and the ability of stress to destabilize the physiology of the body is another of the keystones of Wholistic medical thought, and is important to understand.

From the Wholistic vantage point, we are born into the world with strengths and weaknesses that were functions of the relative health of our mother while she was pregnant with us. As we walk down the road of life, we experience the many and varied stressors of life. In the above example, the concert-goer developed a migraine headache because his system was *too weak* to deal with the stress of the strobe lights. The strobe light stress destabilized his

system and caused a physiological reaction – a migraine headache. Pain medication prescribed by a reductionistic MD would only be able to curtail the length and severity of this reaction. It would do nothing to fix the weakness which allowed it to show up, and the next time this person is exposed to strobe lights, a new reaction (headache) will occur. Conversely, if there is no weakness, there can be no reaction – so the other 4 concert-goers were headache free.

Keep in mind that the above scenario is just an *example*, and that the concept of the body's reaction to stress carries forward into ALL disease states, not just migraine headaches. People get depression, allergies, asthma, colitis, arthritis, cancer, etc. because they have a physiological weakness (that they either acquired at birth, or developed over time, or both - usually it is both) that was capitalized upon by the stress of life. This applies to ALL disease states.

Negative stress can be broken down into 3 categories:

1. *Common* stressors: These are the types of stress that affect everybody differently. Examples are: weather, food, common bacteria, deadlines at work, heights.

2. *Mega* stressors: These will cause a reaction in *anyone* who is exposed to them, regardless of their susceptibility. Some examples would be: bullets fired from a gun, intense heat, exceptionally virulent microbes, and ionizing radiation.
3. *Chronic* stressors. These types of stress will wear somebody down and cause a reaction regardless of how weak/strong their systems are, but the negative effects of Chronic stressors happen *after extended periods of time*. For example: If someone lives in a mold-infested house for 3 years, they *will* get sick. If someone inhales asbestos fibers 5 days a week for a few years, they *will* develop lung cancer. Got it? OK. Next we will look at the *response* of the body to stress.

When we are exposed to a strong enough stress we develop *symptoms*. Sometimes the symptoms are subjective and sometimes they are *objective*. *Objective* symptoms can only be seen with some type of technological discovery: X-Rays, CT scans, and Blood analysis are all examples of the tools that are used to discover *objective* symptoms. For example, somebody could have blood pressure that was “through the roof” and

not know it unless it was measured with a blood pressure cuff. This is why high blood pressure is called the silent killer. It is an *objective* symptom, and can only be seen with some type of tool. But *most* of the symptoms that bother *most* people, *most* of the time, are *subjective*. These are the symptoms that we feel - the things that make us go to the doctor’s office in the first place. Headaches, joint pain, runny eyes, fatigue, anxiety, hot flushes, weeping at the drop of a hat, and a simple cough are all examples of *subjective* symptoms.

Remember - a symptom (objective or subjective) can *only* show up if it was *preceded* by a stress. Now, it *is* possible to be exposed to a stress and then to *not* get any symptoms, right? This is called “Health.” Our immune systems are fighting off germs all of the time – and we never get symptoms, because most of the time the power of certain germs is just not strong enough to destabilize our system. But when we *are* exposed to a stress that *is* too much for our system to cope with, our system becomes destabilized, its harmony and equipoise are upset, and the body then generates a symptom (or symptoms) as a result. It is the physiology of our own bodies that is manufacturing the symptom(s). The symptom(s) are not being generated by

some outside force. Our own bodies are generating the pain, the swelling, the inflammation and the fever (for example) that we are bothered by. *Any* symptom that we are afflicted with has been generated by our own body as a *reaction* to some stress that was too great for the defense mechanisms of our body to handle. There are NO exceptions to this rule.

The progression from health into illness then, goes something like this:

- Healthy and balanced with no symptoms. – Stress exposure. – Stress too weak to overpower our body's defenses. – No symptom generation. Health persists.
- Healthy and balanced with no symptoms. – Stress exposure. – Stress overpowering our natural defenses and destabilizing the system. – Symptom generation. Illness is born.

Now, once a symptom is present, if we are relatively strong and/or the stress is relatively small, the self healing mechanisms of the body kick in and start to fix the problem (by bringing the system back into balance). When the body recovers its balance the symptoms of the illness disappear, rapidly and permanently. Let me repeat myself. When the body recovers

its balance, the symptoms of the illness *disappear*, rapidly and permanently. *The natural and healthy state of the body is to be symptom free.* So – when you drop a small rock on your foot and develop the objective symptoms of swelling and pain, the swelling and pain are both *gone* in a few days. Right? Well, where did the symptoms go? Did they take an overnight flight to France? No! The swelling and pain were objective symptoms that the body generated after being destabilized by the stress of the dropped rock. When the body recovered its balance, it *stopped generating* the symptoms. Right? Right! Now – if the rock was *really* big, it would have crushed the foot. In this situation, the individual would need some type of medical treatment to recover its balance, because the stress created by the big rock was too much for the body to recover from on its own.

This concept of “*symptom disappearance*” is crucial to our understanding of health and illness. It is an easy enough concept to understand when thinking about something simple like a bruised foot, but what about something more complicated like Migraines, Depression, Anxiety, Fibromyalgia, High Blood Pressure, Kidney Disease, Osteoporosis, Whooping cough, Asthma, Eczema, Arthritis, Lyme Disease, or Rheumatoid arthritis. Would you expect the

symptoms of these disease-states to disappear after treatment? You may not, but I do, and in my office, I have witnessed the permanent disappearance of the symptoms of all of these diseases (and many, many more) after the administration of appropriate Wholistic treatments. My colleagues around the world have all done the same. Wholistic physicians have a term for the permanent disappearance of symptoms – we call it a “CURE.” Imagine that!

To bring this discussion full circle then, let’s do a quick review:

1. Life is a great big bowl of positive and negative stress.
2. Positive stress strengthens the body.
3. Negative stress weakens the body.
4. When we are exposed to a negative stress only 2 outcomes are possible:
 - a. The stress is countered by our built in defense mechanisms, the body maintains its integrity and balance and no symptoms are generated. Health persists.
 - b. The stress is too strong for our body to handle. The stress breaks through our defenses and destabilizes the system. The body compensates and generates symptoms.
5. If the body is strong enough, it re-stabilizes itself all by itself, and the symptoms disappear. Health is recovered.
6. If the body is not strong enough, it remains de-stabilized, and the symptoms of the illness persist until a medical treatment is delivered.
7. Medical treatments which suppress the symptoms of the illness only *manage* the symptoms of the disease.
8. Medical treatments that are curative bring the systems of the body back into a state of balance and equipoise, at which time the body stops generating the symptoms of the illness and a balanced state of health resumes: **THE ILLNESS IS CURED.**

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CHAPTER 4

The Little Shop of Suppression Horrors

Dr. Peter Glidden, ND



If the medical treatment delivered to an out of balance, symptomatic system is *suppressive*, an interesting thing happens. Remember – the symptoms of the illness were present in the first place as a reaction of the body to the impact of some stress. It's kind of like if someone snuck up on you from behind and tried to push you over, your body would automatically react in a way to try and keep you up-right. Symptoms appear in the same manner. They are a reflection of how your body is *compensating* for the effect of some stress. When a suppressive medicine is delivered into an off-balance, symptomatic system, it is like kicking the crutches out from underneath someone. The symptom suppressive medication is *removing* the compensating mechanism generated by the body in the first place. Let's be clear on this. The *symptom complex of the illness* is how the body is *compensating* from the action of the stressor. The *symptoms of the illness* may be unpleasant, or painful, or both, *but they are what the body, in its wisdom, has chosen to do to deal with the situation*. When you suppress a symptom, you are effectively removing the body's compensating

mechanism. Ouch! Interestingly enough, the body is not so easily outmaneuvered. After the administration of a suppressive drug, the body redoubles its efforts and generates a stronger symptom. Double ouch! This is why antibiotics, pain meds, anti-depressants, and anti-inflammatory medicines all need to be *increased* after a few weeks or months of use. As they *suppress* the symptoms that the body is generating, the body fights back and produces stronger symptoms! So the drug then needs to be strengthened to meet the challenge, and on and on we go– “till death do us part.”

Now, who benefits from a medical strategy like this? I know, I know, this is a tough question. “Here, take this medicine – it won't cure your condition, but it will make you feel a little better temporarily. You will need to take it every day. Eventually it will stop working, at which time we will need to increase the dose. We will keep increasing the dose in this manner until the side-effects become too unbearable, or the drug kills you. OK? – Oh! By the way, it will cost \$80/per pill. Will that be cash or credit?”

The pharmaceutical companies have us all over a barrel, and they know it. For the last 100 years we have been the victims of a medical

model that encourages symptom suppression over disease cure. It's time we all snapped out of it and got a clue. But I digress...

In The Little Shop of Suppression Horrors, there are 3 rooms of trouble. They are as follows:

Room 1: If you suppress a symptom for long enough, the body gets tired of fighting back and gives up. It *stops* generating the original symptom, falls back to its next level of defense, and generates a *new* symptom there. The eczema on your arms and legs finally goes away after 6 months of topical corticosteroid and oral prednisone use, but a few weeks or months later, you develop asthma, or ovarian cysts, or PMS, or insomnia, or anxiety, or colitis, or whatever. The MD who delivered the suppressive medication in the first place tells you that the appearance of the new symptom is just a coincidence, but he/she is wrong. (Correlations like this are easier to see if you pull your nose away from the microscope and look at a living patient every once in a while.) Homeopaths have observed this phenomenon of symptom migration following symptom suppression for over 200 years. They have even given it a name: "Hering's Law of Cure." It goes something like this – The body

has layers of defense that it uses to generate symptoms on. The layers start at the periphery of the body and work inwards, becoming more and more internalized at each new level (like a castle that is surrounded by different walls and a moat).

Loosely speaking, these levels of defense are organized as follows:

1. Skin/Mucous Membranes.
2. Muscles, Ligaments, Joints.
3. Internal Organs.
4. Heart.
5. Brain.

This is why most infants and toddlers, when they get sick, get most of their symptoms on the skin or mucous membranes, and interestingly – why most truly psychotic patients rarely get physically sick. The body of a child is new, vital, and strong (usually). So when it reacts to stress, it develops symptoms on its *first* level of defense – the skin and mucous membranes. Measles, mumps, diaper rash, eczema, chicken pox, runny nose, stuffy nose, sore throat and ear aches are all the hallmarks of infancy, and are all symptoms of the skin and/or mucous membranes. (It is interesting don't you think that

when an adult gets Mumps, it affects the genitals and not the skin?). At the other end of the spectrum, we find people unlucky enough to be institutionalized in the Psychiatric Ward. These poor souls have fallen back to their very final level of defense – the brain. Their bodies do not have enough strength to generate symptoms on any of the other levels. So they smoke a pack of cigarettes a day, eat crappy hospital food, and they never get the flu or a head cold or even bronchitis. Meanwhile, they think that they are Jesus Christ. Go figure...

Constantine Hering – the person “Hering’s Law of Cure” was named after, was a brilliant 19th century homeopathic physician. After many years of close observation of how the sick reacted to stress, to allopathic medicines, and to homeopathic medicines, Hering developed his “Law of Cure” which proved once and for all this concept of symptom migration after symptom suppression – and he did it backwards! Hering noticed that when certain sick people were given a *curative* Wholistic treatment, their current symptom would disappear, only to be replaced by the *Return of an Old Symptom* from their past. And guess what? The old symptom that came back had ALWAYS been previously treated with a suppressive medicine. Way

to go Constantine! His theory of the levels or layers of physiological defense was created AFTER observing chronic illnesses being cured in his patients in reverse order relative to time! So, for instance – an adult with asthma would take a curative homeopathic treatment and their asthma would disappear. A few weeks or months later, the same patient would develop eczema – the very same eczema they had had as a child – which had been suppressed years earlier with coal-tar creams. Wow! The same thing happens today, of course, and whenever Wholistic physicians are treating patients with curative medicines, we expect to see the return of old symptoms that were previously treated with suppressive meds. It happens all of the time. But allopaths write this phenomenon off as mere coincidence. How convenient.

Room 2: As just discussed, when a symptom is suppressed for long enough, the body gives up and falls back to its next level of defense. Is this good or bad? It is bad. Why? Because each time the system falls back a level, it gets *weaker* – or more appropriately, it falls back to its next level of defense *because* it was too weak to remain where it was. So now we have a progressively weakening system that has been forced to fall back to its next level of defense,

where it then begins to *generate a new symptom*. Bummer! So what do you think happens next? Well, knuckleheaded allopaths march into this situation and prescribe another *symptom suppressive medicine* - and why not? The first one did its job, right? I mean, the first symptom is gone, isn't it?! This juvenile understanding of the workings of the human body is woefully what drives the entire allopathic medical profession forward. It is reckless, lopsided, and dangerous. The persistent suppression of symptoms over time is one of the main reasons why MD directed medical care is the 3rd leading cause of death in the United States. There ought'a be a law!

Allopaths are more interested in the pathology of tissues in a petri- dish than they are in the vital reactions of living people under stress. Their failures (symptom suppression) are seen as victories because of their misconceptions about health and disease in the first place. This misguided suppression strategy of theirs can only weaken the body and *force* it to fall back to its next level of defense, and from there to generate a new symptom, which will then be suppressed again! This is the reason why most Americans, after the age of 55, are diagnosed with a new illness every 5 years - down and down the patients go, all the way to death. By

the way, this process of falling back to a different level of defense doesn't always happen in such a straight forward manner. Sometimes the system vacillates back and forth between 2 or 3 levels of defense, depending on too many variables to predict. This is another of the reasons why so many people are on so many different medications. Their systems are reacting to the stress of the illness and to the stress of the drug(s) all at the same time. They are pushed first one way, then another, then another, and then, horror of horrors, something else happens: SIDE EFFECTS... Talk about kicking someone when they're down! Triple ouch! Welcome to Room 3 (thank God it is the last room...) of The Little Shop of Suppression Horrors.

Room 3: Side Effects. A side effect of a drug is like a poisoning. It was caused by the drug. Kind of like drinking too much tequila – you vomit and get a bad headache. It was the tequila that caused it. Isn't this just a lovely situation? You go to your doctor with a health complaint. He gives you a drug that suppresses your symptoms. Maybe you feel better, maybe you don't. If your symptoms *do* get better, it was because they were suppressed, and they are soon replaced by a different set of symptoms that your allopath will tell you are just a result

of getting old, and are unrelated to the previous treatment. You are then given a new suppressive medication. It gives you a whole new set of symptoms because of its side effects. So your MD plays around with a few other meds until he finds one that doesn't make you feel so bad, but still, your original problem persists. Eventually, the meds make your system so weak that you die.

Even if you are one of the lucky ones to escape the Grim Reaper's sickle as a result of your MD's care, you are still sick, symptomatic, and suffering! This is what passes for "Good Medical Care!" We have all been brainwashed by the allopathic medical model so completely, that – like the little lemmings happily following each other over the cliff to their doom – we gladly follow our friends and neighbors over the allopathic cliff of pharmaceutical medicine and unnecessary surgery to our deaths. "Please, sir- could I have some more of that expensive and suppressive stuff that may kill me? Pretty please?" Meanwhile, the owners of the drug companies are laughing all the way to the bank.

For the icing on the cake, here's an interesting historical anecdote. I excerpted it from the website of: "The Alliance For Human Re-

search Protection." www.ahrp.org

"IG Farben was the most powerful German corporate cartel in the first half of the 20th century and the single largest profiteer from the Second World War. "IG" (Interessengemeinschaft) stands for "Association of Common Interests": IG Farben included BASF, Bayer, Hoechst, and other German chemical and pharmaceutical companies...IG Farben, was the only German Company in the Third Reich to run its own concentration camp. At least 30,000 slave workers died in this camp; a lot more were deported to the gas chambers. It was no coincidence that IG Farben built their giant new plant in Auschwitz, since the workforce they used (altogether about 300,000 people) was practically for free. The Zyklon B gas, which killed millions of Jews, Gypsies and other unfortunates was produced by IG Farben's subsidiary company Degesch."

Did you notice that one of the members of IG Farben was a drug company called Bayer. Yes, the same company that makes Bayer aspirin.

Bet'cha didn't know that!

Now, think for a moment – how would it be possible for a company connected with the German death camps of World War II, to be able, today, to continue to exist –*and* to turn a profit? Perhaps the light is beginning to break in your mind as to the awesome power that the pharmaceutical companies have in the world. If they can snowball the entire world into forgetting about their connection with the Nazis, how good do you think they would be at convincing you to use their products exclusively, even though they are ineffective and are killing you?

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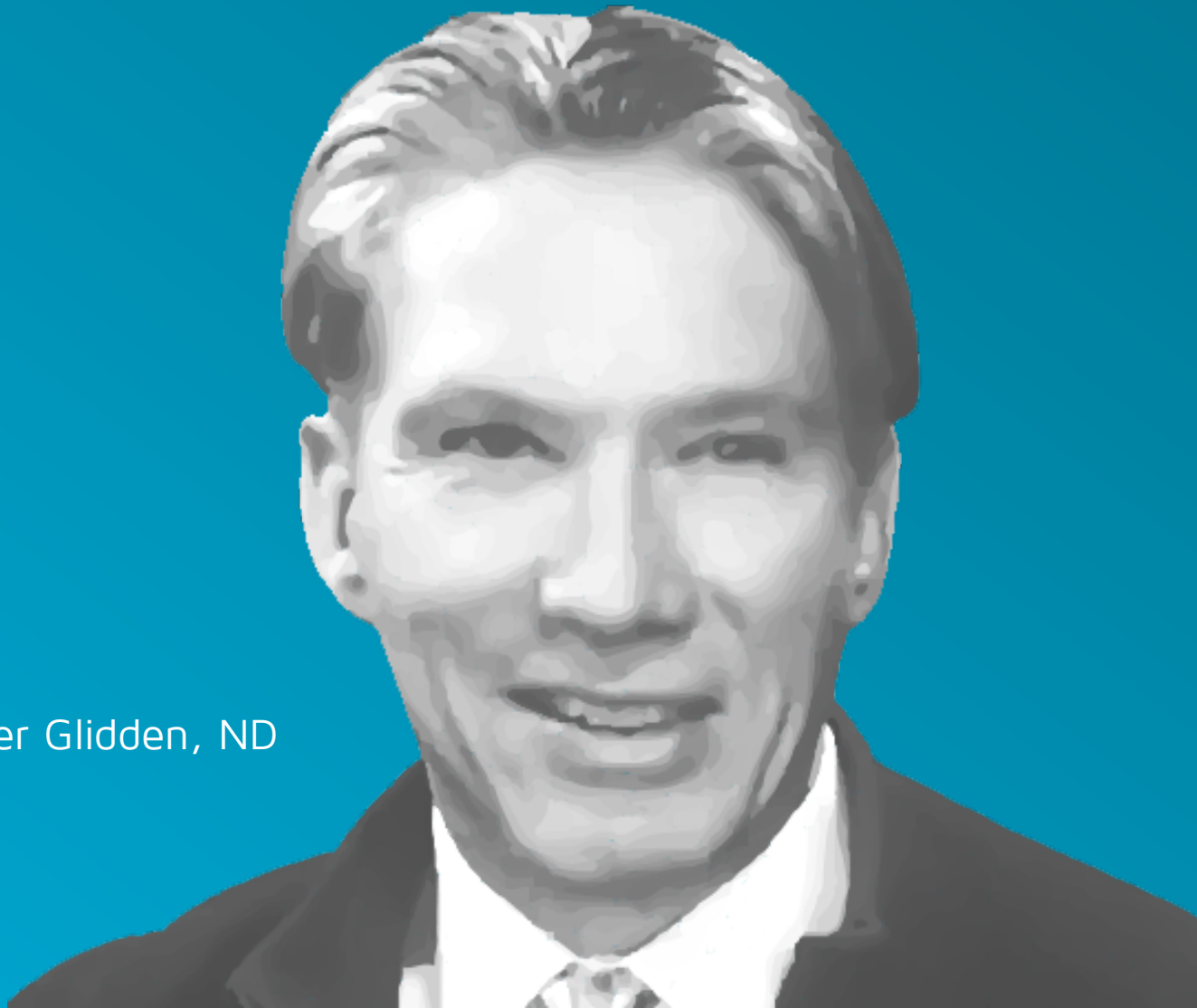
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 5

Health Care, Shmealth Care

Dr. Peter Glidden, ND



One of the sad facts of allopathic medicine that was alluded to in the first chapter is worth taking a longer look at. Here it is: Your MD has absolutely no training, no clinical experience, and no idea what-so-ever of *how to make you healthy*. Allopathic MDs do not practice *Health Care*. They practice *Disease Management*. Since MDs are only trained in *symptom suppression and disease management*, it is *impossible* for them to give you any working advice about anything else. The only prescription drugs that cure anything are antibiotics. Everything else simply manages the disease state. Asking an MD how to live a healthy and long life is like asking a plumber how to fix your computer. He's just the wrong person for the job. As the famous 18th century statesman, John Adams said, "Facts are stubborn things..." One of the most startling facts to ponder regarding modern medical treatment is this one: According to the Amer-

ican Medical Association, the average lifespan of an MD with a general family practice is 59 years old!* That's right, 59 years old!

So why would anyone in their right mind ask someone who is only going to make it to 59 for advice about health? The ONLY reason that we ask these people for health advice is because for the last 100 years, MDs have been the only show in town, and most of us have simply had no other option. Dr Joel Wallach, BS, DVM, ND in his infamous audio tape (and book), "Dead Doctors Don't Lie," drove this point home quite nicely. If you haven't heard this tape, nor read the book, I highly recommend both - you can buy copies here: www.drjwallach.com.

No – I didn't just come in from outside where I was beating a dead horse, although that may be what it seems like. Remember that whole perspective thing I talked about in the introduction? It's very important. So in the spirit of perspective then, let's take a look at how medicine is routinely dispensed & practiced in the good old U.S. of A.

* Dead Doctors Don't Lie, Joel Wallach BS, DVM, ND. ISBN-13: 978-0974858104

Let's say that someone named Carmella, a 45 year old African American woman, goes to her local MD for a yearly check-up. Her only complaint is consistent pain in her left knee that shows up after she walks a few blocks. The nurse and the doctor do their things, order some lab work and an MRI of her knee. Now – the doctor could have done an orthopedic exam of the knee, and checked it for range of motion and pain in certain stress-positions, but this would have taken too much time. There were 25 people in the waiting room that day. He could also have ordered a much less expensive X-Ray of the knee, but the hospital he is affiliated with just got a new MRI machine and it needed to be paid for. He also gets a kick-back from the hospital for every MRI he orders. Carmella's insurance will pay for it, so why not? The nurse records Carmella's blood pressure @ 142/92 (the high end of normal is 140/90). After all of the tests are back, her MD diagnoses Carmella as suffering from hypertension (high blood pressure) and osteoarthritis of the left knee. He tells her that they are both genetic diseases, and that she has them because she is African American. He is dead wrong. There is no such thing as a gene which codes for hypertension or for arthritis in anybody – be they black, white, pink, purple or yellow. Dr Wallach wrote an entire book

on this subject: [Black Gene Lies, Slave Quarter Cures](#). You can find it on my website (www.drglidden.com).

By the way, here are the three most common causes of high blood pressure:

1. A calcium deficiency.
2. Peripheral arterial disease (PAD) of the kidney (clogged arteries in the kidneys).
3. Obesity.

And the **ONLY** causes of osteoarthritis of the joints are:

1. A chronic calcium deficiency.
2. Oxidative damage to the joint by free radicals.
3. Chronic hyaluronic acid, sulphur, and trace mineral deficiencies.

Because Carmella's MD is an allopathic reductionist, it is not his job, nor his inclination, to try and *cure* the arthritis or the hypertension. As a matter of fact, most MDs have no idea **AT ALL** of what actually *causes* disease. (It was one of the most stunning revelations of my life when I figured this out and realized how very little MDs know about the actual physiology of the body relative to disease. I was in shock for

2 days). The only responsibility that Carmella's MD had was to keep her from dying while in his office. Mistakenly thinking that she had high blood pressure because of a mysterious genetic defect he decided to manage it with a drug that a pharmaceutical salesman had given him samples of. He was also obligated to help Carmella to deal with the arthritic knee issue because he had diagnosed it with an MRI. So - Carmella's allopathic, reductionistic, pharmaceutical-centered MD prescribed Hydrochlorothiazide for the blood pressure issue and knee replacement surgery for her osteoarthritis. Hydrochlorothiazide is a type of blood pressure medication that works by artificially relaxing the blood vessels. A major side-effect of this drug is Type II diabetes. That's right – the person taking it eventually develops Type II diabetes as a side-effect of the drug! Great! But remember – the MDs job was not to help Carmella become **HEALTHY**. His job was to normalize her blood pressure ASAP. If his treatment just so happens to cause something else a few years later, well he can just prescribe another drug for the new condition then. The knee-replacement surgery was not immediately necessary, but her MD again incorrectly assumed that it was caused by a bad gene, and as such, could only get worse. Carmella had excellent insurance coverage, and her doctor could

use the extra money he would get from the surgical procedure, as he has just heard about a real estate investment that he wants to try. So why not?! Trusting in the wisdom of her doctor, and not knowing any better, Carmella agrees to start the BP medicine, and goes through with the knee replacement surgery.

But let's not take our eyes off of the ball. Remember – both of Carmella's conditions were *caused* by simple (and chronic) nutrient deficiencies. Her MD completely missed this fact and should have had his license revoked because of it. Because Carmella's doctor's medical education and clinical experience *had nothing to do with clinical nutrition*, he was completely unaware of the relationship between Carmella's nutritional status and these 2 conditions. So, instead of just giving Carmella inexpensive nutrient supplements which would have *fixed* her problems, he gave her an expensive prescription medicine and a surgical procedure to *manage* them. Additionally, as these treatments did nothing to address her nutrient status, after everything was said and done, she still had multiple nutrient deficiencies – especially calcium!

Five years went by and then Carmella came down with osteoporosis. Guess what caus-

es osteoporosis? Correct! It is a nutrient deficiency disease - especially calcium. Not knowing, or not caring about this, her drug-happy MD then prescribed Boniva™ for the osteoporosis. Oy vey! You would think that someone specializing in medicine would understand the fundamentally basic concept that *thinning of the bone (Osteoporosis) is caused by a calcium deficiency* – but NO! (When I refer to MDs as Idiots, this is why. An oversight like this is on par with an automobile mechanic telling someone that the Air Conditioning in their Lexus doesn't work simply because the car is old, and then recommending that they manage the problem by driving around in the summer with a giant block of ice on the passenger seat). As a cover for this colossal ignorance, every MD in the world will tell every patient in the world that Osteoporosis is a *genetic* disease. When the average Joe on the street hears the term “genetic,” he automatically feels intellectually inadequate, and instead of challenging his MD about it, he backs down, wrongfully assumes that the MD *must* know what he is talking about, and takes the MD at his word.

OK – so now Carmella is on Hydrochlorothiazide and Boniva™, has one fake knee, and still has multiple nutrient deficiencies – especial-

ly calcium. 3 years into the Boniva™ prescription, Carmella's face fell off because her jaw rotted away as a side-effect of the Boniva™! She had to have expensive plastic surgery and an artificial jaw was attached to her skull. The surgery created a lot of pain, which her MD managed with an Oxycontin™ prescription. One year later, Carmella stumbles when walking to the kitchen because the Oxycontin™ (that she can't stop taking because it is so addictive) has made her dizzy. She falls to the floor and fractures her hip. But wait a minute! She was taking Boniva™ to keep her bones strong, wasn't she? Didn't Sally Field tell me that Boniva™ would help my osteoporosis?

- Here's a little lesson in anatomy and physiology that your MD has forgotten: Our skeleton is constantly regenerating itself. It does this by chewing up old bone with cells called “osteoclasts,” and creating new bone with cells called “osteoblasts.” If someone is calcium deficient, their body will not be able to create any new bone tissue (because new bone is made out of calcium), but it can still chew up old bone tissue - and it does. This results in a *net loss* of bone tissue over time, resulting in Osteoporosis. Boniva™ (and Fosamax™) is a type of drug called “Bisphosphonate.” It works by slowing down the

process by which your body chews up its old bone. This allows old bone to build up in your skeleton. This *increases your bone density*, but after 3 years (more or less) the old bone (because it is old) becomes just as brittle as the osteoporotic bone that you had in the first place, and your risk of fracture is high again. If you listen to the commercial for Boniva™ starring Sally Field, she NEVER says that Boniva™ makes her bones strong. She only says that it increases her bone density – which it does... Pretty tricky, right?

Poor Carmella, now she is in the hospital (again!) for hip surgery to fix the fracture. The “pre-op” blood work shows that in addition to everything else, she is now diabetic. Remember - this was caused by the blood pressure medicine she has been on for the last 5 years. Remarkably, she makes it through the surgery without dying, but now the quality of her life is in the toilet because she is in constant pain from the 3 surgeries, has one fake knee, one fake jaw, one fake hip, is addicted to Oxycontin™, and now she has to figure out the whole blood sugar, what can I eat, insulin calculation and injection

thing. Oh! I almost forgot – she still has multiple nutrient deficiencies – especially calcium. Seven years later, she is woken up in the middle of the night by excruciating pain in her back. I mean this pain was BAD – right up there with the pain of childbirth. She dialed 911 and was taken to the ER in an ambulance. The MDs there (55% of whom were addicted to opiod prescription meds)* ran all kinds of expensive tests and found nothing wrong. This is because the drugs that they had become addicted to had begun to interfere with their process of logical thought. Then an intern fresh out of med-school took the time to ask Carmella a few smart questions and he correctly guessed that she was passing a kidney stone. An X-ray confirmed it. Not bad for a rookie. Guess what causes Kidney stones? My, but aren't you a quick study! You are correct – a calcium deficiency!

With a definitive diagnosis in hand, the senior MD at the ER (being addicted to Oxycontin™ himself) simply advised Carmella to up her dose of Oxycontin™ until the stone passed, which took 4 days. Having no experience what-so-ever with addictive substances,

* Merlo, L.J. & Gold, M.S. (2008). Prescription opioid abuse and dependence among physicians: Treatment & hypotheses. *Harvard Review of Psychiatry*, 16, 181-194.

Carmella had neither an understanding of the dangers of this drug, nor of the nastiness of the addictive process in general. After day 4 of the increased Oxycontin™ dose, once the kidney stone had passed, she just kept taking the higher dose, because if she didn't, she would start to feel like crap. Now she was REALLY addicted, but she did not know it, and – you guessed it: she still had multiple nutrient deficiencies - especially calcium!

Twenty months later, Carmella started losing bladder control in the middle of the night when she was lying down in bed. Like a lemming racing over the cliff, again she went straight to her MD's office. He gave her a Detrol™ prescription and tells her that the bladder problem is genetic and is simply the result of aging. He doesn't explain how it can be both, and Carmella is too drugged out on Oxycontin™ to ask an intelligent question. Her MD realizes that her Oxycontin™ dose is higher than normal, but when he sees her chart and her history of 3 surgeries in the last 5 years, and her age (now 62) he thinks to himself that she will not be alive for that much longer, so he does nothing about it. In reality, Carmella's recent problem with bladder control was caused by degenerative disc disease in her spine. A nerve coming

out of her mid- back that goes down to her bladder was being squished by her body weight every time she lay down at night because the padding that the disc usually gave was no longer there. The purpose of the disc is to cushion this nerve as it exits the spine, but now the disc had degenerated and become very thin – like a pillow that had lost its feathers. So when Carmella lay down at night, because there was no more cushion, the weight of her body pressed directly on the nerve that went to her bladder – making her urinate involuntarily. By the way, degenerative disc disease is caused by a chronic calcium deficiency. But I am assuming you had guessed that already.

Time goes by, and eventually Carmella got another fake knee, another fake hip, and then she died from an overdose of morphine while in the hospital recovering from her last surgical procedure. The last decade of her life had become little more than a revolving door to the hospital, and a nightmare of fear, frustration, drugs, surgery and pain. Her MDs, however, having extracted all of the \$\$ that they possibly could from her, slept quite soundly through it all, having convinced themselves that they had delivered the very best care that money could buy. After all, how could anybody possibly hope

to win a fight against a bad gene?

If Carmella had come to see me, or one of my colleagues, her nutrient deficiencies would have been taken care of in the very first visit. Within 4 weeks, her hypertension would have cleared up, and within 6 months her left knee joint would have rebuilt itself. She never would have developed kidney stones, osteoporosis, or degenerative disc disease. She would have avoided all of that pain and suffering, and the last 2 decades of her life would have been healthy ones. But because her insurance wouldn't cover the services of a Naturopathic physician, and the nutritional supplements she would have needed to take to fix it all would have cost her \$195/month out-of-pocket, she decided to go to her MD instead. Besides – he sat her down in his expensive office, and told her that vitamins were ineffective, dangerous, unproven, and that naturopaths were quacks. He also told her that the whole damn thing was her fault in the first place—as she was the one with the bad gene.

Carmella's doctor violated her trust either out of ignorance or out of malice. Neither is acceptable. His treatments ruined the quality of her life, and made a bad situation worse and worsen and worst. And let's not forget the incredible amount of money that this lifetime of misdirected MD medical care cost. The problem with Health Care in the USA is that it is not Health Care. It is MD directed allopathic, reductionistic, pharmaceutical-centrist *Disease Management*. When sick and scared, average Americans do not get to choose between a Homeopath, a Naturopath, an Acupuncturist, or an MD. They get to choose between MD "A," MD "B," or MD "C." This is really no choice at all.

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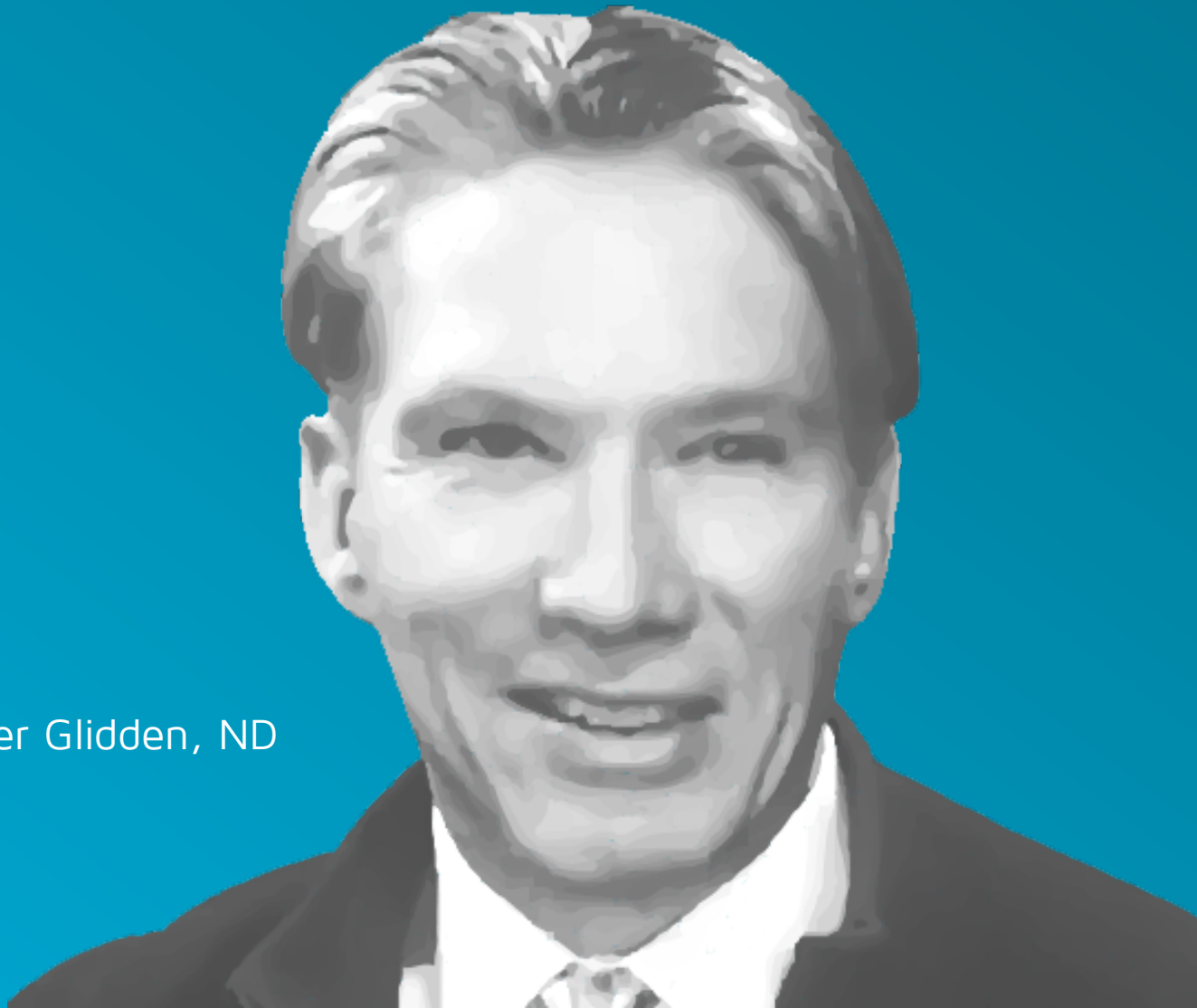
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 6

Ship of Fools

Dr. Peter Glidden, ND



MDs would have you believe that the reason you are sick is because of some mysterious and undiscovered “Bad” gene. They would have you believe that they have been unable to find the cures to arthritis, cancer, high blood pressure, osteoporosis, insomnia, depression, obesity, kidney disease, fibromyalgia, migraine headaches, rheumatoid arthritis, lupus, underactive thyroid, kidney stones, overactive thyroid, hernia, baldness, aortic aneurisms, varicose veins, hemorrhoids, glaucoma, macular degeneration, cataracts, ovarian cysts, uterine fibroids and the common cold because of some undiscovered GENETIC something. It couldn’t possibly be because they are just incompetent at what they do. IT MUST BE GENETIC! This is the PR message that we are being fed by the

medical industry, and it is ridiculous. Everything from Autism to Xenophobia is blamed on genetics, and the average American, upon hearing the word “genetic” feels intellectually inferior, shuts up, and immediately stops questioning the pronouncements of the (presumably) “smart” MD. This is how MDs get away with their BS. They *know* that their treatments don’t work, but instead of re-visiting their reductionistic philosophy of health and starting over, MDs arrogantly presume that their poor treatment outcomes couldn’t possibly be *their* fault. So they place all of the blame at the feet of the *patient*. The patient got sick and died because *they* had a “bad” gene!

The next time an MD tells you that your condition is genetic, here’s what you do: Pause for a breath, look them straight in the eye and say “Really? My condition is genetic? Well, OK – Exactly which gene seems to be the problem?” This question is unanswerable, because the field of genetics is so complicated, that nobody can ever make this determination.* MDs *presume*

*There are a handful of diseases that are in fact genetic. They are all congenital, which means that they happen to the developing baby while it is still in the mother’s womb. Down’s syndrome, Cystic fibrosis, and Cleft lips are 3 common genetic diseases. MDs will neglect to tell you, however, that the gene that codes for a truly genetic disease becomes turned “on” in the absence of a particular nutrient in the mother. The gene that expresses Down’s syndrome becomes active in the absence of the mineral zinc. Cystic fibrosis is caused by a deficiency in Selenium in the pregnant mother, and cleft lip is caused by not enough vitamin B12.

that your problem is genetic, but they speak to you as if it is a fact. It is not. If any doctor tells you that your disease is genetic, they are lying. What they really mean is: “Well, I really have no idea at all of what is causing your problem, but instead of admitting my ignorance, and appearing stupid, I will simply blame it on genetics. That’ll be \$250 please. Do you have your insurance card?”

If you put a frog into a pot of cold water and slowly bring the water to a boil, the frog will remain in the water and die. If you drop a frog into very hot water it will immediately jump out. We are all like the first frog. All that we know is that all of our friends and family members get sicker and weaker with the march of time. Even our family MD gets sicker and weaker with the march of time. So we think to ourselves that all of this doom and gloom is just part of the deal. We think that aging equals sickness. I mean, if even our MD can get cancer, then what chance do we mere mortals have? We are all slowly boiling to death because we have put all of our money and all of our trust into the hands of the wrong people for the job – the MDs. We have bet on the wrong horse, and it is killing us all, slowly.

Everybody in our country is sick because everybody eats the wrong foods all of the time, and everybody is under-nutritified all of the time. If you put diesel fuel into an unleaded engine, it will run like crap, if it runs at all. If your automobile engine needs 8 quarts of oil, but only has 3, it is only a matter of time before it seizes up. The exact same concept applies to the human body. This is not rocket science folks! If you give your body the *correct* fuel and *all* of the raw materials that it needs to operate efficiently *every day*, then you will rarely get sick, and you will live a long and healthy life. It is just that simple.

But because *everybody* is sick, we all think that sickness is inevitable, or genetic, or a function of aging. We all mistakenly believe that the older we get, the more our bodies *must* deteriorate. Just look around, there is tons of evidence to support this belief – because everybody is sick! Oy vey! (Where’s the tequila?) In reality, we have no perspective on the matter, because the *only* type of medicine that our friends and family members use is MD medicine. The *only* type of medicine allowed by our hospital is MD medicine, and the *only* type of medicine that our insurance will pay for is MD medicine. All we really know is that under our MD’s care, it is

expected that we should get sick and die as a normal part of the aging process.

So guess what happens? The older we get, the sicker we get, and then we die! Then our misguided relatives, who are also boiling to death in the MD disease management pot of water, donate lots of money to MD directed drug research in the vain attempt to find the cure to heart disease, or arthritis, or cancer or whatever it was that killed us, even though Wholistic doctors have been curing these things for over 3000 years. On the ship of fools, can you guess what the sane physicians are called? It rhymes with “jacks.”

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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 7

Facts Are Stubborn Things

Dr. Peter Glidden, ND



If I were running around town saying that gravity didn't exist, a reasonable person would expect me to be able to prove it. To be able to prove this point, I would have to do something like jump up and float around the room, or hit a golf ball to the moon. I would need to back up my position with factual proof. In everyday life, people have opinions about a lot of mundane things – the type of car that they think is the best, the political party that they think is the best, the best way to cook a pizza, and so forth - that's just human nature. In the greater scheme of things, it is really not that important that somebody actually proves that deep dish pizza is better than thin crust. Most people are going to eat the pizza that they like, regardless of what anyone else says. Again, this is just human nature. But opinions about *important things* like medical treatments need to be supported by the facts, as lives are on the line. If I am correct in my assertion that MD directed reductionistic, pharmaceutical medical

treatment DOES NOT WORK for chronic disease, then there should be facts to support my position. There are. The fact of the matter is, that there are nothing but facts to support my position. (Say that ten times fast). I could write an entire encyclopedia outlining the facts concerning the enormous *failings* of our MD brethren over the course of the last 200 years. An easier way to see these failings firsthand is to just go to a hospital. *Everybody* in the hospital (that is not a trauma patient) is in there because their MDs have failed them.

Health is our birth-right. The only reason that our health fails us is because the medical treatments that we have decided to use (MD treatments) DO NOT WORK. Wholistic treatments cure disease and secure health. Wholistic treatments cure disease and secure health. Wholistic treatments cure disease and secure health. Is it sinking in yet? People don't get sick because they have a bad gene or because they have been cursed by God, or because they are getting older. They get sick because the doctor they have gone to is incompetent. If I and my Wholistic colleagues can cure these things, then why can't the MDs?

Instead of writing an encyclopedia, I

have outlined below the more salient failings of our misguided MD cousins. If you are wearing that seatbelt I alluded to in the Prologue, this would be a good time to tighten it up.

- Depending on how you crunch the numbers, MD treatments are the first, second or third leading cause of death in the US.¹ 1 – 2 million people are killed, wounded or infected by MDs every year – and nobody goes to jail. 3000 people die on 9/11, and we go to war. Go figure.
- Heart disease is the leading disease-killer of people in the United States. It has been the number one disease-killer for the last 80 years.² MDs have been in charge of medical care in the US since 1920.³ Now it is 2010, so that's 90 years. This means, that under the watchful care of MDs, heart disease has remained the number 1 disease killer of people in the US for 80 years. This is a disturbing statistic when you consider the fact that statin drugs – the drugs sold to us as being the cure for heart disease are the *most prescribed* drugs in the country – to the

tune of 16 Billion dollars a year.⁴ Additionally, because of the advice of our MDs, we have been on a fat-free food craze in this country for 20+ years. You know the drill. Butter is bad! Fat is evil! Olive oil is the answer! If statin drugs and fat free diets *worked*, then wouldn't a reasonable person expect to see heart disease rates *declining*?² Why, YES, they would, but they don't! Twenty six MILLION People a year have heart disease! Way to go, Dr. Jarvik.*

When you do a Google search for “Heart Disease Trends,” you are directed to websites that tell you about *death* rates – not the actual number of people who have heart disease. According to The US government and the Center for Disease Control, *deaths* from heart disease have *fallen* dramatically over the past 50 years, from over 589 deaths per 100,000 people in 1950 to less than half that number in 2000 (258 per 100,000). If you weren't paying attention, upon looking at these numbers you would think that heart disease is actually getting better. It is not. The devil is in the details. According to the Population Reference Bureau (www.prb.org)

*Robert Jarvik MD, creator of the artificial heart and pitch man for Lipitor.

“The declines in heart disease deaths can be explained, in part, by improvements in emergency care. Decreased smoking accounts for some of the improvement, but only in recent years. An often-overlooked factor in the decreased number of *deaths* from heart disease has been the general decline of infectious diseases, since heart disease can be brought on and complicated by infections.” What all this means is that just as many people are still *getting* heart disease as they always have, but fewer are dying from it. The fewer deaths are attributable to improvements in the treatment of *other* diseases (infections), not because of the actual treatment of heart disease itself!

Cancer deaths have remained relatively constant since 1950 at about 200 deaths per 100,000 people, making cancer the number 2 disease killer in the US.⁵ I have devoted an entire chapter to the cancer problem, but the take home message here is that MD directed medical treatment has caused us to lose the war on cancer. We have LOST the war on cancer. If you think otherwise, then I have a bridge to sell you in London.

- There has been a 36% *increase* in obesity in the United States from 1976 – 2007.⁶ Ap-

proximately 64% of the US population is overweight or obese. The fastest growing segment of the population that is overweight is children! Approximately 17% of children under the age of 17 are obese. In 1976, it was approximately 6%. While MDs have been driving the medical bus, obesity levels have SKYROCKETED.

- Now let me see, I was going to talk about something else next. What was it? Hmm, let me think. Just give me a minute... Let me think... Oh yes! I almost forgot – it’s Alzheimer’s disease. By putting MDs in exclusive control of the medical marketplace for the last century, Alzheimer’s disease has risen from complete obscurity to the 6th most prevalent disease in the U.S.⁷ An estimated 5.3 million Americans of all ages have Alzheimer’s disease (2010). This figure includes 5.1 million people aged 65 and older and 200,000 individuals under age 65 who have younger-onset Alzheimer’s. One in 8 people now (13%) have Alzheimer’s disease. When I was a kid, I didn’t know *anyone* who had Alzheimer’s disease. Now – it’s one out of 8 people! My colleagues and I are of the opinion that Alzheimer’s disease is a *physician created* disease. (I told you to fasten your

seatbelt). Let's look at this from a common sense point of view. If I had a patient with a broken bone, I would give him high doses of calcium, because bones are made from calcium. If I was treating someone with arthritis I would give Glucosamine sulfate, as that is one of the things that joints are made from. So – If I am helping someone who has a problem in their brain (Alzheimer's), I am going to give them the raw materials that their brain needs to stay healthy. Guess what the brain tissue that is affected in Alzheimer's disease is made from? (In addition to tightening on your seatbelt, you may want to assume the crash position). The part of the brain that is affected by Alzheimer's disease is made from *cholesterol*. That's right – *cholesterol*! For the last 30 years MDs have been telling us that cholesterol is bad, and have been aggressively encouraging us to drive our cholesterol levels into the dirt with fat free diets and statin drugs. In this same time period the rates of heart disease have *not changed* and Alzheimer's disease has burst onto center stage as the 6th most prevalent disease. Think there's a connection? We do. It's a no brainer really. (No pun intended). If you drive calcium out of the body every day, or if you don't put enough calcium into the

body on a daily basis, you get problems in the bones and joints (osteopenia, osteoporosis, arthritis). If you drive cholesterol out of the body with fat free diets and cholesterol lowering drugs, your brain dries up and you can't remember who the hell you are.

- By the way, there are **NO DISEASES** caused by elevated levels of cholesterol or triglycerides.⁸ **NONE**. Cholesterol is so important to the human body that our livers make it. That's right – our livers *make* cholesterol! Statin drugs work by disrupting the process in the liver by which the body makes its own cholesterol. This is why you have to have a blood test every 6 months to check your liver health when you are on a cholesterol lowering drug. So then, from listening to the advice of our allopathic, reductionistic, drug-happy MDs, 13% of our parents and grandparents have lost their minds, literally. By the way, can you guess what all of our sex hormones are made from? That's right! Cholesterol! Imagine that! Other consequences of driving our cholesterol levels into the dirt are the emergence of Erectile Dysfunction and Menopausal symptoms that last for 3 years instead of 3 months. Men can't "get it up" because they don't

have the raw materials (cholesterol) their bodies need to make Testosterone. Post menopausal women have hot flushes for 3 years instead of for 3 months because they don't have enough cholesterol to make the proper levels of estrogen and progesterone. But don't worry – they make drugs to fix those things. Ever heard of Viagra? How about PremPro?

If you are not angry yet, you are simply not paying attention.

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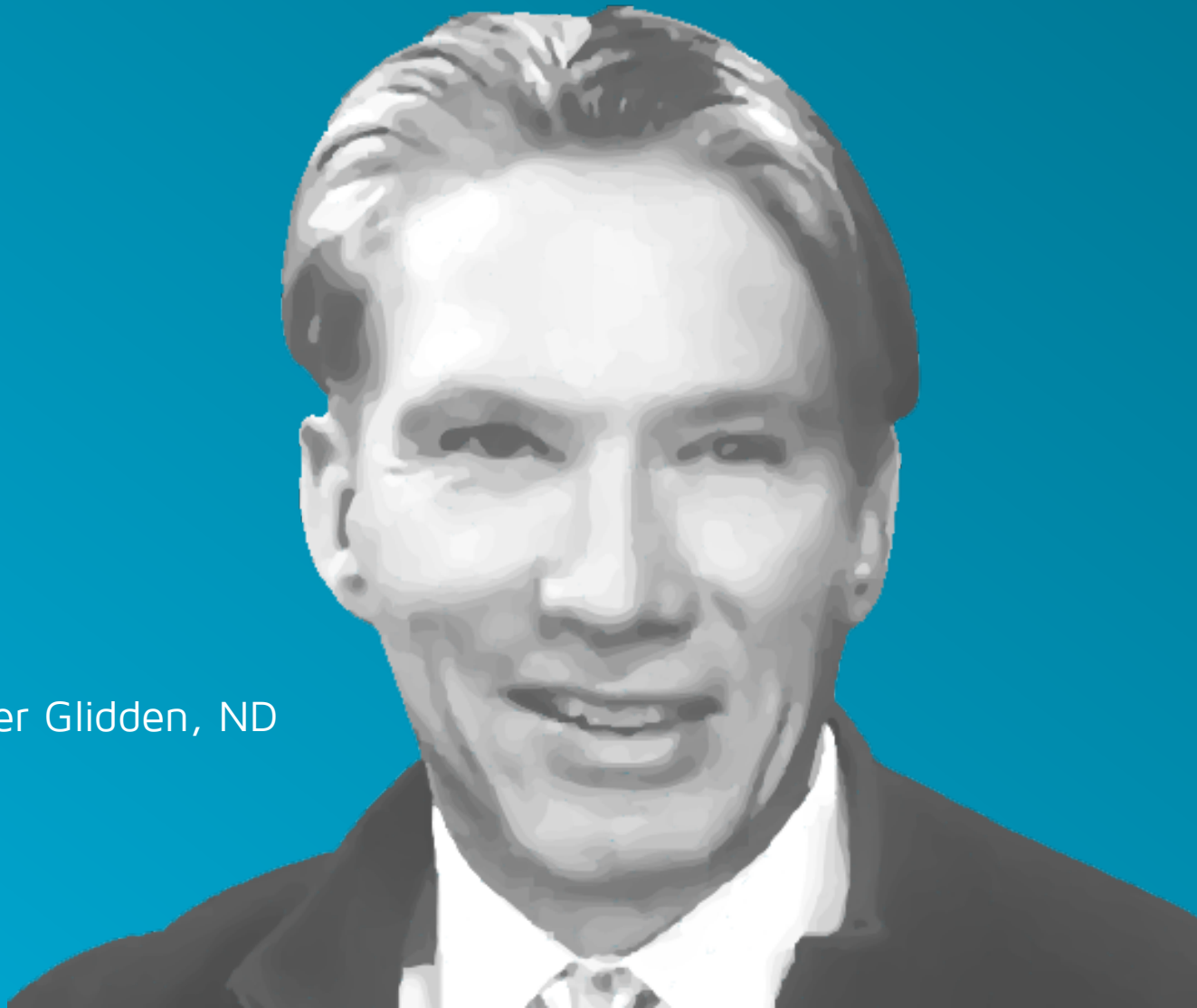
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 8

The Wisdom of the Body

Dr. Peter Glidden, ND



Often you will hear that Wholistic medical treatments respect and work with the “Wisdom of the Body.” Well, they do. But what exactly does this mean? Part of the answer is probably not what you are thinking. The *symptoms* that the body generates when it is sick are a prime example of the “Wisdom of the Body.” What!? How can something painful be the result of my body’s wisdom? Well, let’s think it through. Remember – a *symptom* is how the body has chosen to *compensate* for the effect of some stress. It is a natural and spontaneous occurrence that the body is generating of its own free will. The symptom may feel like crap, and usually does, but it is the wisdom of the body that is creating it. Allopaths have been trained to deliver medicines that *fight or oppose* the symptoms that the body generates. In this regard, allopaths are of the opinion that they are smarter than the body, smarter than Nature. So they pay little attention to the body’s wisdom, and indeed – such a concept is not even considered possible to them. I mean, how can an “evolutionarily

lucky” collection of biochemicals and electricity be considered wise?

When an MD treats a sick person, they deliver medicines that attempt to *overpower* the symptoms that are generated by the body. Such is the world-view of the reductionistic allopath, and it leads them into a dead end road of treatment oblivion, because in dismissing the Wisdom of the body outright, they completely miss the point, and it becomes virtually impossible for them to deliver medicines that are curative. So guess what happens? *Their medicines are not curative!* Ever heard of anyone *curing* their asthma, their high blood pressure, their arthritis, etc? No! Allopathic medicine can only offer *management* of the symptoms of the disease – not because the disease is incurable, but because the medicines are delivered in the wrong way. Wholistic physicians cure these diseases all of the time. Imagine that.

Let’s look at this situation from the Homeopathic perspective: (Remember, Homeopathy is just one type of Wholistic medical treatment – its philosophy is unique to itself. A Chiropractor or Acupuncturist would look at this situation differently, but still from a Wholistic vantage point.)

Somebody gets caught in a cold and rainy downpour without a hat or raincoat, gets drenched, and comes down the next day with a simple head cold. In this example, the stress was the weather, and it was enough of a stress to destabilize the system. As a result of being destabilized, the body generated the *symptoms* of the head cold (stuffed nose, sore throat, low grade fever, cough, and headache). Those particular symptoms were a manifestation of the wisdom of the body. So instead of delivering medicines to *suppress* these symptoms (anti-histamines, anti-inflammatory meds, cough suppressants, and pain meds) as an allopath would do, a homeopath will give a medicine that *increases* the symptoms, pushing the body in the direction that it (in its wisdom) was already trying to go. What!? Are you crazy!? Won't this just make the person sicker? One would think so, but interestingly, just the opposite occurs. When you deliver to a sick person a medicine that exactly mimics the symptoms of their illness, their system re-establishes its balance, and the illness disappears. What!? Yes – it is true.

This phenomenon of symptom eradication by the delivery of a medicine that produces symptoms which are *identical* to the organic dis-

ease forms the bedrock of homeopathic medical philosophy and treatment. It is known as “The Law of Similars.” It is one of the greatest discoveries in all of medical history, and it has been completely cast aside by idiotic allopaths. Did I say idiotic? Well, yes, I did. I am choosing my words carefully. In addition to being a pejorative rant, this is also an accurate assessment. Webster defines “Idiot” as: “An utterly foolish or senseless person.” My supposition is really quite straightforward: If there exists in the modern world a system of medicine practiced by licensed physicians, which has been *proven* to bring about documented disease cure in clinical settings over and over again for 200 years, and, as a physician, I completely disregard, dismiss and condemn it without any intelligent investigation whatsoever, would it not then be appropriate for me to be defined as “an utterly foolish and senseless person?” I rest my case. When it comes to health care most MDs *are* idiots and it is high time we started calling a spade a spade, and took them off of the pedestals we have afforded them for the last century. Their medicines are killing us! Snap out of it! But again – I digress...

The Wisdom of the body manifests itself in many other ways besides symptom genera-

tion. A chiropractor, an acupuncturist, an herbalist, and a naturopath all have different treatments for the sick, yet each of their treatments is designed to strengthen some aspect of the Wisdom of the body, **SO THAT THE BODY CAN HEAL ITSELF**. Chiropractors support the Wisdom of the body by aligning the spine the way nature intended it to be aligned. This frees up and optimizes the nerve transmissions that emanate from the spinal cord, thereby making the body work better. Acupuncturists free up blocked energy (referred to, in their parlance, as “Qi”) meridians in the body through the correct placement of their needles. When the “Qi” is allowed to flow unimpeded - as Nature intended it - the body recovers its health. Naturopaths will deliver immune-stimulating herbs and clinical nutrition to a diseased system, to support the body’s ability to fix itself. (Clinical Nutrition is a VERY important subject, and eclipses ALL other treatment modalities in its ability to generate healing— so important that it gets its own chapter: 13). Can you see the pattern here? It is utter insanity to completely disregard the Wisdom of the body when you are attempting to fix the body, but this is exactly what allopaths do over and over again.

Let’s take this “wisdom” concept a lit-

tle further. Your body created itself from a one celled organism. Talk about wisdom! It knew just what to do, and how and when to do it. It knew how to grow itself. Furthermore, once grown, it knew how to regulate its own affairs. All of the myriad workings of the human body are orchestrated automatically and unconsciously all of the time by the wisdom of the body. Nerve transmissions, breathing, heart rate, respiration, hormone secretion, digestion, immune response, brain waves, etc., are all happening without our permission, direction or intervention every nanosecond of every day. The human body has also *evolved* over time. Our immune systems are now stronger than those of our ancestors, and our brains and bodies are larger as well. We grow, we adapt, we change, and it is all completely out of our conscious control. Wholistic physicians, in observing all of these things, have come to the conclusion that the wisdom of the body is real and awesome, and that it would be wise to deliver treatments that attend to it. What a concept! This is why *all* Wholistic medical treatments are delivered in the manner that they are. They are all attempting to *support* the body, and to work *with* the inherent wisdom that is glaringly apparent in every cell of the body, during every second of life. Wholistic physicians are not motivated

by some warm and fuzzy New Age dogma that believes all drugs are bad and all things natural are good. What utter nonsense! Wholistic practitioners are motivated to do what they do from sophisticated and acute observations of how the body works. Wholistic medical treatments are highly intelligent in their derivation and patently elegant in their application. ALL Wholistic treatments are designed to stimulate/support some aspect of the Wisdom of the Body. This is how and why they are able to CURE disease.

But to our confused and misdirected allopath, Life boils down to a simple bio-chemical coincidence – an evolutionary fiat – a blind stroke of luck. To the allopath, the body has no wisdom, because that is a ridiculous concept. How can a collection of biochemicals be wise? If the body knew what to do, it would never have become sick in the first place. The body is a chemical machine that must be *controlled and subdued*. The best (only) way to control it is to give it drugs that do the *exact opposite* of what it is trying to do when it is sick – period! This is why medical doctors are not interested in talking that much to the patient, and why most people have the experience that their doctor is treating them like a number, or a piece of meat. Allopaths are ONLY interested in coming to the correct di-

agnosis of the problem, and then delivering the most current (suppressive) drug treatment for it. Their treatment is designed to COMBAT the symptoms, and to OVERRIDE, SUBDUE and OVERPOWER the natural workings of the body. Most of the time, the diagnosis can be determined from the objective lab findings. What the patient has to say about their condition is mostly irrelevant, and any interaction with the patient other than getting a brief description of the nature of the problem is time consuming and counterproductive to their upside-down way of thinking.

Mark my words. There will come a day in the not so distant future when allopathic medical treatment will be 90% automated. The patient will stand in line at a “state of the art,” brand new, 10 million dollar MRI / Bone Density / Blood Pressure / Blood analysis machine. When it’s their turn, they’ll swipe their credit card, select their symptoms from a touchscreen, lie down on the machine and let it do its stuff. The computer in the machine will analyze all of the data, and then spit out the drugs necessary to “fix” the problem from a giant Pharmaceutical-Drug vending machine. If surgery is recommended, it will be done by a robot. Let the buyer beware!

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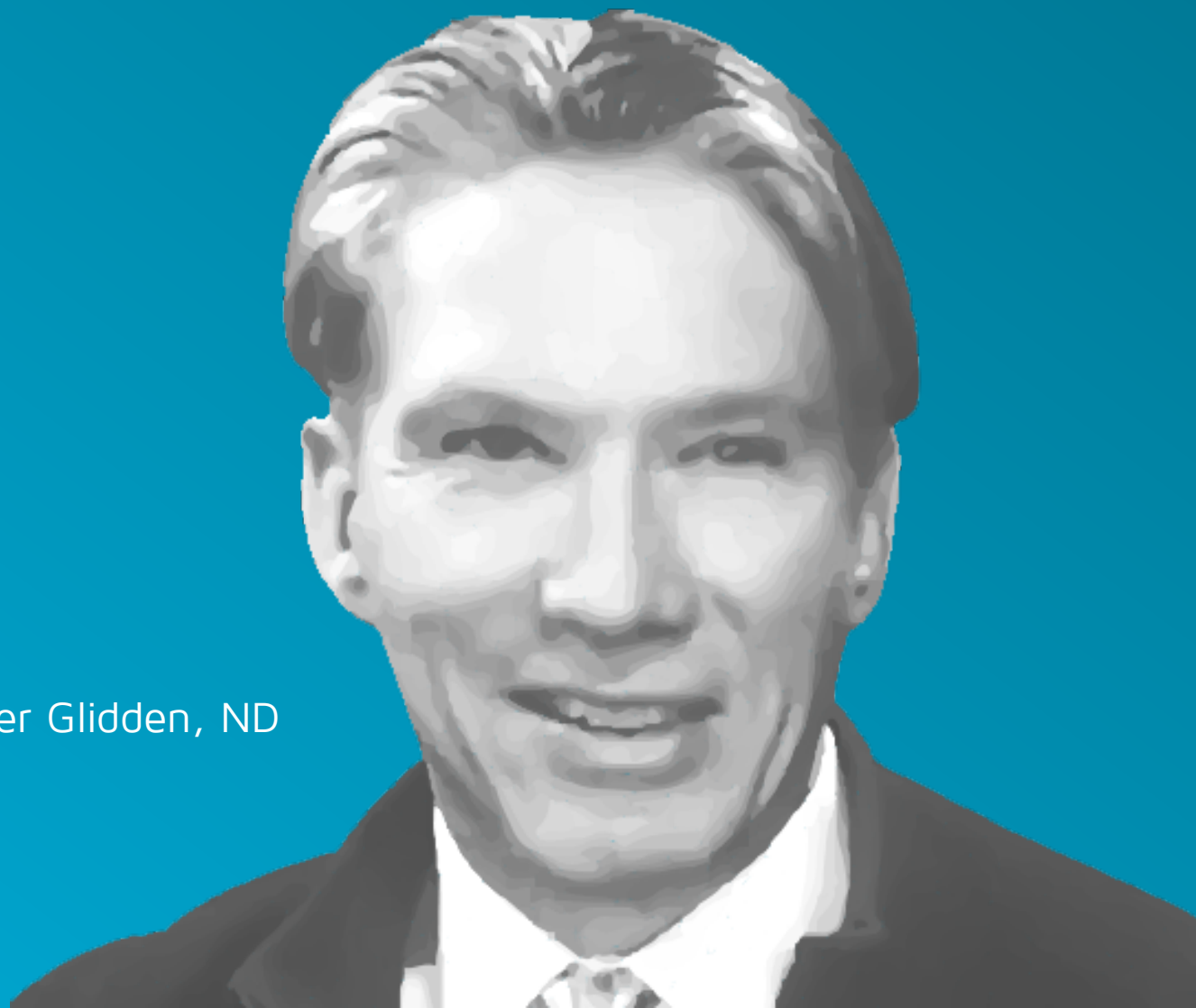
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CHAPTER 9

The Law of Similars

Dr. Peter Glidden, ND



Now the homeopath in me gets to flex his muscles. What I am about to describe is a piece of the *Homeopathic* view of health and disease. One of my specialties is homeopathic medicine. I have 20 years of clinical experience with this sort of thing, so let me embellish a little. Remember, Homeopathy is just *one* type of Wholistic medicine. It has its own unique way to work with the Wisdom of the body, and its own unique medicines which it uses in the treatment of disease. Here is a little window into the mind of a homeopath.

To a homeopath, the *symptoms* of a disease are *everything*. They are the alpha and the omega. They are the gold ring that the homeopath tries to grasp when sitting in the presence of the sick and unhealthy. Acute and detailed awareness of symptoms is completely indispensable to the discovery of a curative medicine with homeopathy. If a homeopath does not have a good understanding of the symptoms of

the sick person, he will not be able to come up with an effective treatment. Interestingly, to the homeopath, the symptoms of the sick person are represented in ways that most people (and all allopaths) would find curious. I was walking down the street one day with a friend of mine who is an architect. I remarked that the town we were in was a little boring because the Historic District Commission had implemented rules that restrained how many colors you could paint a house, and even what type of materials could be used on the outside of it. Well, I might as well have said that the Pope was a Protestant, because he sat me down and proceeded to give me a detailed schooling in the intricacies of the local architecture that I had completely overlooked. We were both looking at the same scenery, but where I saw homogeneity, he saw detail and uniqueness. This house had copper gutters, that one had a whale-tale door knocker made of brass, that one had a circular window over the door, and the one next to it had an upside-down horseshoe masoned into the brick work of its chimney, etc., etc.. This “attention to detail” is what a homeopath uses to analyze someone who is sick. The homeopath is able to pull out *details* of the symptomology which a normal person would completely overlook.

As an example, let's say that a person is suffering from migraine headaches. They go to their MD for help. The office visit lasts 10 minutes, and after listening to a brief description by the patient of what is going on, the MD comes up with a diagnosis of "Migraine headaches," and a generic medication (usually Fiorinol®) is given. If that MD saw 100 migraine patients that week, they would all get Fiorinol®. The patient takes the drug, and it helps to manage the pain, but in a few days the pain comes back, and a stronger strength Fiorinol® is given. This continues for 6 months, with the Fiorinol® helping to shorten the intensity and duration of the attacks, but every few weeks, its dosage has to be increased, and the migraines keep on coming. The patient is eventually put on 3 different drugs over the course of 3 years, to try and manage the pain, and nothing gets cured, the migraines keep coming.

Eventually, the migraine sufferer gets fed up with the ineffective drug treatments and goes to his friendly neighborhood homeopath for help. The office visit lasts 1.5 hours. The homeopath takes an in-depth symptom inventory by asking the patient detail-oriented questions about the headache. Questions like: Where anatomically do you feel the pain? Is it in the front

of the head, the sides, or the back? Does it hurt on one side more than the other? What does it feel like? Does the pain stay in one spot, or does it shift around? When does the pain occur? How long does it last? Is there a predictable pattern to the onset of the attacks? What makes the pain feel better? What makes the pain feel worse? Are there any other physical, mental or emotional symptoms that accompany the head pain? Does anything repeatable or predictable happen right before or right after an attack? Historically, what was going on in your life when the very first attack occurred? Are there any other physical, mental or emotional complaints that have bothered you in a chronic fashion over the course of your life?

The homeopath is not asking these questions to placate the patient nor to engender the patient's trust. He is asking them because, to the homeopath, *the way that the body expresses its symptoms holds the key to determining the cure*. When Sherlock Holmes examined a crime scene, *all* of the minute details were important to him and came into play. Just as sometimes it was the cigarette ash under the kitchen table that held the key to solving the crime for Holmes, sometimes it is a strange, rare or peculiar symptom expressed by the patient that holds the key to the cure for the

homeopath. Here is an example of what a migraine sufferer may disclose from the promptings of a competent homeopath:

“Doc, I get these sharp stabbing pains over my left eye. The attacks happen about once every 2 weeks, but if I am really worried about something, or somebody, they can happen then too. They can last all day. Sometimes the pains feel like they go backwards into my brain, but mostly I just feel them over my left eye. The skin of my face around my left eye gets really sensitive during the attacks, and I don’t want anything or anyone to touch me there. Sometimes the pain feels better if I put a cold towel on my forehead. But I don’t like to do this, because when I take the towel off, the pain always gets worse. Often I will get dizzy right before the pains happen, and the dizziness is made 10 times worse if I look down at the ground. If I lie on my left side the pain gets much worse also, so I hope it doesn’t happen at night because I sleep best when I am lying on my left hand side. The only other thing that

helps me to deal with the pain is if I lie perfectly still. The pains started 4 years ago about 1 month after my mom was diagnosed with cancer – I worry about her too much, I know – but I can’t help it”

Now – when did you EVER have a conversation with your doctor that went something like that? Did I hear you say “never?” Well, that’s par for the course in the ass-backwards land of allopathic reductionism. It’s too bad really. These conversations happen every day in my office, and in the office of every good homeopath around the world. As homeopaths, we have been trained to listen closely to the symptomatic language of the body, as it holds the key to the cure. Why does it hold the key to the cure? I thought you would never ask...

This is where homeopathic philosophy gets *really* interesting, and even borders on the mystical. A homeopath pays attention to the symptoms of the sick person because he is trying to find a medicine which produces *exactly* the same symptoms as when it is given to a healthy individual. The migraine sufferer above would

be given the medicine “*Spigelia anthelmia*”^{*} because, when healthy people take it, they get *exactly* the same pains that this migraine sufferer was experiencing. I have italicized the word “exactly” in the last 2 sentences for a reason. In order for the Law of Similars to work, the medicine delivered to the sick person must match their subjective symptoms *exactly*. This is the problem with homeopathy. If the homeopath does not hit the bulls-eye with the prescription, nothing of value will happen to the disease state. The Law of Similars is a harsh mistress, and demands 100% accuracy with each prescription. If another patient was suffering from migraines, but his pain was over the right eye, and felt worse from lying still, *Spigelia* would not afford him a cure! This is why, to the homeopath, the concept of generic dosing for a disease is childish and absurd. Everybody is unique, and the symptoms of their diseases are also unique. There is no “one size fits all” homeopathic medicine for anything.

As discussed before, this concept of paying attention to the language of symptoms also

brings to light an interesting distinction between allopathic and Wholistic medicine (in this case, homeopathy).

Allopaths have been trained to treat the disease. So everybody with the same diagnosis gets the same drug.

Homeopaths have been trained to treat the person. So everybody gets the medicine most suitable for their own unique set of symptoms. Ostensibly, a homeopath could be treating triplets for pneumonia, and even though they have the same genes, and were exposed to the same bacterial stress, they will need 3 different medicines in order to get better because they have 3 completely different sets of pneumonia symptoms.

Let’s take this concept one step further. From the unique perspective of the homeopath, *there is no such thing* as “pneumonia,” or “asthma,” or any other disease for that matter! Think I am wrong? OK – please bring me some pneumonia. Can’t do it? Well, what about a pen? Can

^{*}A common weed in South America, also a native of the Southern States of North America. Its Latin name is: *S. Marylandica*. Its common names are: “Pink-root” or “Worm-grass.” A homeopathic preparation is made from a tincture of the dried root.

you bring me a pen? You can?! Why thank you! What about arthritis? Please bring me a box full of arthritis. What's that you say? You can't do it? Exactly! You can't do it because diagnostic names are merely that – they are *names* only, and as such they are all intangible. A pen, on the other hand, is a tangible object. A diagnostic name is only a *description* of the *general* state of a disease process. It does not exist in the real, physical world as a tangible object. Somehow, the close-minded allopath has chosen to turn a blind eye to the individualizing details of the symptomology of the sick, and focuses instead, on its gross generalities. This is like referring to a Chihuahua, a Great Dane, and a mutt that is ½ Cocker Spaniel and ½ Golden Retriever all as 'dogs.' Well, er- yes, they are in fact, all dogs, but they are at the same time EXTREMELY different each from the other, and you would think that those distinctions would be important. Well, they are – but not to the allopath.

To the Wholistic physician, the distinctions in the symptomology of the disease are *everything*. We can say that there are *types* of pneumonia, *types* of arthritis, etc. But this is as far as we are willing to take it. Terminology has its place, of course, and Wholistic physicians understand that if somebody has a definitive di-

agnosis of pneumonia (for example) then there are certain indications that we can expect to see in their blood work and on their physical exam, and we also know that there are certain predictable signs as to the different stages of pneumonia in general that we need to be on the look-out for. But our treatments are not designed to treat pneumonia, because pneumonia is an intangible *description* only. The Wholistic (homeopathic) treatment is designed to treat the *person* who is suffering from the thing that we are calling pneumonia. Ten different people, all with pneumonia, would need ten different treatments from a homeopath – so how is it possible for them to all have the same thing? They don't! They all are suffering from different manifestations of a disease process which is *generally* referred to as pneumonia. Get it? Good, - now I'm out of breath!

Well, "Great!" you may think, but just how does it work? I mean, how does the Law of Similars bring about healing? Good question! The answer is: "I don't know." Nobody knows *why* or *how* the Law of Similars works. We only know *that* it works – its mechanism is unclear. In this regard, it is like gravity. Scientists can measure the effects of gravity, and know what to expect when it is present, but they have no

idea of what causes it. Not even Einstein could figure that out. So it is with the Law of Similars. We can see it work, and predict with accuracy what will happen when it is activated, but the mechanism by which it works is unclear. There is, however, an interesting analogue to the Law of Similars in the world of physics that is interesting to talk about. When scientists study how waves (water waves, sound waves, radio waves, etc.) affect each other, they notice an interesting phenomenon. When 2 wave forms of *exactly* the same wavelength and frequency run into each other, they cancel each other out completely. This is the science that noise canceling headphones are based on.

I remember a physics experiment from my high school days. The teacher took a rectangular waterproof tank that had Plexiglas on the bottom so you could see through it. He put about an inch of water into it and then put it on the overhead projector so the image of the water could be magnified and projected onto the wall. Then he dropped 2 fishing sinkers that were the same weight into opposite ends of the tank (from equal heights). When the weights hit the water, they created waves that were exactly the same (the same wave-length, wave height, and frequency). As the 2 sets of waves rushed

toward each other from opposite ends of the tank, they caused lots of turbulence in the water. But where they finally intersected each other in the middle of the tank, the water was COMPLETELY calm. Not a ripple! Very cool! This was not happenstance, and the teacher wasn't a magician. The experiment was meant to demonstrate the particular law of physics which states: "When 2 identical wave forms intersect, they will cancel each other out." It is theorized that the Law of Similars works the same way. But nobody knows for sure.

What we do know for sure is that when we deliver a medicine to a sick person that caused in a healthy person the exact same set of symptoms, the sick person's illness disappears - every time. Here's an example. It is excerpted from the book: Testimony of the Clinic, by E.B. Nash, a prominent 19th century homeopath. I include it here for 3 reasons: 1) to give you a little taste of the grand history of homeopathy, 2) because it is an excellent example of the power of the Law of Similars, correctly activated, and 3) because I like the way these guys used to write.

"A boy of thirteen, becoming overheated while roller skating sat down on a curb stone

to cool off. A severe cold resulted with general aching; next rheumatism of knees and ankles developed; worse on motion. Next day it had left the legs and attacked the shoulders and arms. From that point it flew back to the feet, which began to swell. He had received *Bryonia*, *Lachnanthes*, *Ledum*, etc., (e.g. 3 homeopathic medicines) according to the symptoms; but at this point I was confined myself to my home for some days, and had to rely upon the reports of his parents, which were vague and indefinite. They now reported that while the feet continued to swell, the rheumatism was gone, but that now he had pain in his chest; it hurt him to breathe, was impossible for him to take a long breath. I gave *Bryonia*, then *Cimicifuga* (e.g. 2 homeopathic medicines) upon their representation, without good result; the boy grew worse. On the sixth day the mother reported that the boy was so weak that he could scarcely speak. I cross-questioned her very closely. Among other things asked, lying upon which side was the pain worse? 'O,' exclaimed the poor woman, 'I forgot to tell you, he can't lie down at all. He hasn't lain down for five nights. We have him in a Morris chair. He sits bent forward all night with his head resting in a chin strap made of towels.' A light broke upon me. Then I knew it was no pleurisy I had to deal with, but rheumatism of the heart.

I hastened to his home. As I entered the room I was shocked at the pitiful change in the child since I had seen him six days before. The labored gasps for breath could be heard outside the door; the little figure sat bent forward in the Morris chair, face blue, cyanotic, swollen, feet and ankles swollen as big as watermelons; but the thing that struck me most as I entered was the terrific visible throbbing of the carotids (e.g. the arteries in the neck that you feel when checking for the heart-beat), which could be seen across the room. It was with great difficulty that I could examine his heart; he could not endure the least touch, and at each attempt he gasped, 'O, doctor, give me a little more time.' I finally made out a muffled, tumultuous heart sound, as if beating under water. The temperature was 103°, yet there was a great deal of perspiration, urine very scant, no thirst, no appetite. He had only slept short naps for many nights. I feared the boy was dying. There was a time when I would have treated the heart symptoms with *Aconite* or *Kalmia*, and the dropsy with *Apocyanum*, (e.g. 3 homeopathic medicines) and what not, and so zigzagged to a slow cure or a speedy death. But fortunately I knew better now. I knew that every one of these symptoms are summed up under one remedy, and covers every point exactly. I gave Aurum 10x one dose to be given every three

hours.(e.g. In this case, “Aurum” was the bulls-eye remedy - finally discovered. It is made from a homeopathic preparation of the element Gold! ‘10x’ denotes the strength of the medicine.) *I never saw a more brilliant cure. The first dose was 7 P.M. I requested that they phone me at 11 P.M. that night. At 11 the message came, ‘Louis is in a drenching perspiration, he has urinated quantities, and his breathing is less labored.’ At 8 o’clock the next morning they phoned that he had slept peacefully most of the night though still in his upright position with chin-strap. That night he could recline in the chair, and the next he could lie down in bed. The urine continued in unbelievable quantities, the perspiration rained from him, and the swelling promptly disappeared. You see what a profound element gold is when homeopathically indicated. The lad made a rapid and complete recovery with no other medication. He received it first in the 10x, then I rose to the 30th, then to 200th, (e.g. these are all different strengths of the same medicine) on which I kept him until the poor damaged little heart was quite normal again. You will recall that every one of the above symptoms are recorded by Hering and Hahnemann in these words (e.g. These are none other than our old friend Constantine Hering, and the dis-*

coverer of homeopathy himself, Samuel Hahnemann. Nash is referring here to books written by these 2 men. Books which outlined the symptoms produced by homeopathic medicines. Books like these are referred to as “Materia Medica.” Following are some of the symptoms produced by homeopathic Aurum, as recorded by Hering and Hahnemann): *‘Rheumatism which jumps from joint to joint and finally fastens upon the heart. Impossible to lie down. Must sit up bent forward.’ ‘Visible throbbing of carotids.’ ‘Face cyanotic, gasps for breath, can hardly speak above a whisper.’ ‘Much perspiration, as in auric fever.’ ‘Swelling of feet and limbs.’ Does that not picture the little boy just described?... (Now one of Nash’s colleagues, named Rauterberg, replies): I should say it does, and feel free to add that it is one of the best cures in homoeopathic literature. No routinist or pathological hobby rider would have ever thought of that remedy.”*

How about that! This was a nice case because it shows quite clearly the homeopathic necessity of prescribing *exactly* the right medicine for each patient, and also how the selection of the correct medicine can turn on a dime. If Nash hadn’t known about the boy’s inability to

lie down, nor seen his pounding carotid arteries, he wouldn't have selected *Aurum* as the medicine, and the child would not have recovered. Furthermore, all of the lab work and diagnostic discovery in the world would not have helped him *one bit* to discover the curative treatment. What *was* required was the acute observation of the subjective symptoms of the disease. This is really quite a profound statement when you think about it. As modern medicine hurtles down the road of MRIs, CT scans and sophisticated blood analysis, they get further and further away from being able to see and understand the most important symptoms of all – the subjective ones – and get further and further from the cure.

The “Law of Similars” was discovered by a German physician in the 19th century. His name was Samuel Frederick Christian Hahnemann. He was the discoverer and original architect of Homeopathic medicine. He developed the homeopathic medical system after observing that Malaria patients who were given large amounts of the drug Quinine, developed (as side-effects of the quinine), the exact same symptoms as people suffering from Cholera. Hahnemann gave Cholera patients quinine, and they experienced rapid and permanent cures of

their Cholera! This was a tremendous medical breakthrough, and opened a new door into the nature of illness and the treatment thereof.

At the beginning of this chapter I alluded to the almost *mystical* nature of the Law of Similars. Here is where I was going with that line of thought. Don't you think it is just a little peculiar that nature has developed different substances (plants, and the elements (like gold)) that give to homeopaths the *perfect* instruments to activate the Law of Similars? What are the chances of something like this happening randomly – again and again? In Nash's patient above – the boy's rheumatic heart disease symptoms were *perfectly* matched by a homeopathic preparation of the element *gold*. This means - you dig some gold up out of the ground, you prepare it homeopathically, you give it to a bunch of healthy people and you record the symptoms they develop. The symptoms they develop are an *exact* match of the symptoms that occur when some people become afflicted with rheumatic heart disease! What! What's going on here?

If Life, the Universe, and Everything (thank you Doug Adams) are just random collections of chemicals, as the allopaths assume, then the chances that naturally occurring sub-

stances would be able to cure diseases should be just this side of impossible. But they do – again and again and again. For instance, the element Phosphorous produces many of the symptoms of bronchitis and pneumonia. Digitalis purpurea (a plant with the common name “Foxglove”), when prepared homeopathically, gives us many of the symptoms of heart failure and depression. Homeopathic poison ivy is a fantastic medicine for certain types of anxiety and arthritis! The list goes on and on. We find in nature, *over and over and over* again, the perfect raw materials from which to generate medicines to cure the sick. Perhaps, as humans, our relationship to the Earth is a little more dynamic than we have previously thought. This phenomenon of the unusual healing capacity of naturally occurring substances is one of the greatest arguments for saving as many plant and animal species as we can. It is entirely possible that a plant species able to cure certain manifestations of the AIDS epidemic, or certain types of cancer has just been burned to extinction somewhere in the Amazon. Quadruple Ouch!

Our troubled cousins, the allopathic MDs, are not even aware that the Law of Similars exists, or if they are, they discount it as quackery because they weren't taught it in med-

ical school. This is one of the most hypocritical and disappointing things about allopaths. On the one hand they claim to be the high priests of science. For them its double blind this, and double blind that, and- don't use a treatment if it hasn't passed muster by being published in a peer reviewed medical journal. Blah, blah, blah. But when it comes to one of the greatest medical discoveries of the last 200 years -The Law of Similars- they dismiss it out of hand, without examining it scientifically at all. You would think that someplace like Harvard Medical School would have examined this phenomenon seriously. They have not. These intellectually stilted people are no better than the “scientists” of Galileo's time who had him imprisoned for postulating the ‘ridiculous’ notion that the Sun, and not the Earth was at the center of the solar system.

Preposterous, I say! Preposterous! Sorry – what I really meant to say was “Idiotic, pompous and close-minded.” That's right! “Idiotic, pompous and close minded!” Once more for effect? “Idiotic, pompous and close minded!”

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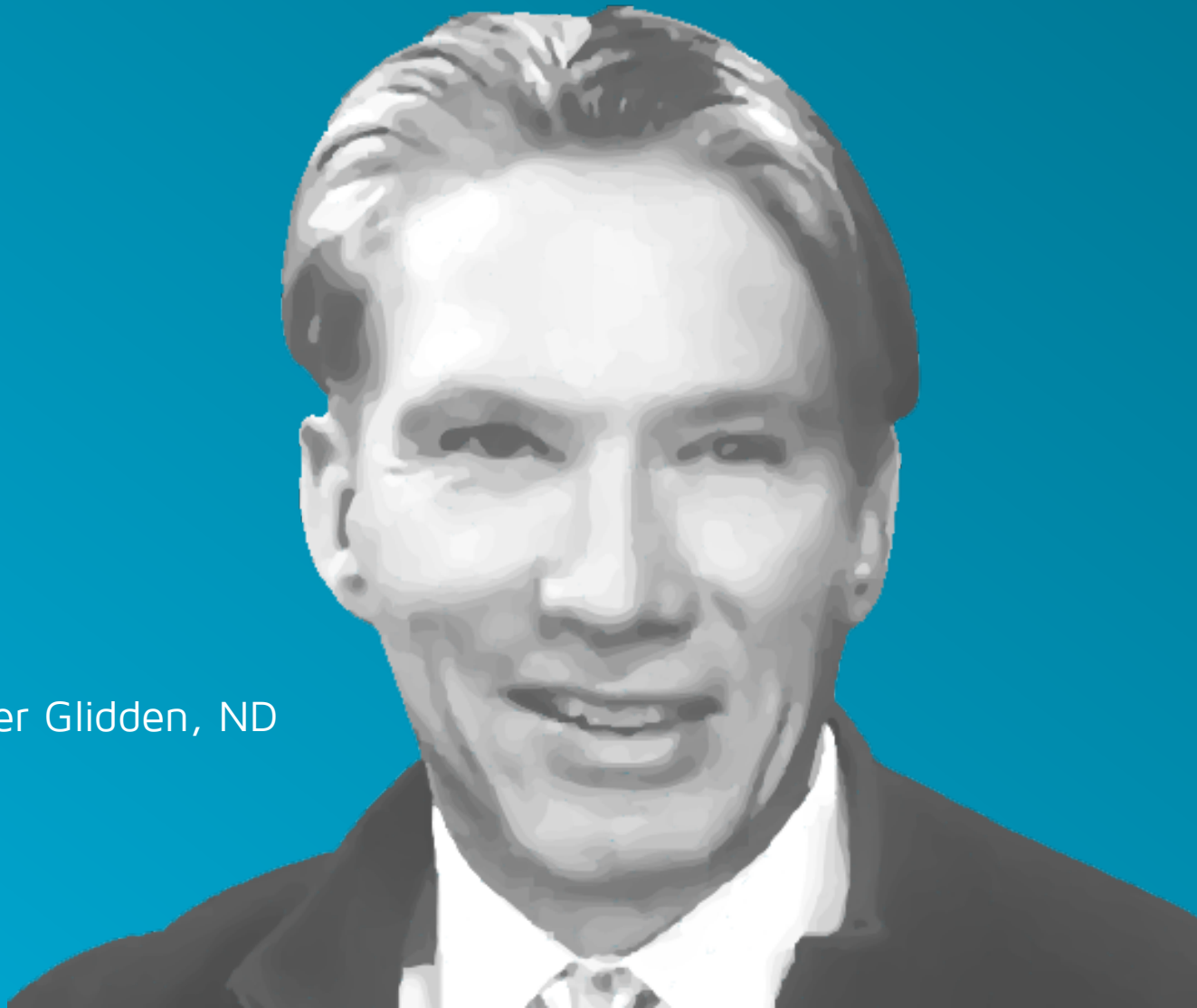
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 10

5 Laws to Rule Them All

Dr. Peter Glidden, ND



I would like to continue (for one more chapter) to talk about Homeopathic medicine. It is a subject that is close to my heart, very interesting and very misunderstood. Its history also reveals allopathic hypocrisy quite nicely. So I can't just walk away from it without a little more embellishment.

A nice book to help you understand the evolution of homeopathic medicine in the U.S. is: Copeland's Cure - By Natalie Robbins; Published by Knopf. ISBN 0-375-41090-2. Indeed, this subject demands an entire book to explain it properly, and I have no desire to take on that task, especially since Ms. Robbins has already done such a good job of it. But there *are* a few salient points about homeopathic medicine which are worthwhile discussing here for a few pages, and in understanding them, our understanding of wholistic medicine will also mature, so here we go.

Homeopathy is comprised of 5 theoretical Laws of Nature:

1. The Law of Similars
2. The Law of the Single Remedy
3. Hering's Law of Cure
4. The Law of Miasms
5. The Law of Potentization

We have already discussed Laws one and three, but it is interesting to note that when critics try to dismiss homeopathy, they exclusively focus on the 5th Law, and NEVER discuss any of the others. This is because the Law of Potentization seemingly flies in the face of our understanding of modern physics – so it is an easy target for lazy-ass critics. Ironically, the Law of Potentization is a relatively *minor* one to most homeopaths. It only describes how our medicines are made, not *how* we are to deliver them, not how the body responds to them, not how the body reacts to the stress of life in general, and not what the physician must do to bring about a cure. These subjects are all much more important and germane to the practical application of homeopathic medicine than the Law of Potentization, but that is what the critics of homeopathy get stuck on none the less. This is like going to a fantastic Broadway produc-

tion of Cats, and then giving it a bad review by complaining that it is ridiculous to give animals human emotions/thoughts. It is a critique that completely misses the point.

I remember when I was a boy that science had no answer to the simple question: “How does a bumble bee fly?” According to the Laws of Physics, bumble bees were too heavy for their tiny little wings to provide enough lift to offset the pull of gravity and allow them to fly. This was evidenced by the fact that if you took a dead bird and spread out its wings, and threw it, it would glide for a short distance, but if you did the same thing to a dead bumble bee, it would just tumble end over end. That’s right – until March 20th, 2000, science could not explain why Bumble bees could fly. So did scientists go around saying “Bumble bees don’t fly!” “It’s all an illusion!” “Don’t trust your eyes!” Of course not! It was logically assumed that there must be something else going on with the mechanics of the Bumble bee’s wings that we were unaware of, and would one day eventually figure out.¹ But this is *exactly* what the critics of homeopathy do. They run around like idiots, arrogantly proclaiming: “It doesn’t work!” “It can’t work!” “It’s all quackery.” “Don’t believe your eyes.” By focusing exclusively on the 5th

Law, close minded “quack busting” critics feel justified in completely discounting a system of medicine that has been curing people in clinical settings for over 200 years. If this low-minded criticism wasn’t so frustrating and dangerous, it would be laughable.

Here’s the reason for the criticism. According to the Law of Potentization, a homeopathic medicine that has been diluted well beyond Avogadro’s number will still retain its ability to produce a medicinal action in the body of anyone it is given to. “Avogadro’s number” is a numerical constant that chemists use to help them determine the concentration of different solutions. What this means in layman’s terms is that a homeopathic medicine, which has been diluted so much that there isn’t even *one molecule* of the original substance left in it, will still create a physiological effect when administered. What!? Sounds crazy, right? But this is *exactly* what happens time and time again.

A typical homeopathic medicine (referred to as a “remedy.”) has been diluted so much that it is *impossible* for even one MOLECULE of the original substance to remain in it, and yet – it produces pronounced physiological effects time after time. For a perspective of the

dilution scale I am talking about here, let's look at it this way: There are approximately 10^{32} molecules of water in an Olympic Sized swimming pool. If that pool were filled with a homeopathic remedy diluted to the 15C strength, to expect to get a single molecule from the original substance, one would need to swallow 1% of the volume of the pool, or roughly 25 metric tons of water! Are you with me? The medicines that homeopaths use to activate the Law of Similars are diluted to an unbelievable degree— and they still work! Instead of being awestruck by this paradoxical happenstance, and rushing to discover its mechanism, quack busting allopaths automatically dismiss the action of homeopathic remedies to the realm of “placebo.”

Instead of objectively observing what happens to patients under homeopathic care and then trying to figure out what is going on, the critics of homeopathy simply turn a blind eye to its clinical successes, and then discount it as being “utterly unscientific” because the Law of Potentization seems to defy the laws of physics. Once again, the allopaths hypocritically use a patently unscientific methodology to label something that they don't like as “unscientific.”

What type of mental process is this a reflection of? Is it scientific? No! Is it dogmatic, close minded, reactionary, and unrepentant? Yes! Anybody who pooh-poohs homeopathy has had NO EXPERIENCE with the use of homeopathic medicines in a clinical setting, has NO IDEA of the 5 Laws of Homeopathy, and has probably never even read a homeopathic medical journal. Such an intellectual stance is insulting to the educated mind, but it is the norm in modern allopathic medical circles.

Did I mention that the typical homeopathic medicine costs \$10.00? That wasn't a typo. Ten dollars! Gee, I wonder if this makes the pharmaceutical companies nervous. Come on, I must be crazy! It couldn't possibly matter to them that inexpensive, safe, and gentle medicines capable of *curing* disease were available (see references on next page)! Drug companies would just love that, wouldn't they? I mean wouldn't it be great for them if people would actually be cured of disease, and wouldn't have to take those expensive drugs over and over again. People also wouldn't have to suffer from years and years of adverse drug reactions and

symptom suppression. Then they wouldn't have to take more drugs for the new symptoms that the suppressed symptoms drummed up. Not to mention the enormous amount of money people would save. Wouldn't the drug companies just love that? Oh! Right! I guess not... The mere fact that drug companies are *against* homeopathic medical treatment should be a RED FLAG to the intelligent reader, and make him/her *run* to the nearest homeopath for treatment.

One day, someone will discover the mechanism that supports the phenomenon of the Law of Potentization, and then the homeopaths will be vindicated. This will be a discovery on par with uncovering the structure of DNA. It will be a revolutionary scientific break-through. In the mean time, homeopaths will just have to quietly keep curing people with inexpensive, safe and gentle medicines.

The following information was excerpted from the website of "The National Center For Homeopathy." (Their website is: www.homeopathic.org.) Homeopathic medicine was first used for a wide-scale epidemic in 1801 when its founder, German physician Samuel

Hahnemann MD, observed that a child who was being treated with a homeopathic preparation of belladonna resisted scarlet fever even though all three siblings were affected. Wondering whether the belladonna had acted preventively, Hahnemann began giving it to children in other families when the first ones fell ill, and he found it to be protective despite a 90% attack rate among the untreated. The method was so successful that regular physicians adopted it and by 1838 the Prussian government made its use mandatory.²

More recently, in the USA, homeopathy was used in the Influenza Pandemic of 1920. The illness struck with such force that people often died within 24 hours. Twenty percent of the entire world population was infected and 20-40 million people died.³ The Journal of the American Institute of Homeopathy, May, 1921, had a long article about the use of homeopathy in the flu epidemic. Dr. T A McCann, from Dayton, Ohio reported that 24,000 cases of flu treated allopathically had a mortality rate of 28.2% while 26,000 cases of flu treated homeopathically had a mortality rate of 1.05%. This last figure was supported by Dean W.A. Pearson of Philadelphia (Hahnemann College) who collected 26,795 cases of flu treated with

homeopathy with the above result. Dr. Herbert A. Roberts from Derby, CT, said that 30 physicians in Connecticut responded to his request for data. They reported 6,602 cases with 55 deaths, which is less than 1%. Dr. Roberts was working as a physician on a troop ship during WWI. He had 81 cases of flu on the way over to Europe. He reported, “All recovered and were landed. Every man received homeopathic treatment. One (other) ship (that used conventional medicine) lost 31 on the way.”⁴

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1. On March 20, 2000, Cornell University physicist Z. Jane Wang completed a computer modeling simulation showing that insect flight conforms to the laws of aerodynamics. The computer simulation showed that the rapidly oscillating wings of insects created vortices of air that provided the extra lift necessary for them (including the bumble bee) to break the chains of gravity.
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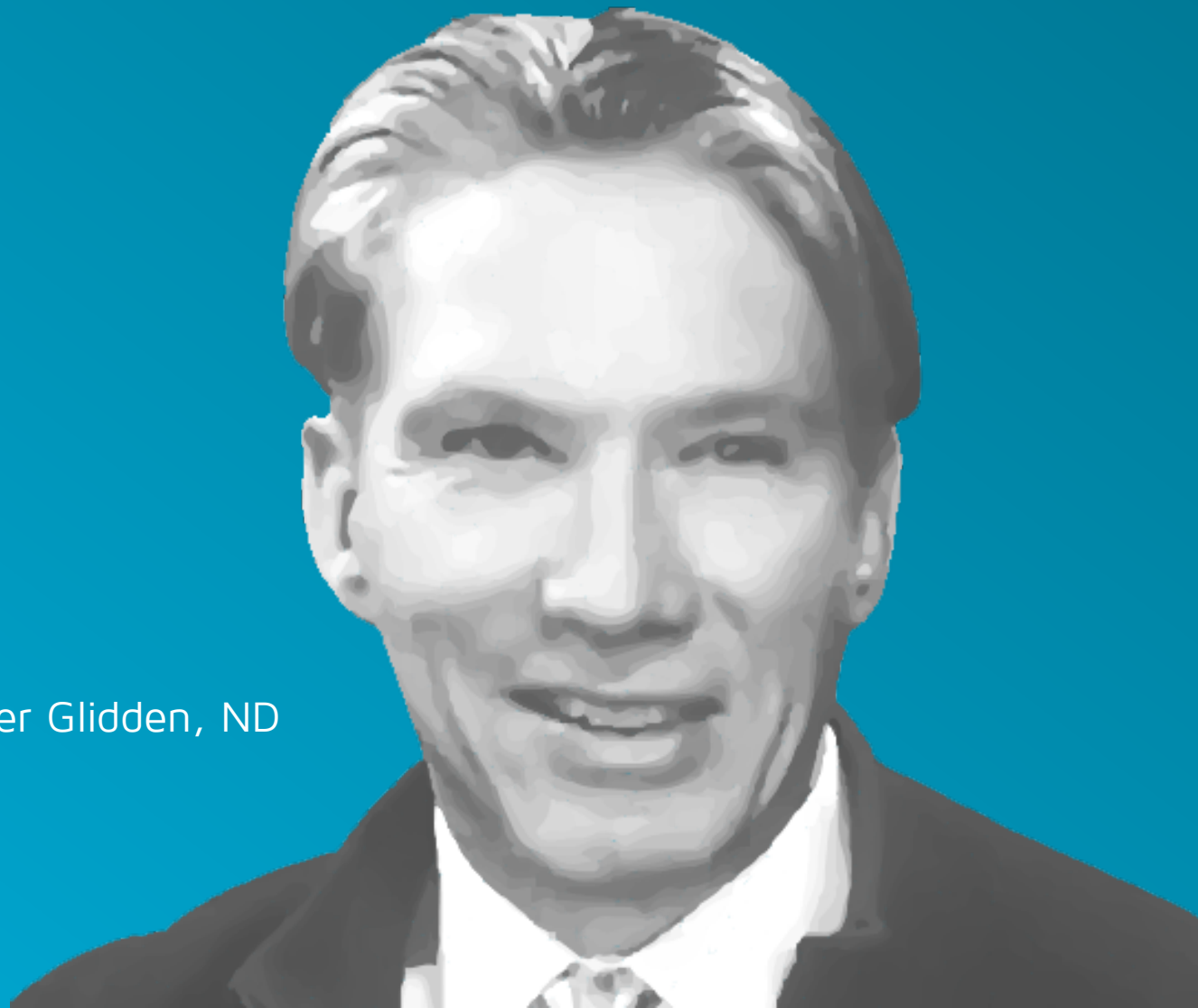
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CHAPTER 11

The Vital Force

Dr. Peter Glidden, ND



Let's pretend we are in a make-believe world and that there are 2 people in a room. One is a doctor, the other is a patient. The doctor is color blind but doesn't know it. The doctor can't see the color yellow at all. The patient is suffering from a rare disease that has given him chronic headaches, anemia, and has turned his skin completely yellow from head to foot. When the doctor tries to figure out what is going on with the patient, he will completely miss the fact that the patient is yellow. It won't even register to him. Because of his color blindness that he is completely unaware of, the diagnosis that he makes will be flawed and incomplete, no matter how skilled he is, or how many lab tests he does,

Now – in the above pretend scenario, it is possible that the illness that has turned the patient's skin yellow will have *other* signs and symptoms that the doctor *will* discover (like the headaches and anemia), and it is possible that if the

doctor treats those symptoms with a medicine that is strong enough, it *will* impact the patient's system, and create some result. But because of the doctor's inherent color blindness, he will be initiating a lopsided treatment, and if anything gets cured, it will be by chance or accident. This is how allopaths relate to the Vital Force. They are completely unaware of it, it doesn't register to them at all, and their diagnoses and treatments are *all* flawed because of their blindness to it.

Imagine for a moment that you are in the presence of someone who is dying. One second after death, the biochemistry of their body is *exactly* the same as it was one second before death. So – if Life is *only* a biochemical soufflé, as the allopaths argue, then why did they die? Also – why can't someone who has just died from blood loss, be brought back to life once the hole is patched and new blood is pumped in? What is it, *specifically*, that distinguishes a living person from a corpse? What is the source of the light, *specifically*, that animates the eyes of the living, and that leaves the eyes at the moment of death? What is responsible, *specifically*, for the light in our dreams? How can a blind person dream about things they have never seen, nor heard about? How can advanced yogis com-

pletely stop their breathing and heart rate for hours at a time, and still live? Why does acupuncture work? How are homeopathic remedies, diluted well beyond Avogadro's number, able to produce physiological results? What is the *specific* mechanism behind near-death experiences? How do the laying on of hands, and spiritual healings work - *specifically*? And last but not least - how can a person suffering from a "multiple personality disorder," have different illnesses for each of their personalities?

Allopaths and "scientists" have no answer to these questions. They turn a blind eye to all of these phenomena, because they don't fit into their myopic world view. They reason them all away as either being caused by placebo, trickery, sleight of hand, biochemical shenanigans, or whatever they can dream up to discredit the phenomenon. In so doing, they completely miss the fundamental fact of human existence that all Wholistic systems of medicine and all religions of the world recognize: The human body is *inhabited* and *animated* by an invisible Spirit-like-force which was present before conception and which persists after death. Can I get an "Amen?"

Allopaths arrogantly dismiss without

further investigation the existence of the Vital Force. This is like dismissing the presence of germs because you can't see them with the naked eye. Oh! I forgot! For 85 years, allopaths *did* in fact dismiss the "germ theory" as "unscientific" and castigated the members of its profession who professed it. Some things never change...

This complete and total allopathic disregard of anything metaphysical is inherently hypocritical. I have never been able to understand how allopathic doctors can, on the one hand believe in God and life after death, and on the other hand have *no* working conception or even any ideation at all, of how the Spirit interfaces with and influences the body. It is a mind boggling oversight, and a mind numbing omission.

There are approximately 1.5 billion people in China. That's a lot. They have no health care crisis. Why? They use acupuncture and herbal medicine to treat the majority of medical conditions, and they only use allopathic medicine for trauma care. Think about that for a while. Acupuncture works. 1.5 billion People can't be wrong. How does acupuncture work? The practitioners of acupuncture manipulate the unseen, metaphysical energy channels of

the body (referred to as “meridians”) with the correct placement of their tiny needles. What flows through the unseen energy meridians? Why, it’s The Vital Force, of course. Billions of people successfully use acupuncture every day. Hundreds of billions of people have successfully used acupuncture for thousands of years. MDs write acupuncture off as imaginary folly. How very scientific...

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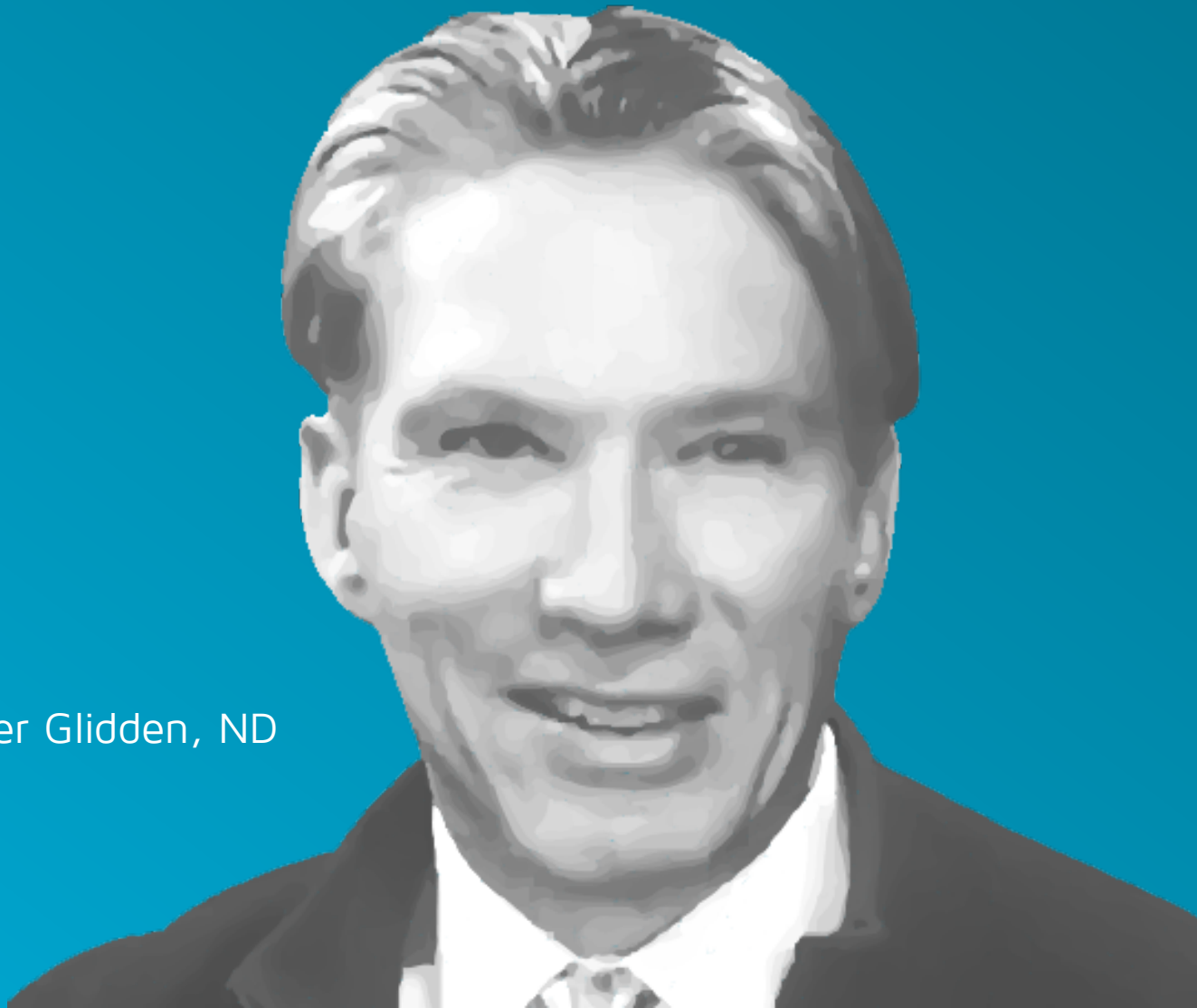
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CHAPTER 12

**Watch the MD
Scramble as He Tries to Jam a
Round Ball Into a Square Hole.**

Dr. Peter Glidden, ND



To better understand the last chapter, we have to have a working knowledge of the concept of “Metaphysics.” For most people, the word “metaphysical” conjures up (in this case, the pun *was* intended) thoughts of Ouija boards and Séances. In reality, metaphysical phenomena are much more mundane and common place, we just don’t recognize them as such because we haven’t thought about the subject much – or ever. I mean, when was the last time you and a friend of yours sat down over a couple of beers to talk about Metaphysics? Webster defines “metaphysics” as: “...speculation upon questions that are unanswerable to scientific observation, analysis, or experiment.” If you would like a first-hand experience of a metaphysical phenomenon, I can give you one right now. Ready? OK– Think about an open

minded, humble MD. Wait a minute, that’s too hard! Here’s an easier one – think about a red rose... There, you just did it! *Thought* itself (being a subject that is unanswerable by scientific experiment) falls under the definition of a metaphysical phenomenon. Where do thoughts come from? How are they created? What is their purpose? Scientists are stumped by questions like these, and have no methodology with which to explore them.

Now, remember – the world that allopaths live in is limited to that which can be observed and measured *objectively*. To them, if it can’t be measured, it doesn’t exist. This means that *everything* outside of the ken of the microscope, telescope, and every other measuring instrument known to humankind is not even worth considering. To the allopath - Love, Hate, Hope, Joy, Indignation, (surprised I included this one?) Thought, and even Consciousness itself, are all un-objectifiable phenomena, and therefore can have no separate identity apart from the biochemical engine (the human body) that they are associated with. To the allopath (especially the Psychiatrist), Love is solely the result of biochemical reactions* – as are all

*This is how and why MDMA (otherwise known as the street drug “Ecstasy”) came to be used clinically. When you take it, it induces feelings of love and connectedness to the person you are with (kind of like tequila). It is prescribed by psychiatrists for their patients who are having intimacy issues.

of the other emotions. Consciousness itself, to the allopath, is merely a function of biochemistry. Their reasoning goes like this: Because consciousness can be altered with drugs, and because consciousness has never been objectified with a measuring device, it therefore does not exist independently of the biochemistry of the body. Furthermore, since consciousness is a function of biochemistry, when biochemistry stops, so does consciousness! This is why and how psychiatry came into being. The psychiatrist tries to alter their patient's consciousness with drugs, because to them, consciousness is just a bio-chemical phenomenon. I bet you never knew that! If most people knew that their psychiatrist was of the belief that it is biochemistry *alone* that creates feelings, thoughts and even *consciousness itself*, I doubt that they would ever employ their services again.

Conversely, Wholistic physicians believe that biochemistry is a function of consciousness – or another way of saying it: We believe that consciousness creates biochemistry. To the Wholistic physician, consciousness inhabits and animates the body when the person is alive, and leaves the body when the person dies. It is Consciousness itself which directs all of the chemical and physiological reactions in the body. Con-

sciousness tells the cells how and when to divide. It tells the stomach how to digest food, and the blood how to fix a cut. Bodies decompose after death because consciousness is no longer present to keep them intact.

To the misguided reductionistic allopath, consciousness, the soul, the subtle energy meridians affected by acupuncture, and the laws of homeopathy, etc., etc. are all just misguided speculative folly. I mean, where's the proof?

Well, as it turns out, there *is* proof of metaphysical phenomena, but it is conveniently dismissed by the allopaths because it is patently incompatible with their world-view. Kind of like telling General George Armstrong Custer that the Sioux, Cheyenne, and Arapaho were good and decent people who had just as much right to live as he did. He simply *did not* want to hear it. Maybe it went against his world view so much that he simply, *could not* hear it. More's the pity.

The proof of spiritual and metaphysical phenomena does not come from machinery nor measuring equipment – and I doubt that it ever could. It comes from individual experience **ONLY**. The human body/mind is the

instrument used to measure the parameters of unseen metaphysical and spiritual phenomena. Think about it. If the soul exists, then it is *in* me (and you). If the soul is *inside* of me, then I must be able to experience it with the equipment of my own body. And so it is. The yogis of Tamil Nadu in India, the Native Americans, indigenous cultures all over the world, and the metaphysical branches of most World religions have all developed techniques through which unseen metaphysical and spiritual realities are observed and experienced - *individually*.

There is a problem here however. The *personal* nature of the metaphysical experience makes it virtually impossible to *prove* it to someone else. Here is a simple example: Do you love your mother? If you answered “Yes,” then please go ahead and *prove* it. Please *prove* that you love your mother... Can’t do it, can you? See what I mean? In your heart, you *know* that you love your mother, but there is nothing that you can do to *prove* it to anybody else, because it is a patently personal experience.

Now let’s take this concept one step further: What if you were able, through intense prayer, or through a near-death experience, to leave your body, and have a direct personal ex-

perience of your soul, and/or the subtle spiritual realms (which the mystics say exist). When you came back to your senses, could you *prove* what had just happened to you? No! Furthermore, prejudice being what it is, even if a yoga master or a Christian mystic or a shaman was able to raise the dead, or make objects appear out of thin air, or completely stop their breathing and heartbeat for days at a time, and then start them up again as if nothing had happened, a scientist would argue that it was all some sort of trickery, or sleight of hand, or cunning deception, or *something!!!* Any explanation of a metaphysical phenomenon to them **MUST** fit inside their limited world view, or be dismissed without further inquiry.

So, instead of just accepting as a *possibility* that homeopathic medicines really do work, or that acupuncture meridians are real, or that there is a Vital Force that animates the physical body, or that the laying on of hands really can create a positive physiological change, or that there may be more to life than meets the eye, the reductionistic allopath close-mindedly tries to jam the round ball of metaphysical phenomena into the square box of their limited world view – or more often than not, they just pretend that the ball is not even there...

Think I'm wrong? Put this in your pipe and smoke it:

- In 1995, I had an office in Massachusetts, on Cape Cod. I was practicing naturopathy and homeopathy and had a small, but robust patient base. One day, a husband and wife brought their 9 year old daughter to see me. She had been diagnosed with a condition called "Reflex Sympathetic Dystrophy." It is a curious neurological condition that is supposed to be incurable. She had it in her legs, and her experience of the illness was that if you touched her gently on the leg, it felt to her as if you had just hit her with a hammer. Not fun. She had been treated at Children's Hospital in Boston for a number of years, and after everything was said and done, all they could offer her was painful physical therapy, which she had about once every 4 weeks. To make a long story short, I took her on as a patient, analyzed her case, and gave her 3 doses of a homeopathic medicine made from a plant. The total cost of the medicine was \$10.00. But now for the good part - In 3 days it completely *cured* the condition. Being only a few years out of medical school at the time, I was a little taken

aback by her rapid recovery, and counseled her parents to just wait a few weeks to see if her condition would relapse. It did not. The cure was permanent. It was awesome! A few weeks later, she excitedly went back to Children's Hospital in Boston for her monthly Physical Therapy treatment. Because her condition was so rare, and because Children's Hospital is a teaching facility, every time she was there she was seen by an attending physician and about 10 students. Well, if I was taken aback by her recovery, they were dumbfounded by it! They asked her parents what they had done differently for the child to get such a remarkable result. When her parents told the doctors (allopaths all) that they had taken her to a *naturopath* who had prescribed a *homeopathic* medicine, they all got up and left the room!!! THEY DIDN'T WANT TO HEAR IT! And not even one of them *called* me to discuss the case. How professional! How compassionate! How open minded! Somebody cures an incurable condition, RIGHT IN FRONT OF THEIR EYES, and they don't want to know about it! There ought to be a law....

- A few years later, a middle-aged woman came to see me who had a tumor in her

breast. I listened to her history, reviewed her objective lab work, and theorized that the tumor was most likely a side effect of a drug she was taking for menopause called Premarin™. The FDA has classified Premarin™ as a carcinogen, and one of its documented side effects is breast cancer. She stopped the drug, took a homeopathic treatment and started a very sophisticated nutritional program. 3 weeks later, she went back to her doctor for a follow-up mammogram. When the nurse brought the new films in to the doctor, he yelled at her for bringing him what he thought were the wrong ones – because not only was the tumor gone, but the breast tissue was no longer fibrous and unhealthy. It couldn't possibly be the same patient! But it was. They were the correct films, and her tumor was gone (and has stayed gone for 20 years now). This is an interesting case for a number of reasons: Menopause is not a disease. It is a time of life. Her MD had prescribed a synthetic and carcinogenic pharmaceutical agent for a non medical condition. Then she got breast cancer which was a documented side effect of the drug. Then she stopped taking the drug, started my treatments, and the tumor went away. Coincidence? NO! Was the doctor repen-

tant? NO! Was he brought up on malpractice charges? NO! Did he call me to discuss my treatment? Of course not!

- In 1955 a doctor named Walter Mertz discovered that he could make mice develop Type II Diabetes by eliminating chromium from their diets. Chromium is a naturally occurring mineral like calcium or zinc. The ridiculous insistence that Type II Diabetes is a genetic disease persists today, and is an absolute perfect example of the mind-blowing, pig-headed close-mindedness that runs rampant through the MD profession. As a rule, MDs completely disregard any facts that run counter to their way of thinking, over and over and over again – even if those facts have been proven to be true with the scientific technique that they hold in such high regard! They are the hypocrite's hypocrite, and have caused massive amounts of suffering because of it. Oh! By the way, my colleagues and I regularly and easily eliminate the signs and symptoms of Type II Diabetes in approximately 3 months in 100% of the people we treat who have that diagnosis. As Type II Diabetes is a simple nutrient deficiency, when we deliver the proper nutrients to those suffering from it, and then

get out of the way and let the body fix itself, the body fixes itself! What a concept! Oh! By the way - one patient with Type II diabetes will generate approximately \$400,000 of income for the doctors, hospitals and drug companies that manage their treatment over the course of 20 years. 3 months of nutritional treatment to eliminate the same condition will cost approximately \$750.

- In 1979, while working for Yerkes Primate Research Center in Atlanta, Dr. Joel Wallach discovered that Cystic Fibrosis (CF) was not limited to humans. He discovered that Rhesus monkeys could also get CF. Furthermore, he proved (and published) that CF was caused by a nutrient deficiency in the pregnant mother. If the pregnant mother monkey was deficient in the mineral *selenium*, her babies were born with CF. If the mother was replete with selenium, none of the babies had CF. For these breakthrough research findings, Dr. Wallach was summarily dismissed (fired) from Yerkes. Why? Two reasons.

1. The popularly held notion in medical science is that NOTHING can alter the expression of a genetic disease. So even

when provided with direct and irrefutable evidence to the contrary, the MDs at Yerkes turned a blind eye to Dr. Wallach's findings (shades of Galileo).

2. Selenium, being a naturally occurring substance cannot be patented, so there is no money to be made by using it to prevent CF.

If these examples don't convince you that most MDs are arrogant, close minded, symptom suppressive lap dogs to the Pharmaceutical Industry, then I don't know what will.

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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 13

Give Me Nutrition, or Give Me Death

Dr. Peter Glidden, ND



If you had lived in communist Russia in the 1960's, you would have been taught that everything about Western culture was bad and evil. The West was painted as a decadent, immoral, hedonistic place filled with self-serving people all looking out only for themselves. Just as this stilted 20th century Communist view of the West was completely wrong, the current allopathic view of nutrition we have all grown up with is *completely* wrong – and I mean completely wrong.

When you hear the word nutrition, you probably think of a boring high school class that taught you about the four food groups. (You would probably be hard pressed to even name the 4 food groups!) Nutrition is held in our collective consciousness as the poor step-child that nobody wants to take care of, and that everybody feels guilty about not paying attention to. It is probably important, we think to

ourselves, but because we wrongly assume that it has something to do with soybeans and vegetarianism – then we don't want to investigate it. Right? Certainly, we assume, nutrition has **NOTHING TO DO** with the appearance or disappearance of disease. After all, most chronic disease is genetic, isn't it? Also, since our MDs don't talk about nutrition much, we just assume that it is of minor importance. Besides, if a nutritionist is going to tell me that I have to stop eating meat – well, you can just forget it, because the only way you could stop me from eating meat is to pry the steak away from my cold, dead hands...

Well, I have some Earth-Shattering news for you. Meat is good for you (as is butter, lard, eggs and salt). Olive oil, wheat, barley, rye and oats are bad for you - *and the only thing more important than nutrition is breathing*. Proper nutrition is the **KEY** to health and longevity. It is the magic bullet that eliminates most chronic disease (as most chronic disease is caused by nutrient deficiencies). It is the absolute and unimpeachable King of all Medical Treatments. Nothing else even comes close to being able to produce the healing effects that properly applied Clinical Nutrition does. If I was only allowed by law to deliver one type of medicine, it would be Clin-

ical Nutrition. Are you catching my drift here? Let me just say it one more time for emphasis: Most everything you know about nutrition is wrong, and the key to a healthy and long life is nutrition. Your MD is completely clueless about nutrition, which leads to the inevitable conclusion that MDs are *completely incapable* of helping you to eliminate chronic disease – they are only able to help you *manage* it. By now you should know this in your bones.

From 1971-1983, my colleague, Dr Joel Wallach BS, DVM, ND was in charge of a 25 Million Dollar research project that was funded by the National Institute of Health, Washington University, Yerkes Primate Research Center, The Center for the Biology of Natural Systems, and major Zoos across the U.S. The project was designed to assess the negative effects of pollution on the health of animals. This was in response to a horrible health epidemic that occurred in the small fishing village of Minamata in southwestern Japan. An industrial plant upstream of Minamata village dumped tons of mercury into a river that fed into Minamata bay. As fate would have it, the mercury reached the bay at the same time that the algae (a small organism at the bottom of the food chain) living in the bay were in bloom. The algae sucked

up the mercury, minnows ate the algae, medium sized fish ate the minnows, bigger fish ate the medium sized fish, the fisherman of Minamata bay caught the big fish, brought them to the market and everybody in the village ate them. Shortly thereafter, everybody got sick, many villagers died, and nine months later all of the children born in Minamata village had horrible birth defects. National Geographic Magazine devoted an entire issue to this event.

It didn't take long for scientists to discover that the entire Minamata epidemic had been caused by mercury poisoning. This realization sent a shock wave through the scientific community. Their reasoning went like this: If mercury exposure to adults could cause such massive pain, suffering and death, and if mercury exposure "in-utero" could cause such horrible birth defects, then what other BAD things could other pollutants do to our health? Pretty smart thinking, if you ask me. So they developed a textbook-perfect experiment to figure it all out. They compared the health of zoo animals living in urban environments (and exposed to the same pollutants that humans were) to the health of their counterparts living in the wild. Dr. Wallach was in charge of the whole shebang. Twelve years, 26,000 autopsies, and 10 million

blood chemistries and microscope studies later, Dr. Wallach completed the study. The results were published in a book entitled The Diseases of Exotic Animals, which is now in the Smithsonian Institute. The results of the research were startling and groundbreaking - and undoubtedly, this is the first time you have heard of them. (You may want to ask yourself why.)

The results of Dr. Wallach's research were completely unexpected. As it turned out, the total net negative effects of urban pollution on the health of the zoo animals was *negligible*. Pollution was more or less *irrelevant* in its ability to produce serious physical problems! The only time that pollution *did* affect the health of an animal was when there was a *massive* exposure to it – as there had been at Minamata.

As is often the case with science, most major breakthroughs happen by accident. Dr. Wallach's research was no exception. In the course of looking for the negative effects of pollution on the health of animals, the research inadvertently stumbled upon something HUGE that changed the course of medicine forever. (Again - why is this the first time you have heard about it?) The unexpected discovery:

There were ENORMOUS HEALTH PROBLEMS created by nutritional deficiencies in the animals that were studied – and the effects played out ACROSS SPECIES LINES. It didn't matter if it was a bat, a buffalo, a bear, or a baboon. If there was a nutrient deficiency the animal developed a disease. Furthermore – that disease would disappear when the missing nutrient was replaced!

These discoveries revolutionized veterinary medicine. Instead of feeding monkeys in urban zoos bananas, they now got monkey chow – which was a mixture of all of the nutrients that the monkeys needed to be healthy. Guess what happened? No more birth defects, no more sick monkeys, no more mating problems, and life expectancies rose dramatically – across species lines...

You are probably thinking to yourself, "If nutritional deficiencies negatively affect the health of *animals* across species lines, the same things MUST also happen in *humans*." Correct!!! You are paying attention! So was Dr. Wallach. After this discovery, he went to Naturopathic medical school, secured his license to practice naturopathic medicine, and started applying with *humans* the nutritional treatments he had

discovered for *animals*. Voila! Medical Nutrition for humans was born.

Elegantly simple in its philosophy, Dr. Wallach's Medical Nutrition Method professes the following:

- The human body requires 91 essential nutrients to function properly.
- It is impossible to get all 91 of these nutrients from our food.
- With the passage of time, unless nutritional supplements are added into the diet, the body will develop nutrient deficiencies.
- When the nutrient deficiencies get big enough, something breaks, and disease is borne.
- If the deficient nutrients are put back into the body before the diseased tissue reaches its point of no return, the body will repair itself and eliminate the disease.

That wasn't hard, was it? It may interest you to know that your MD is completely clueless about this. Here is a breakdown of the education of MDs vs. that of NDs. The numbers inside the boxes represent the number of credit hours of study that are required for each subject. Prepare to be surprised.

| | Anatomy | Biochemistry | Histology | Physiology | Clinical Nutrition |
|----|---------|--------------|-----------|------------|--------------------|
| ND | 19.5 | 12 | 5 | 14 | 143 |
| MD | 13 | 8 | 6 | 5 | 0 |

The first 4 subjects reflect training in the first 2 years of study. The Clinical Nutrition credit hours are over the entire 4 year education.

How much education in nutrition did the MD get? NONE! How many more hours of *basic sciences* did the ND get? 19.5! How many licensed NDs are there in the U.S.? – Approximately 2,500. Now you know why there is a health care crisis in this country.

Your MD may be the nicest person alive. He may be a member of Rotary. She may give free physicals to poor families, or volunteer to feed the homeless. No matter how good, kind and decent a person they may be, your MD is completely CLUELESS about nutrition and therefore is completely unable to help you to regain your health. Why?

BECAUSE THE MAJORITY OF CHRONIC ILLNESSES ARE CAUSED BY NUTRIENT DEFICIENCIES.

Here is the short list of the top 10 conditions generated by a simple Calcium deficiency (Calcium is just 1 of the 91 essential nutrients that the human body needs to have).

1. High blood pressure
2. Arthritis
3. Osteoporosis/Osteopenia
4. Low back pain
5. PMS
6. Wallach's vertigo
7. Tinnitus (ringing in the ears)
8. Kidney stones
9. Bell's palsy
10. Trigeminal neuralgia

You were with me right up until now, weren't you? In every lecture that I give, and I give over 60 (free) lectures a year, each time I reveal the above list, the audience starts to get antsy. The complaints go something like this:

- “Do you mean to tell me, Dr. Glidden, that all I needed to do to get over my Osteoporosis was to take a calcium supplement?! Are you crazy or something? Well I've got news for you, mister Naturopath – I DID take a calcium supplement – but my Osteoporosis got worse!”

- “The calcium levels in my blood were HIGH when my Osteoporosis was diagnosed. How then could it possibly have been caused by a calcium deficiency? My MD told me to avoid calcium, because if I had too much it would clog my arteries...”
- “My doctor told me my Osteoporosis was genetic.”
- Etc.
- Etc.
- Etc.

Cultural myths never go away easily. Medical cultural myths are very stubborn little critters. Like cockroaches, however, they always run away from the light. Consider the next chapter my high intensity, mega watt spotlight.

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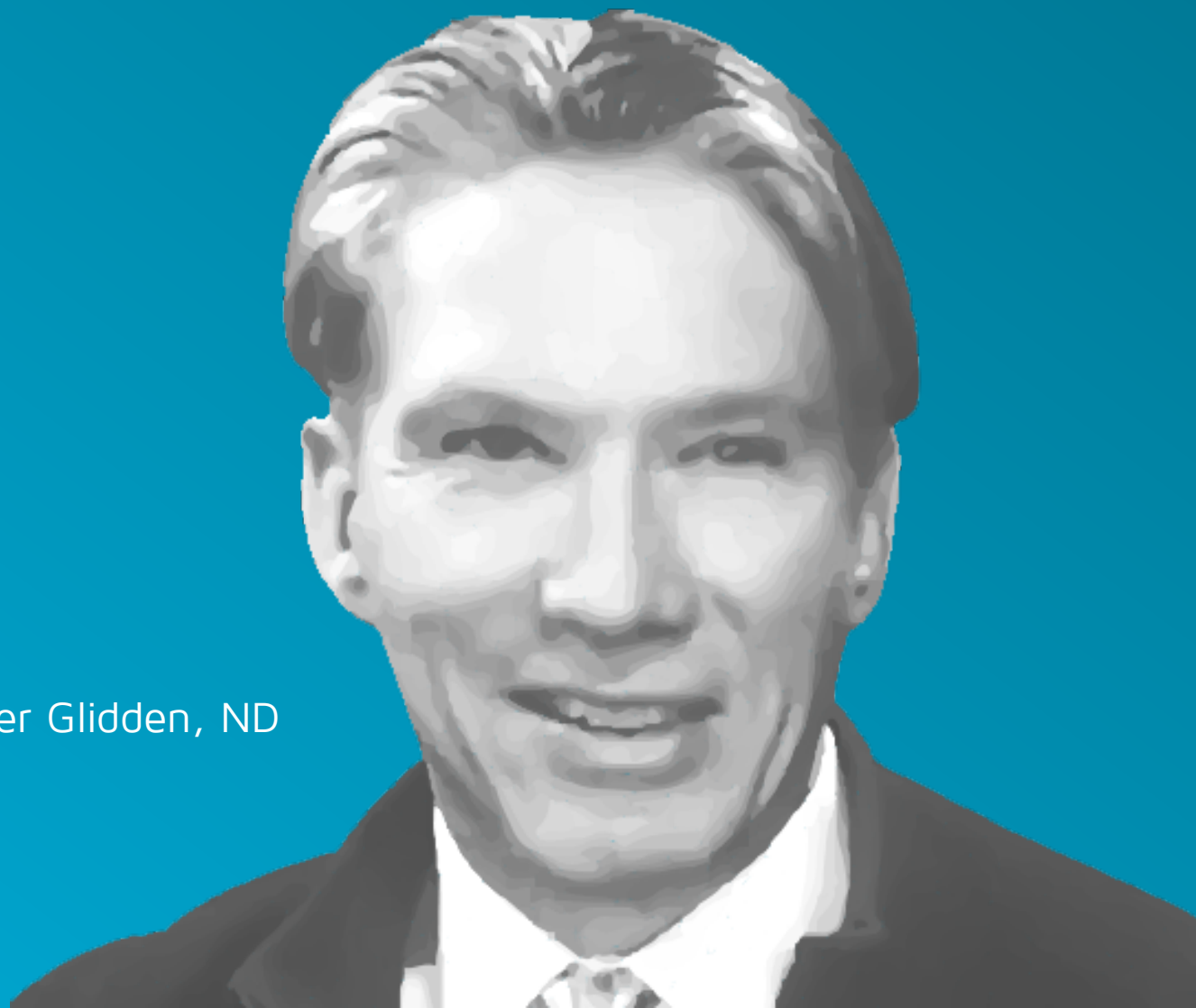
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 14

Medical Myth Busting

Dr. Peter Glidden, ND



Here is how Sally Field could legally go on TV and say that she got Osteoporosis even though she took a calcium supplement. Remember – her MD had NO training in medical nutrition, and is little more than a reductionistic pharmaceutical shill. OK? OK.

I have no idea of which calcium supplement Ms. Field took, but she either didn't absorb it efficiently or she didn't take enough of it. I know this because Osteoporosis is a calcium deficiency disease, plain and simple. It is NOT genetic, and it is NOT caused by aging. If you take enough of the right type of calcium, it goes away – every time. If you take too little, it persists. I mean, really, if there was a fire in my backyard and I tried to put it out with a squirt gun, it would be pretty stupid of me to then conclude that water was no good at putting out fires.

Here is a probable imaginary scenario to describe

what happened to Sally. Quite frankly, the same thing (just without the limousine) has probably happened to you. Better yet, to keep my lawyers happy, let's create an imaginary movie star named Sally Mo Malley, and see what happens to her.

Sally goes into the health food store in LA and asks the manager with the nose ring and tattoos (who has read a couple of books on the wonders of Vitamin C) which calcium supplement is the best. The manager is no dummy, he knows a movie star when he sees one. He walks Sally over to the locked cabinet of *premiere* nutritional supplements. He pauses in reverence for a second just before he opens it up. Inside, in a nice shiny bottle, is a \$175 calcium supplement, endorsed by some German doctor who is the director of one of the oldest health spas in Europe. The manager confides to her: "Those Germans - they really know their stuff." Sally agrees. She buys a year's worth of the calcium and pays for it with her black American Express card. The manager has only seen one of *those* cards once before in his life, so he holds it for an extra few seconds before processing the sale to savor the moment. Sally leaves the store with 12 bottles of the German calcium. She is happy, the manager is happy (ecstatic, really), and as

she is walking to her limousine, the birds start to sing and a rainbow appears...

Alright! There were no birds, and no rainbows – but you get the picture. Everybody involved in this “make-believe” transaction thinks that a really good thing just happened, but they couldn’t be further from the truth. Here’s why: Nutritional supplements are like chicken soup. The recipe and the quality of the ingredients are *everything* – and make a huge difference as to how effective it is. Many years ago, the LA times did an investigative story on the quality of herbs sold over the counter in California. They went into health food stores in LA and randomly took Ginkgo biloba bottles off of the shelf, brought them to a lab, and tested them. 9% of the products tested had no Ginkgo in it at all, and 12% of the bottles contained *less than half* of the dose that the label claimed it had! Ralph Nader’s group has done similar tests on vitamin supplements with similar results.

There are a lot of steps between the guy that grows the herb, or extracts the calcium, and the finished product that we find in a bottle on the shelf of the Health Food Store or the doctor’s office. If the company that makes the product does not have good Quality Control

procedures, *nobody* will know what is really in the bottle! Go figure! The government does not do a good enough job of policing the nutritional supplement industry, and this is an area of great concern.

OK. So now Sally gets home and reads the label on the super-duper German calcium supplement. On the ingredient list at the back of the bottle, it says:

Ingredients:

- Calcium (as calcium citrate) 800 mg
- Magnesium (from magnesium citrate) 400 mg
- Vitamin D3 (400 IU)
- Boron (50 mg)
- Silica (as silicon dioxide) 100 mg

Sally reads on the Internet at “Web MD” that the RDA of calcium for an average human is 1200 mg a day. She figures (correctly) that she should take a little more because she already has bone loss. So she takes 2 capsules a day, thinking that she is getting 1600 mg of calcium in doing so. Her MD warns her not to take more than this because he is afraid that too much calcium will collect in her blood vessels and cause hardening of the arteries. If her MD had taken a course

in nutrition, or gone to a clinical nutrition conference he would surely have known that the **ONLY** thing that causes calcium to collect on artery walls is a lack of magnesium. The body has **HUGE** calcium needs. It is virtually impossible to overdose from it, and the exact opposite of what her MD thought was in fact true. Being a little bit of a rebel, Sally chooses to “go for it,” and settles on taking 2 caps of the super duper German calcium daily, thinking she will be getting 1600 mg of calcium in doing so. This is a reasonable assumption, isn’t it? Well.....not really. Sally neglected to read the fine print at the top of the ingredient label where it said: Serving size: 4 capsules. This means that the dosages listed on the label are per *4 caps*. So in reality, *each* capsule only gives her 200 mg of calcium. Right? Well....not really.

This is where it gets really interesting.

If you look carefully, you will see that the label says “Calcium (*as* calcium citrate) 800 mg.” This means that 4 caps of the product contain 800 mg of Calcium citrate. This means that *each* cap contains 200 mg of Calcium citrate. In 200 mg of calcium citrate there are approximately 75 mg of calcium and 125 mg of citrate. The acid in our stomachs cleaves the chemical bond

which holds the two together, releasing the calcium. So then - one capsule of the super duper German calcium will give Sally 75 mg of calcium. Right? Well....not really.

Only about 60% of Calcium citrate is digested by our stomach acid, and this is under perfect conditions. If Sally is on a salt restricted diet or is taking Prilosec® or Nexium® then her stomach acid is weak and she won’t be able to pull out the full 60%. Normally, I would give Sally the benefit of the doubt, and say that her stomach acid *is* at full strength, were it not for the nagging fact of her calcium deficiency. The cells of her stomach (and yours and mine) need a certain mineral in order to produce stomach acid. Can you guess which mineral it is? Correct! You guessed it! They need **CALCIUM!** Hallelujah! Pass the hat and ring the bell! They need calcium! Imagine that. So, if Sally has a calcium deficiency, which she does - then by default, her stomach acid *must be weaker than normal*. In reality, anyone with a calcium deficiency big enough to create Osteoporosis will automatically have stomach acid that is **VERY** weak.

For educational purposes, let’s give Sally a break here and guestimate that she can digest 40% of the calcium that is in the super dup-

er German calcium capsules that she swallows. OK. After everything is said and done then, here's how the numbers look: For each capsule of the super duper German calcium that she swallows, Sally is lucky if her body can pull out *30 mg of calcium* (40% of 75 mg is 30 mg). So, in order to meet the RDA for calcium, Sally will need to take *40 caps a day* of the super duper German Calcium! In order for her to reach her goal of 1600 mg, she will need to take 54 – PER DAY! Regretfully, she only takes 2. So guess what happens to her Osteoporosis? IT GETS WORSE.

Then Sally is hired by a drug company, goes on TV, and tells the world that she got Osteoporosis even though she took a calcium supplement. This is like me saying that I became dehydrated even though I drank water, but neglecting to tell you that I only drank a thimble-full a day. There ought to be a law...

Now – I am NOT advocating, nor am I suggesting that anyone needs to take 40 or 54 capsules of calcium a day in order to be healthy. I am simply pointing out the fact that in the wonderful world of nutritional supplements, the *recipe* is everything. Furthermore, the products have to be taken wisely, or they won't

work, and you are simply wasting your money. The best calcium supplement that I have ever seen delivers 1500 mg of calcium that is 95%-99% absorbable, per 1 ounce of product. That's right – it's a liquid supplement, and 1 oz delivers 1500 mg of calcium that is 95%-99% absorbable. Supplements like this are extraordinarily effective and produce simply remarkable results. I have seen this particular supplement normalize blood pressure in 14 days – in a 65 year old woman who had been suffering from high blood pressure for 15 years! Now – what's better: To manage the high blood pressure with synthetic meds for 15 years, or to eliminate it with a really good calcium supplement in 2 weeks. The choice is yours.

Keep in mind the fact that there are 91 Essential Nutrients the human body needs in order to stay healthy. Calcium is only *one* of the 91 nutrients (and calcium deficiencies account for 147 diseases). There are 90 *other* nutrients that the human body needs to maintain its health. Can you guess what happens when we become deficient in a bunch of them? We get sick and sicker and sicker, and then we die. Then our MD tells our loved ones that it was all genetic, and encourages them in their grief to donate as much as they can to pharmaceutical research.

The genesis of chronic disease is sublimely simple, straightforward and easy to understand. If your car runs out of motor oil, that's bad. If it runs out of motor oil, power steering fluid, brake fluid, coolant, and gets a flat tire - that's REALLY bad. The human body is not that much different. The more raw materials that the body runs out of, the more things break down. As our nutritional stores run dry, we get high blood pressure, then kidney stones, then carpal tunnel syndrome, then arthritis, then tinnitus, then vertigo, etc. Then we go to our allopathic, reductionistic, drug happy MD and he tells us that the only reason we are sick is because we have a mysterious "bad" gene. He prescribes symptom suppressive medicines which do not address the reason that we are sick in the first place (nutritional deficiencies). So we get worse and worse and worst, and in the last 6 months of our lives we spend 75% of our health care dollars trying to fend off the Grim Reaper, who, at that stage of the game, is actually not looking so bad.

The fact that medical nutrition will fix the vast majority of our chronic health complaints is perhaps the greatest secret of our modern age. Furthermore, when we apply medical nutrition from a Wholistic perspective, we get

remarkable results and save lots of money in unnecessary lab testing. Here's what I mean: If I have a patient who is deficient in calcium, the chances are high that he/she is also deficient in *many* of the other 91 essential nutrients. Instead of trying to micro-manage their body's nutritional needs with elaborate and expensive lab tests, it is much easier and much less expensive to just deliver ALL 91 essential nutrients to the body every day, and let the Wisdom of the body sort it all out.

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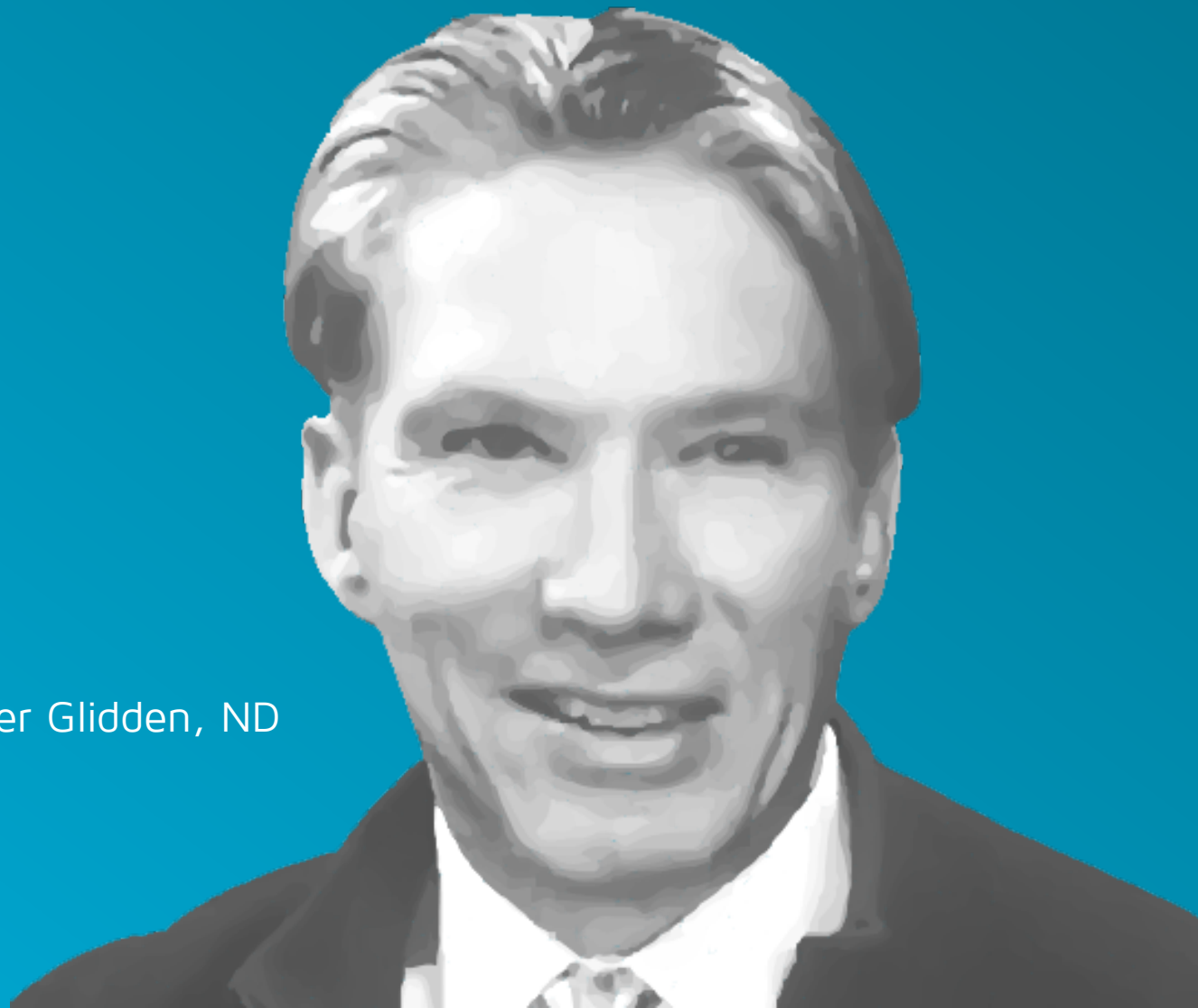
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 15

Grinding My Ax

Dr. Peter Glidden, ND



If you think that now, in the 21st century, because of some enlightened cultural evolution, we are an open minded scientific community, you are wrong. If you think that allopathic medicine is the top dog in today's world of medicine because its treatments are more effective than those of any other system of medicine, you are wrong - dead wrong. Allopathic medicine is the top dog *now* because of political/economic/legal affiliations and strategies that were initiated in the early 1900s between pharmaceutical companies, hospitals, medical schools, and legislators. Want a history lesson? Go pick up a copy of a book called Rockefeller Medicine Men - Medicine & Capitalism in America by E. Richard Brown. It's a real eye opener. I have highlighted some of the more salient points about the evolution of medicine in the U.S. below.

- At the turn of the 20th century in the U.S., 30% of the medical schools and hospitals in the US were Homeopathic ones.
- In the early 1900s the Carnegie Institute and the Rockefeller Foundation gave millions of dollars of free money to the medical schools and hospitals in the U.S. that promoted the use of prescription drugs. This made it difficult for the naturopaths, the homeopaths, the osteopaths and the chiropractors to compete for patients.
- In 1987 the American Medical Association (AMA) was found guilty in Federal court of orchestrating a decade long slanderous and defamatory, mud-slinging campaign of negative PR against the Chiropractic profession. (Google "Wilkes vs. the AMA" to read more.) The Chiropractic Association was awarded \$25 million dollars in compensation by the court.
- The AMA has a branch whose main job description is to prevent Naturopathic physicians from securing the right to practice medicine in the states where their profession is unregulated.
- As a licensed naturopathic physician,

in the state of Washington, I can refer to myself as a physician, prescribe most drugs, perform minor surgery, deliver babies, order any medical test I want, provide general medical care to whomever wants it, and it is all covered by insurance.

- If I were to do *exactly* the same thing in the state of Illinois, I would be fined \$5000 and put in jail for 1 year for practicing medicine without a license!!!

Isn't this all just a little ridiculous??? Yes it is. It is further evidence of the octopus like grip that the alliance between the pharmaceutical industry and the allopathic medical profession has on the delivery of medicine in the United States. Most people are completely unaware of these goings-on, and have no idea AT ALL that their access to health care has been hog-tied by a medical culture dominated in every aspect by drug money. Where's Nancy Reagan when you need her? Whatever happened to "Just say NO to drugs!"

Believe it or not, the influence of drug companies doesn't stop with the chiropractors and naturopaths. Its biggest snow jobs are with the allopaths themselves, and they don't even

know it.

In the last 10 years, peer-reviewed allopathic medical journals have become little more than PR tools for the bad science promulgated by drug companies promoting their own products. Case in point: Lipitor. Everybody has heard of Lipitor. It's the cholesterol lowering wonder-drug of Pfizer. Even Robert Jarvik, MD reductionist extraordinaire (inventor of the artificial heart) was pitching it for a while on TV ads. For years, peer reviewed journals have touted Lipitor (a statin drug) as being the "First-Line of Defense" against heart disease. In fact, it is not. In his must-read book, Overdosed America, John Abramson, MD goes to great lengths to prove how statin drugs are no better than diet and exercise at reducing the risk of coronary heart disease, and for those who are already diagnosed with heart disease – statin drugs do not work at all. Yet statins remain in the top 3 of all drugs sold in the US.

My ax needs a little more grinding.

When our hypocritical allopathic friends criticize Wholistic medicine they always complain that there is no evidence to support its treatments, because, well, you know with them it's: Research this! And: Double blind that- or it's no good! Yaddah, yaddah, yaddah. Well,

as it turns out, I couldn't agree more. It's too bad that they do not practice what they preach. The above Lipitor debacle is a prime example. There are more.

- Approximately 21% of all drugs prescribed are prescribed for “off-label” use.¹ This means that the MD prescribes a drug for a condition that it has not been proven to effect – 21% of the time...
- Ritalin research in the 1970s and 80s was headed by Stephen Bruning MD. He was a psychologist at the University of Pittsburgh. In 1988, he was caught cheating and was charged with illegally falsifying his research. He was sentenced to 60 days in jail, five years probation, and fined about \$11,000. Ironically, it was his fraudulent research that stimulated the increased use of Ritalin in the United States and abroad.²
- A proven side effect of one class of blood pressure medications is Type 2 Diabetes.
- Sugarpills are better than Antidepressants at treating depression.³
- But the cream on the cake of allopathic hypocrisy is their use of the synthetic female hormones (PremPro® Provera® and Premarin®). In 1998, the most

comprehensive and thorough research project EVER conducted in the history of the modern world was started. It was called the Women's Health Initiative (WHI). It followed 16,000 women aged 50-79 who were on the synthetic hormone PremPro®. The study was developed to take a serious look at the effects of this commonly prescribed hormone, and to determine, once and for all, whether it was good or bad. The study was stopped in mid 2003, (3 years early) because of VERY high incidence of Breast cancer (29%), Heart Disease (26%), and Stroke (41%) in the participants. These numbers translate into: 4,200 cases of breast cancer; 4,800 women with Heart Disease; 10,800 more women with stroke – all because of the drug! This evidence should have sounded the death knell for the administration of PremPro®, wouldn't you think? But no! In spite of the overwhelming evidence that PremPro® will do more harm than good, allopathic doctors continue to prescribe it based on the rationale that if you only take it for a year or 2, it probably won't hurt you!!! Thankfully, the public at large is more intelligent

than most MDs because, in 2003, (the same year this study was released and became Headline News) there was a 7% decrease in the incidence of Breast Cancer. This was most likely attributable to the decreased use of PremPro® by women who stopped taking it of their own volition as a reaction to the results of this study that they read about in the paper.

Now – let’s compare the hormone study to the ban on L-Tryptophan a few years back. Remember that? Here is an article written by Dean Wolfe Manders, Ph.D. entitled: The FDA Ban of L-Tryptophan: Politics, Profits and Prozac. Dr. Manders’ first edition of this article appeared in the October 1992 edition of the *Townsend Letter for Doctors* under the title: “The Curious Continuing Ban of L-Tryptophan: the Serotonin Connection,” then again in the magazine “Social Policy”, Vol. 26, No. 2, Winter 1995 (available in March 1996).

“In the fall of 1989, the FDA recalled L-Tryptophan, an amino acid nutritional supplement, stating that it caused a rare and deadly flu-like condition (Eosinophilia-Myalgia Syndrome —

EMS). On March 22, 1990, the FDA banned the public sale dietary of L-Tryptophan completely. This ban continues today. On March 26, 1990, *Newsweek* featured a lead article praising the virtues of the anti-depressant drug Prozac. Its multi-color cover displayed a floating, gigantic green and white capsule of Prozac with the caption: “Prozac: A Breakthrough Drug for Depression.”

The fact that the FDA ban of L-Tryptophan and the *Newsweek* Prozac cover story occurred within four days of each other went unnoticed by both the media and the public. Yet, to those who understand the effective properties of L-Tryptophan and Prozac, the concurrence seems “unbelievably coincidental.” The link here is the brain neurotransmitter serotonin — a biochemical nerve signal conductor. The action of Prozac and L-Tryptophan are both involved with serotonin, but in totally different ways.

Elevated levels of serotonin in the body often result in the relief of depression, as well as substantial reduction in pain sensitivity, anxiety and stress. Prozac, as

well as other new anti-depressant drugs such as Paxil and Zoloft, attempt to enhance levels of serotonin by working on whatever amounts of it already exist in the body (these drugs are known as selective serotonin reuptake inhibitors). None of these drugs, however, produce serotonin. In contrast, ingested L-Tryptophan acts to produce serotonin, even in individuals who generate little serotonin of their own. The most effective way to elevate levels of serotonin would be to use a serotonin producer rather than a serotonin enhancer.

The continuing FDA public ban of L-Tryptophan prevents popular access to this most effective serotonin producer. The millions of Americans who for decades safely had relied upon L-Tryptophan to relieve depression, anxiety and PMS, as well as to control pain and induce natural sleep, have been forced elsewhere for solutions. Routinely, such solutions are pharmaceutical in nature: people are forced to use either often highly addictive, expensive, and sometimes dangerous drugs like Xanax, Valium, Halcion, Dalmane, Codeine,

Anafranil, Prozac, and others, or, simply suffer.

Present FDA public policy maintains that L-Tryptophan is an untested, unapproved and hazardous drug. The analytical work done a few years ago by the Centers for Disease Control and the Mayo Clinic, research which traced the fall 1989 outbreak of the serious flu-like condition to contaminants found in batches of L-Tryptophan made by the Japanese company Showa Denko, has not convinced the FDA to allow L-Tryptophan back on the market. This decision is based primarily on the research of FDA and NIMH scientists who state that L-Tryptophan itself, irrespective of contaminants, is a dangerous substance. Other university-based research scientists disagree with these findings.

The public availability of L-Tryptophan is too important an issue only to be argued and shrouded within a scientific debate that remains, ultimately, mystifying to the vast majority of Americans. There are many obvious facts worthy of public attention, and public concern. For

example, consider the following:

- On February 9, 1993, a United States government patent (#5185157) was issued to use L-Tryptophan to treat, and cure EMS, the very same deadly flu-like condition which prompted the FDA to take L-Tryptophan off the market in 1989.
- Notwithstanding its public ban and import alert on L-Tryptophan, the FDA today allows Ajinomoto U.S.A. the right to import from Japan human-use L-Tryptophan. Distributed from the Ajinomoto plant in Raleigh, North Carolina, the L-Tryptophan is then sold to, and through, a network of compounding pharmacies across the United States. Purchased by individuals only under a physician's order, L-Tryptophan emerges as a new prescription drug in the serotonin marketplace; one hundred 500 mg capsules cost about \$75 — approximately five times more than if they were sold as a dietary supplement.
- Since the FDA holds the political mandate and power of a public

regulatory agency established, ostensibly, to protect people from raw corporate interests in drug production and distribution, the actions of the FDA in concert with Ajinomoto U.S.A. are illuminating. By publicly banning L-Tryptophan from its dietary supplement status and price, while allowing L-Tryptophan to be sold as a high-priced prescription drug, the naked duplicity of FDA L-Tryptophan policy is revealed.

- During and after the 1989 EMS outbreak, the FDA did not totally ban the use of L-Tryptophan in humans — then, as today, the FDA has granted the pharmaceutical industry the protected right to use L-Tryptophan in hospital settings. Manufactured by Abbott Laboratories, the amino acid injectable solutions Aminosyn and Aminosyn II contain as much as 200 mg of L-Tryptophan. (Moreover, L-Tryptophan has never been removed from baby food produced and sold within the United States.)

While the FDA has banned the public sale and use of safe, non-contaminated,

dietary supplement L-Tryptophan for people, the United States Department of Agriculture still sanctions the legal sale and use of non-contaminated L-Tryptophan for animals. Today, as in the past, feed grade L-Tryptophan continues to be used as a nutritional and bulk feed additive by the commercial hog and chicken farming industry. Additionally, L-Tryptophan is now available for use by veterinarians in caring for horses and pets. Outside of the United States, in countries such as Canada, the Netherlands, Germany, England, and others, L-Tryptophan is widely used. Nowhere have any serious or widespread health problems occurred.

At bottom, the FDA public ban of safe, non-contaminated L-Tryptophan is uneven, expensive, and biased in favor of the pharmaceutical industry. The FDA proscription effectively awards billions of dollars in profits to pharmaceutical companies and their suppliers in the same proportion as it adds billions of unnecessary dollars to the nation's already bloated health care expenditures.

On June 15, 1993, the FDA Dietary

Supplement Task Force published a report on the work it had been doing in the area of developing FDA policy around nutritional supplements. On page two, the report admits, "The Task Force considered various issues in its deliberations, including... what steps are necessary to ensure that the existence of dietary supplements on the market does not act as a disincentive for drug development."

In this case, the FDA has succeeded in carrying out its stated policy goal. With competition from publicly available L-Tryptophan removed, the rapidly expanding market in prescription serotonin drugs — now among them L-Tryptophan itself — contains no major "disincentives" for the massive accumulation of pharmaceutical industry profits.

It is now time for appropriate congressional committees to review openly and aggressively the entire matter of L-Tryptophan. This will provide a needed forum where political, corporate, and scientific issues of FDA L-Tryptophan regulatory policy may be

addressed. There exists ample precedent for such hearings: in the 1980s and early 1990s, for example, such investigations uncovered FDA favoritism in the approval of generic drugs and the bribery of FDA officials.

The story of L-Tryptophan illustrates a sad and perverse picture of the politics and priorities of public health in America: A safe, dietary-supplement serotonin producer is publicly unavailable to people, while daily fed to animals by corporate agribusiness. A drug patent is approved to use L-Tryptophan to cure the very condition the FDA claims it caused. And, while publicly exclaiming that L-Tryptophan is a dangerous and untested drug, the FDA, more quietly, allows human-use L-Tryptophan to be imported, and then marketed and sold by the pharmaceutical industry.

To allow the FDA ban of L-Tryptophan to continue unreviewed and uninvestigated condemns millions of Americans to unnecessary financial expenditures and needless suffering.”⁴

Lowell Bergman, one of the producers

of the CBS television show “60 Minutes,” had sent a copy of Dr. Manders’ 1992 L-Tryptophan research to CBS’ New York office with his “blessings.” Mr. Bergman wanted this “entire matter” presented to the American public as a 60 Minutes story/segment. It never made it on air, however, because Mike Wallace killed the story. I wonder if the millions of dollars of “direct to consumer” prescription drug ads that CBS runs each year had anything to do with Mr. Wallace’s decision to *not* make this information available to the general population. You be the judge...

So – when *the most thorough medical research EVER done in the history of mankind* indicates that a pharmaceutical drug (PremPro®) causes cancer, and kills people who take it, it is purposely overlooked, and the drug is continued to be used. But when a commonly available non-prescription, over the counter *nutrient* (L-Tryptophan) is considered bad for people because of one poorly researched study it is yanked immediately from health food store shelves. Then drug companies are allowed to make it and sell it for 5 times what it would cost at the health food store. Yeah, that’s good science. I’m impressed...

Lastly, there’s the lovely predilection

of allopathic medicine to dismiss research that doesn't fit in to its lopsided "standards of practice" dogma. Here are a few examples.

- There have been published studies that show that both men and women with cholesterol levels *over* 400 had *less* heart problems than those with lower values! That's right – the higher the cholesterol, the healthier the heart.
- "...major medical journals are just an extension of the marketing departments of major drug companies." – Richard Smith – for 25 years, the editor of the British Medical Journal.
- "(Medical) Journals have developed into information laundering operations for the pharmaceutical industry." Richard Horton – editor of The Lancet.
- JAMA (Journal of the American Medical Association) estimates that 95% of medical studies in the most prestigious journals contain false or misleading information.
- 5 of the 14 medical experts who wrote the health recommendations promoting the use of statin drugs to lower total cholesterol and LDL levels (derived from the data acquired from the famous "Framingham study") admitted having

financial ties to the drug companies that made statin drugs.

- The cancer causing effects of statin drugs is overlooked. By the 4th year of taking a daily statin drug, 1 of every 100 people over the age of 70 will get cancer (from the drug).
- In 1994, the ALLHAT study followed 10,000 people at high risk for coronary heart disease found that taking statin drugs neither lengthened their lives, nor decreased their chances of having a heart attack.
- The flu shot does not work. Even the CDC has come out and said that flu shots don't work. Predicting which influenza viruses from China will infect people in Chicago, Illinois a year later involves a fair amount of guesswork. Three studies by the CDC between 1992-1995 showed 84%, 87% and 76% of the flu people were getting was not in their flu shots. *"There is no evidence that any influenza vaccine thus far developed is effective in preventing or mitigating any attack of influenza. The producers of these vaccines know that they are worthless, but they go on selling them, anyway."*
- Dr. J. Anthony Morris, formerly Chief Vaccine Control Officer at the US Food

and Drug Administration. Well, “So what!” you may say. At least the flu shot doesn’t hurt anybody. Right? Sorry! The flu vaccine is associated with Guillain-Barre’ Syndrome. The occurrence of hundreds of cases of so-called Guillain-Barre’ paralysis from flu vaccines resulted in some 4000 law suits. Over 3 billion dollars were paid out in compensation. Why isn’t this mentioned by the people in the mall giving the shots out like candy canes? Maybe because it is the only drug whose manufacture is subsidized by the U.S. government. Talk about easy money! Great! Our tax dollars at work.

- But perhaps the king of all allopathic fallacies is the continued insistence on the effectiveness of Chemotherapy for adult onset cancer. As reported in The Journal of Clinical Oncology - Volume 16, Issue 8, December 2004, pages 549-560. In a study entitled: The contribution of cytotoxic chemotherapy to 5-year survival in adult malignancies, which was based on data from randomized, controlled trials published from January 1990 to January 2004, the conclusion of the authors was – are you ready?

FOR ALL ADULT ONSET CANCERS,
CHEMOTHERAPY IS 97%
INNEFFECTIVE.

On the other side of this hypocritical coin is the false notion of the lack of evidence in Wholistic medicine. Talk about a crock of crap!

Most Of The Treatments Used By Wholistic Physicians Have Been Proven To Be Effective With Some Type Of Clinical Trial Or Published Study.

There have been *thousands* of published⁵ research studies PROVING the clinical effectiveness of vitamins and nutritional supplements over and over and over, and yet to hear your MD talk, vitamins are a ridiculous waste of money and will just give you expensive urine. Now – is this the correct attitude for a scientist to take? No! Is dismissing *all* of the evidence that runs contrary to one particular point of view a good idea? No! It is despicable. These idiotic, close minded, prejudiced, hypocritical and unrepentant “physicians” should be taken to the town square and flogged.

My – what a nice sharp ax I have.

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3. Antidepressant Drug Effects and Depression Severity - A Patient-Level Meta-analysis, Jay C. Fournier, MA; Robert J. DeRubeis, PhD; Steven D. Hollon, PhD; Sona Dimidjian, PhD; Jay D. Amsterdam, MD; Richard C. Shelton, MD; Jan Fawcett, MD, *JAMA*. 2010; 303(1):47-53.
4. "The FDA Ban on L-Tryptophan; Politics, Profits and Prozac," *Social Policy*, Vol. 26, No.2, Winter 1995 (appeared March 1996). Reprinted here with the permission of Dr. Dean Wolfe Manders. Copyright (c) 1995, 1997, 2000 by Dean W. Manders.
5. For references you can go to the American Journal of Clinical Nutrition, The European Journal of Clinical Nutrition, or The Encyclopedia of Natural Medicine by Pizzorno & Murray.

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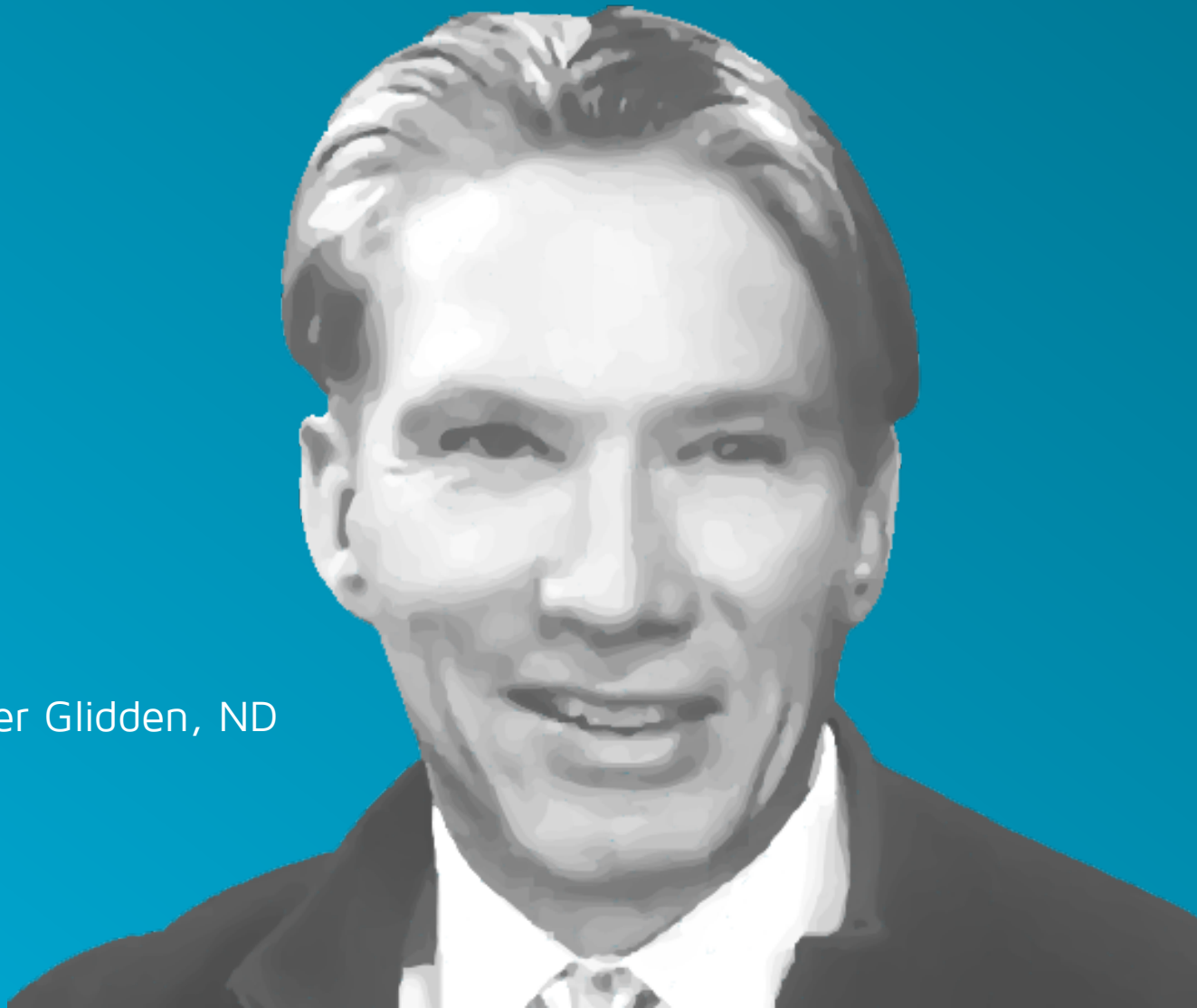
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 16

“Cure” is a 4 Letter Word

Dr. Peter Glidden, ND



One of the ways that the MDs have tricked you into believing that they are the only ones to be trusted regarding anything having to do with medicine is by cornering the market on the word “cure.”

A Naturopath could have tens of thousands of patients who had completely recovered from Type 2 diabetes, Rheumatoid arthritis, High blood pressure, Osteoporosis, Congestive Heart Failure, Asthma or Kidney disease, and even though he had the “before and after” blood work & X-Rays to prove it, if he said that he had *cured* anything, the FDA would come down on him like a ton of bricks. The FDA does not care if a health care claim is valid or not, they only care if they have approved it. This is not surprising, considering the fact that the overwhelming majority of directors and deputy di-

rectors of the FDA’s drug and medical research departments are MDs – many of whom have financial ties to pharmaceutical companies.

It costs tens of millions of dollars to do all of the research that the FDA requires in order to legally say that you can cure something. Additionally, according to the FDA, only DRUGS can be said to cure medical conditions. Bet’cha didn’t know that! That’s right – according to The Food & Drug Administration, ONLY DRUGS can *cure* things! If I discovered a plant in the Amazon that cured lung cancer and marketed it as such, it would be considered an unapproved and illegal *drug*. This is like making a law that says only tequila can make people intoxicated, and then throwing in jail all of the winemakers, unless they agreed to have their products labeled as tequila.

Before Big Pharma got its Death-Camp hands on everything, medicine was practiced with common sense. Doctors would apply different treatments with different patients, note down their results, and then compare those notes with those of their colleagues at annual medical conferences. This is why it is called “the practice” of medicine. Just a few decades ago it didn’t matter if a particular treatment was given

the OK by the FDA or not. If a treatment made 95 out of 100 patients better, and nobody was harmed, then all of the doctors that knew about it started doing it. This is what's referred to as "Clinical Judgment." Medical practice evolved quite nicely this way – and it happened in all types of medical practice. It didn't matter if you were a naturopath, a chiropractor, an osteopath or an allopath. This is how everybody went about the practice of medicine, and everyone was relatively happy. Then the FDA got into bed with Big Pharma and the MDs, and re-wrote the rules.

In the present day, there is still room for clinical judgment if you are an MD, as is evidenced by MDs' habit of frequently prescribing meds for "off-label" use. Naturopaths, chiropractors, homeopaths, etc., can also do whatever they want to do clinically if it is inside their scope of practice, but if an "alternative" medical practitioner (who is backed up by thousands of patient-hours of clinical experience) even intimates that they can *CURE* something, it's off to the "Big House" for them! This is why, in my lectures, you will always hear me say that my therapies "Support and promote the healthy function of the human body at the cellular level." Even though we have resolved arthritic

knees and high blood pressure and Type 2 diabetes and obesity thousands of times, we simply cannot use the word "cure."

All of this could of course be avoided by simply coming up with 50 million dollars to do the research required by the FDA. Then we would have to publish our findings in an allopathic medical journal. Then, once the information that we paid 50 million dollars for is published and *proven* to evoke a cure, whatever we used to do it with is immediately classified as a drug, and only pharmaceutical companies are allowed to make it. Then they charge *you* \$300 per pill for it. Your government at work...

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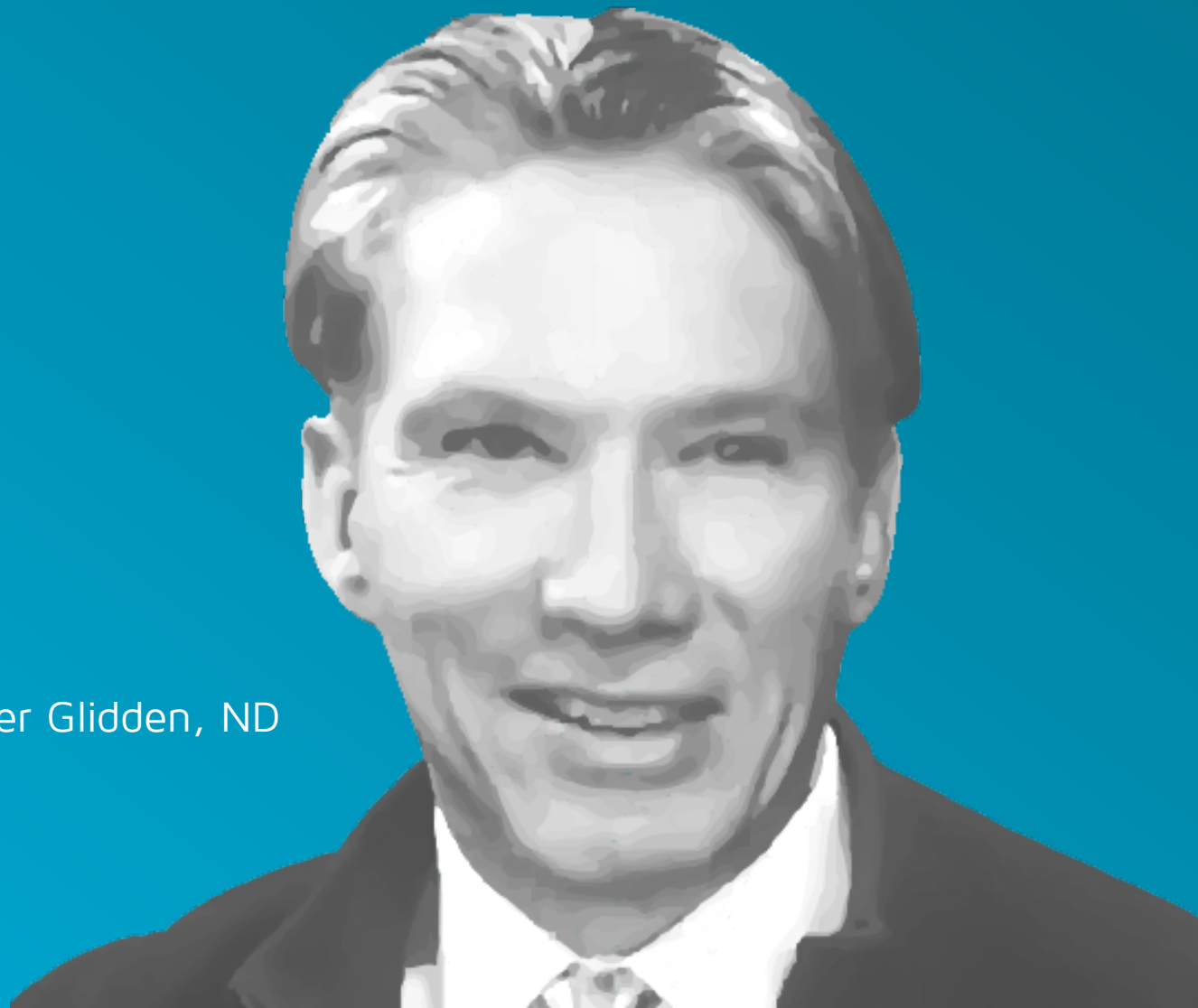
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 17

Integrate This!

Dr. Peter Glidden, ND



The philosophy of Wholistic medicine is not difficult to understand. In fact it is rather elementary (my dear Watson) once someone “in the know” lines it all up for you. For some reason, however, a great number of people who profess to use Wholistic medicine have absolutely NO IDEA of what they are talking about, and further confuse the issue for the general public.

Let me make this perfectly clear, Wholistic medicine is not “alternative,” nor is it “adjunctive.” It is PRIMARY CARE MEDICINE to be used INSTEAD OF allopathic drug and surgery treatments. Only rarely is it useful and beneficial to use Wholistic treatments as a complement to conventional allopathic ones. More appropriately, allopathic drug and surgery treatments will often complement the Wholistic ones, and in a perfect world, drugs and surgery

would be *best* used as an adjunctive treatment to Primary Wholistic therapies. Regretfully, in the upside-down world of 21st century medicine, this perfect situation is completely reversed, and allopathic treatments are viewed as the King, while all other treatments (even though curative and superior) are relegated to the back of the bus – or they aren’t even allowed on the bus in the first place.

Another trend in modern medicine which is entirely misleading is the concept of “Integrative Medicine.” You may have heard this term on the radio or in print somewhere, with a clinic or hospital espousing its practice of “Integrating” “Alternative” therapies into its conventional medical setting. This is a similar situation as discussed in the first paragraph above, but the problem here is not the misuse of a word out of ignorance. The problem here is the term itself. Nothing is *integrated* in an Integrative Medical model. Integrative medical models ALWAYS use allopathic drug treatments as PRIMARY care and use the Wholistic treatments as adjunctive, or secondary. If a clinic or hospital really followed an Integrative Medical model, it would look like this: The hospital would employ physicians who specialized in different medical disciplines (Homeopaths,

Naturopaths, Traditional Chinese Medical doctors, Acupuncturists, Chiropractors, Clinical Nutritionists, MDs, etc.) There would be an objective gatekeeper that all of the new patients would get interviewed by first. The gatekeeper would determine which type of medicine was best suited to that patient's condition, and would then make a referral to the proper physician in the clinic who would then handle the care. All of the other doctors who worked there, each practicing a different medical discipline, would be available to deliver adjunctive treatments should the need arise. Sounds GREAT doesn't it!? But this is NEVER what happens in "Integrative Medicine" centers. I'll let you guess what *does* happen there – I'll give you a minute...

Correct! You got it right! You are paying attention! Integrative Medical clinics all use allopathic treatments as their PRIMARY medical intervention and use the Wholistic treatments as secondary – and more often than not, mostly as a way to lessen the side-effects of the allopathic treatments! Cancer Treatment Centers of America (CTCA) is a perfect example. They offer an "Integrative Medical Model" for their cancer patients. What this means is that they employ Naturopathic physicians to give vita-

min, herbal, homeopathic, and nutritional supplements to their chemotherapy, surgery and radiation patients to help soften the blow of the chemo, surgery and radiation. This is done so that their patients can have *more* chemo radiation and surgery than they could have without the wholistic stuff! Is this a good idea? No! Is it using Wholistic medicine as Primary Care? No! Are the Wholistic treatments applied in any way, shape, or form as a treatment for the cancer itself? No! They are used for allopathic treatment "clean-up" only - and this is what passes for "Integrative Medicine." They must have used George Orwell to come up with their PR campaign. Let me see here, War = Peace; No Civil Liberty = Freedom; and Using Vitamins to partially negate some of the tremendous side effects of chemotherapy = Medical Integration. Pah-lease!

Alright, alright, I can hear the people in the peanut gallery shouting that it is better for chemotherapy patients to have good Naturopathic care – even if it is adjunctive, than to have no Naturopathic care at all, and I agree... but not really. No – after thinking about it, I completely disagree, and here's why: Chemotherapy is 97% INNEFFECTIVE, extremely expensive, devastating to the patient's quality of life - and

will often cause cancer. In my opinion, the only reason that CTCA employs Naturopaths is to make the patient a little stronger so that they can have MORE chemo treatments. More chemo treatments = more profit. I have no data to support this position because CTCA, being a private for-profit business entity, is not required to disclose their treatment track records.

The only way to have a truly integrated medical model in this country is for ALL medical disciplines to have equal protection under the law, equal rates of insurance coverage, and equal amounts of research dollars, more or less. Then the marketplace would naturally sort itself out. In a situation like this, the public would simply gravitate to the most effective type of medical treatment for any given condition. This is exactly why allopaths do not want there to be an equal playing field in the medical market, and why they do everything in their power to prevent it from happening. If it did happen, they would quickly lose the lion's share of the business, and they know it. Furthermore, they have to lie and cheat to keep their position at the top. As previously mentioned, there is a branch of the AMA whose job it is to stop the Naturopaths from gaining licensure and insurance coverage in states where that profession (which is my pro-

fession) is unregulated. They do this by offering misleading testimony to State legislators claiming that naturopaths are quacks, have sub-standard training, and are dangerous. Nothing could be further from the truth. In 1987, the AMA was convicted in Federal court of implementing a decade long slander and smear campaign against the Chiropractors, claiming that they were quacks, had substandard training and were dangerous. In the early 20th century the allopaths out-maneuvered the Homeopaths by glad-handing legislators in a successful bid to pass one sided prejudicial laws that made it *illegal* to practice medicine unless you used pharmaceutical drugs. This was all done under the smoke screen of slanderously painting homeopaths as dangerous quacks with sub-standard training. Do I detect a pattern here?

If, suddenly, by some “Genie in the bottle magic,” we would all wake up tomorrow and there would exist in this country equal protection under the law, equal research money distribution, and equal insurance coverage for *all* medical disciplines, within 5 years, most MDs would be out of business.

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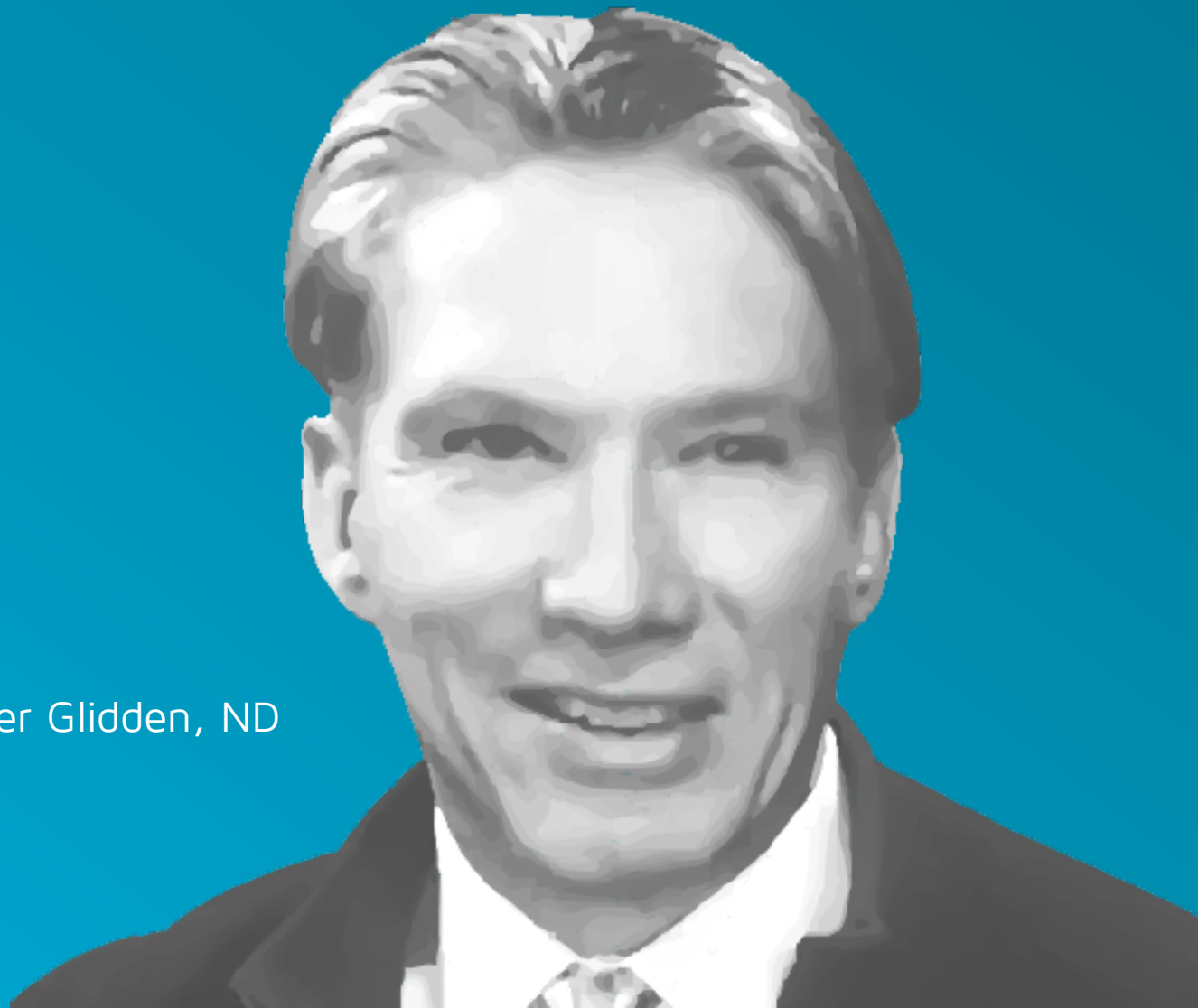
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 18

Cancer

Dr. Peter Glidden, ND



Another insidious pro-allopathic trend exists in our culture which goes completely unnoticed by the average consumer. It is another of the reasons why allopathic treatments are the King of the modern medical world. I alluded to it in the last chapter. Medical Research Money goes to individuals and organizations who are working from an allopathic perspective **ONLY**. Cancer research is not cancer research. It is allopathic, reductionistic, pharmaceutical cancer research. As you have learned by now, the allopathic view of disease is a reductionistic one, and **ALL** of their cancer treatment therapies and **ALL** of their research about how to treat cancer are filtered through that one lens. But it is the *wrong* lens, and that is precisely why there are so very *few* successful allopathic treatments for cancer. It is why we have lost the war on can-

cer.

Think about it. If allopathic medicine has failed for 200 years to come up with cures for asthma, arthritis, depression and heartburn, how successful do you think it would be with curing cancer? Fuggedaboutit! The allopathic PR machine, however, will tell you that there have been “great advances” in cancer treatment, and that we are on the verge of a tremendous breakthrough. It seems that we are always on the verge of a tremendous breakthrough. But we are not. How many people do you know who have cancer? How many of them are cancer free? Of the ones that are alive, how is the quality of their lives? How much did their cancer treatments cost? What were the side-effects of the treatment? What are their probable outcomes? Ask these questions to 50 of the people diagnosed with cancer in your community and you will start to get a realistic picture of the “successfulness” of cancer treatment in the real world.

A few years ago, in order to hide their dismal track record, the American Cancer Society changed the formula to measure the success of cancer treatments. Now, if a

cancer patient lives for more than 5 years after their initial diagnosis, it is considered a successful treatment, which naturally skews the statistics favorably in the direction of the treatment. 10,000 leukemia patients could all die on year 5 + 1 day from the leukemia, and their treatments would be labeled as successful ones! This is the main reason why the cancer treatment PR spin doctors can BS you into thinking that there have been “great advances” in cancer treatment. Overall, the results we have obtained from cancer research compared to the amount of \$\$ we have spent on it are *appalling*. If cancer research was run like a business, the \$\$ would have been stopped years ago, because that well is dry. Cancer research is *not stopped* because cancer treatment generates massive amounts of revenue, and we have been hypnotized into believing that if the allopaths can’t cure cancer, well then Nobody can! This is another perfect example of our complete and utter Pro-allopathic Pavlovian cultural conditioning. Even though the allopathic model for cancer treatment has delivered treatments that are unbelievably expensive, extraordinarily harmful, painful, crippling, cancer causing (!) and deliver lousy results (97% *Innefective*) – we keep funding it over and over again hoping for a different outcome. Again- we should all have

our heads examined.

There is another aspect of cancer treatment that should not be overlooked. It has to do with money. If you were to go to your MD with a sinus infection, you would get a prescription for an antibiotic. When the MD writes that prescription, he gets no kickback. Now, if he writes 1000 prescriptions a month, the drug company that makes the antibiotic will send him to a medical “conference” in Cancun – all expenses paid, but that is as much of a kickback as he gets. It is a little different with cancer drugs. When an oncologist prescribes a chemotherapy drug, he gets a piece of the action. Chemotherapy is the only category of prescription drugs where this is allowed. The profits here are HUGE. The hospital buys the drug for \$5,000. They sell it to the patient for \$18,000. The insurance company pays \$15,000. The hospital writes off the \$3000 loss, and the MD oncologist gets a percentage of the profit. At the very least, the MD will pocket \$3000 for every prescription – of a drug that is 97% INNEFFECTIVE, and that can cause cancer as one of its side-effects. *And I’m the quack!* The main reason that chemotherapy is used even though it does not work, is because of the HUGE profits that it generates. 500 patients per

month x \$10,000 = \$10 MILLION dollars of PROFIT a month – and that’s a conservative estimate. Everybody wins except the patient.

In order to help draw back this cancer-curtain, I have developed a questionnaire for cancer patients to use with their oncologists. It will go a long way towards helping cancer patients to gain perspective on what they are about to get themselves into. People that have used this questionnaire have been kicked out of their doctor’s offices, so beware. We are about to tug on Superman’s cape. It is the rare doctor who will answer numbers 7-10. Good luck...

Doctor, I understand that this hospital is a “For-Profit” business. Because it is a “for-profit” business I am shopping for the best deal that I can get. Toward that end, I have a few questions that I would like to ask. The answers you give will help me to determine which hospital to use.

1. What percentages of your patients with my diagnosis have been cured? If a cure is not possible, then what should I expect?
2. How many of your patients with my diagnosis have survived more than 5 years? More than 10 years? More than 20 years?

3. Would it be possible for me to talk to a few of the survivors to see what the quality of their lives is like?
4. What legal solutions are available to me if the procedures administered by this hospital hurt me? Before treatment, will I be required to sign a waiver which releases the hospital or you from any harm caused by the treatments?
5. Chemotherapy was proven to be 97% ineffective in the treatment of adult onset cancers by a study published in the Journal of Clinical Oncology. Why are you recommending I do it?
6. How much will my treatment cost?
7. How much profit will the hospital make from my treatment?
8. How much profit will you make from this treatment?
9. In this hospital, if you order a CT scan or an MRI, or a chemotherapy drug, how much of a financial kickback do you get?
10. If you were me, would you take the treatment you are recommending.

Cancer is NOT a reductionistic

phenomenon. It is a Wholistic phenomenon. It happens because of a facultative breakdown in the SYSTEM of the body, not because of a problem in one of its PARTS. Women don't get breast cancer because they have breasts (or estrogen), and men don't get prostate cancer because they have a prostate gland (or testosterone). Cancer needs a Wholistic treatment to cure it. But when 10,000 women all get together and do their 5K run for breast cancer research, how much of the money that gets raised goes to *Wholistic* cancer research? I'll tell you how much – Zero. It all goes to the allopaths, even though they are ill-equipped to fight this battle and to find a cure. Most people apparently feel OK about throwing good money after bad down a rat-hole. I do not. Somebody should sit Lance Armstrong down and school him as to the true statistics of cancer treatment. He might then be less inclined to help foster the false belief that allopathic research is a smart way to invest cancer research dollars. It is not.

While we are on the subject, it is worthwhile to talk about breast cancer. Many times, the treatment of breast cancer involves something called “radical mastectomy.” This is “high fallutin’ doctor talk” for surgically

removing the entire breast. Let's think about this for a moment. If I had psoriasis on my hand, one way to fix it would be to cut off my hand. If every doctor in the country went around cutting off the hands of people with psoriasis on their hands, they could effectively say that their treatment for psoriasis was successful. Soon there would spring up support-groups for handless psoriasis survivors, and money would be raised to perfect the surgery and to develop cutting-edge robot hands, just like Luke Skywalker in Star Wars. With time, the medical community could even construe this treatment to be a “cure” for hand psoriasis. Even though leg and back and face and arm and foot and joint psoriasis were still a problem, we could assume that is was only a matter of time until the medical system would develop a breakthrough treatment for them as well. But the fact of the matter is, that cutting off the breast of someone with breast cancer, and then lauding it as a clinical success is misleading to the general public, and it completely skews the data for cancer treatment in general.

Is it better to lose a breast than to die from breast cancer? Yes. Is it right-thinking to assume that breast cancer is caused by the breast? No. Is it appropriate to continue to give research

money to a system of medicine that must rely on radical surgery to prop up its pathetic treatment record? No. If we leave it to the MDs, with time, they will be recommending that after the age of 40, all women should preventively have their breasts removed. The standard allopathic treatment of breast cancer is a clinical absurdity that we have all become accustomed to.

Well, you may wonder – “What about the wholistic treatment of cancer?” I thought you would never ask...

Here is the rest of the monograph written by Abram Hoffer, MD about his experience with Wholistic cancer treatment (you saw the first part of this in chapter 3). He is one of the pioneers of vitamin research in the field of applied clinical medicine. (This means that he uses vitamins as primary care to treat his patients.) He was Linus Pauling’s research partner for years, and is the founder of the “Orthomolecular” medical school of thought, which, much like Naturopathy, encourages the use of vitamins and nutritional supplements to treat disease.

“An elderly woman appeared and when I asked her why she had come she replied that she had cancer of the head of the pancreas. She had developed jaundice. Her surgeon discovered she had a large tumor in the head of the pancreas which occluded her bile duct. He promptly operated, created a by-pass, and when she recovered from the anesthesia advised her that she had about 3 to 6 months to live. She worked in a book store. She had read Norman Cousins’ book, Anatomy of an Illness and thought that if he was able to take so much vitamin C with safety she could too and she began to take 10 grams each day. The next time she consulted her doctor she told him what she was doing. He referred her to me since he was familiar with my interest in mega doses of vitamins. I reviewed her program and increased her vitamin C to 40 grams daily trying to reach the sub laxative level. I had been using multi nutrients for my schizophrenic patients for many years and since I had no idea which, if any, of these vitamins might help, I reasoned that she would have a much better chance if she also were to take more than one nutrient. I then added vitamin B-3, selenium, and zinc sulfate. Six months later she called

me at home in great excitement. She had just had a CT scan. No tumor was visible. The CT scan was repeated by the incredulous radiologist. Her original bile duct had reopened and now she had two. She remained alive and well until she died February 19, 1999, nearly 22 years after she was told she would die. Rarely patients make a major contribution to medicine by their interest in a disease and their willingness to try innovative approaches. A.S.'s recovery changed my professional career and I believe will make a major contribution to the complementary treatment of all cancer patients. Last year at a public meeting I thanked her publicly when I discussed her case before a meeting of Cancer Victors. She added that I had changed her life as well. She has also changed the life of hundreds of cancer patients who became visitors, not victims. By telling her friends, relatives and customers about her recovery she changed the nature of my practice. That first year another five patients were referred. The second case was a man with a sarcoma of the prostate which was invading his pelvic bone. He was advised no treatment was available. His doctor referred him to me

and I started him on a similar program. But he was only able to take about 10 grams of vitamin C daily. I asked his doctor if he would mind injecting him with 10 grams of vitamin C twice weekly. After six months his doctor wanted to know how much longer he would need to receive his vitamin C. He told me that the tumor was gone. He stopped the injection. He lived another 9 years and died at age 80, but not from his cancer.

Dr. Pauling developed an elegant method for determining the probable outcome of treatment using cohorts of patients who were or were not treated... We agreed to publish as coauthors. I suggested that the first paper would be by Pauling and Hoffer. This was because it was his original idea to use mega doses of vitamin C and the work I had done was merely to test his conclusions. He was very firm that he would not consider this and insisted it would appear as Hoffer and Pauling. I think he felt that as a clinician who had done the clinical work I should be the senior author. He did not have an MD. Linus Pauling, in my opinion, was the most

brilliant humanitarian scientist that ever lived. Over his life time in addition to his two Noble Prizes, he was awarded nearly 40 honorary degrees, Ph.Ds and D.Sc.s.... His contribution to human health has surpassed that of most physicians. We wrote the paper using his method for analyzing the data and my clinical material. But the Proceedings of the National Academy of Sciences refused to accept the paper... Eventually we published in the Journal of Orthomolecular Medicine. I am the editor and I could not refuse to accept our work. ☺ That original paper was reprinted in the book by Ewan Cameron and Linus Pauling: Cancer and Vitamin C. Updated and Expanded. Camino Books Inc, P.O. Box 59026, Philadelphia, PA 19102. 1993. In our two (more) recent studies, (Hoffer and Pauling) we concluded that the addition of vitamin C improved the outcome of treatment for cancer significantly and substantially. In the first study 134 patients seen between August 1977 and March 1988 were followed until December 31, 1989. We concluded that orthomolecular treatment given to female related cancers had improved life

expectancy about 20 times compared to our non random controls and 12 times for other cancers. In our second paper a second cohort of 170 patients seen between April 1988 and December 31, 1989 was followed to December 31, 1992. These results were about the same as those we had published earlier. We concluded that while vitamin C alone led to about 10 % excellent responders the addition of the other nutrients increased this to about 40%.

Orthomolecular treatment improves the quality of life. It also decreases the side effects of radiation and chemotherapy. The program is palatable. The only patients who could not follow it were those who were getting chemotherapy and suffered severe nausea and vomiting or patients who could not swallow because of lesions in their throat. Orthomolecular therapy provides a step forward in the battle against cancer and must be fully explored. There can be no logical reason today why most of the research funds should go only toward the examination of more chemotherapy and more ways of giving radiation. There must be a major expansion into the use

of orthomolecular therapy to sort out the variables and to determine how to improve the therapeutic outcome of treatment.”

WOW! Now remember – this is just *two* doctors’ experience with Wholistic cancer treatment, and their results were *phenomenal!* Just two! There are hundreds more. Dr Joel Wallach, my colleague, mentor and friend, successfully sued the FDA many times to secure something called “Qualified Health Claims.” One of the law suits was about the mineral Selenium and its relationship to cancer prevention. Because of Dr. Wallach’s law suit, we are now able to legally say the following:

Oral supplementation with 200 mcg of Selenium (a mineral supplement much like calcium) will reduce the occurrence of the following cancers.

- ☐ Breast cancer by 82%
- ☐ Prostate Cancer by 69%
- ☐ Colo-Rectal Cancer by 64%
- ☐ Lung cancer by 39% - even if you are a smoker.

Reading this book is probably the first time you have seen this data. Why hasn’t your doctor told you this? Isn’t this important? Do the Susan

G Komen people know this? Why hasn’t serious research money been given to doctors working this angle of cancer treatment? Furthermore, why isn’t EVERY chemotherapy and radiation patient given a concurrent vitamin treatment? I guess an increased survivorship of 40% just isn’t good enough for the quack busting, know-it-all, head in the sand, allopathic oncologist. Oh! I almost forgot – A patient of mine is currently getting conventional allopathic treatment for pancreatic cancer (with metastases to the liver). His chemotherapy costs approximately \$45,000 per 4 day session. He has had 3 sessions and needs 3 more. You do the math. With numbers like these, it is not hard to see why cancer research dollars go *exclusively* to allopathic drug research. Did I mention that one month of Hoffer’s vitamin protocol costs approximately \$265, and that one bottle of selenium costs approximately \$25? Are there any conclusions you would like to draw from these comparisons?

There is an Indian MD named Ramakrishnan. He has a clinic in Madras on the subcontinent of India. He has treated thousands of cancer patients with homeopathic medicines. He has a 32% success rate with liver cancer, 40% success rate with colon cancer, 80% success rate

with prostate cancer, and a 45% success rate with uterine cancer. Remember – this is the clinical application of homeopathic medicine ONLY (which most MDs consider placebo) – and he is getting this kind of success. Have you ever heard of him? Probably not. Has the American Cancer Society ever sent anyone to India to supervise, prove and document his work? No!

An educated person would think that the evidence presented by Wallach, Hoffer, Pauling and Ramakrishnan alone would be compelling enough to stimulate SERIOUS research into the area of Wholistic cancer treatment. (Notwithstanding the clinical work done by hundreds of other physicians as well) Of course it is, and it should – but so far it hasn't happened, and unless Oprah gets involved, it won't. The money behind conventional allopathic cancer treatment is TOO HUGE for anything else to even have a chance of even being looked at, unless it is by some miracle. So get out there and disrupt the next 5K Run for Breast Cancer Research event, would ya? All of those well intentioned, dedicated and honorable women have been sold a false bill of goods, and they don't even know it. The only thing worse than

being swindled like this is being given a diagnosis of cancer... with no Wholistic physician in sight, and the 97% ineffective, \$45,000 toxic chemotherapy IV bags waiting in the wings.

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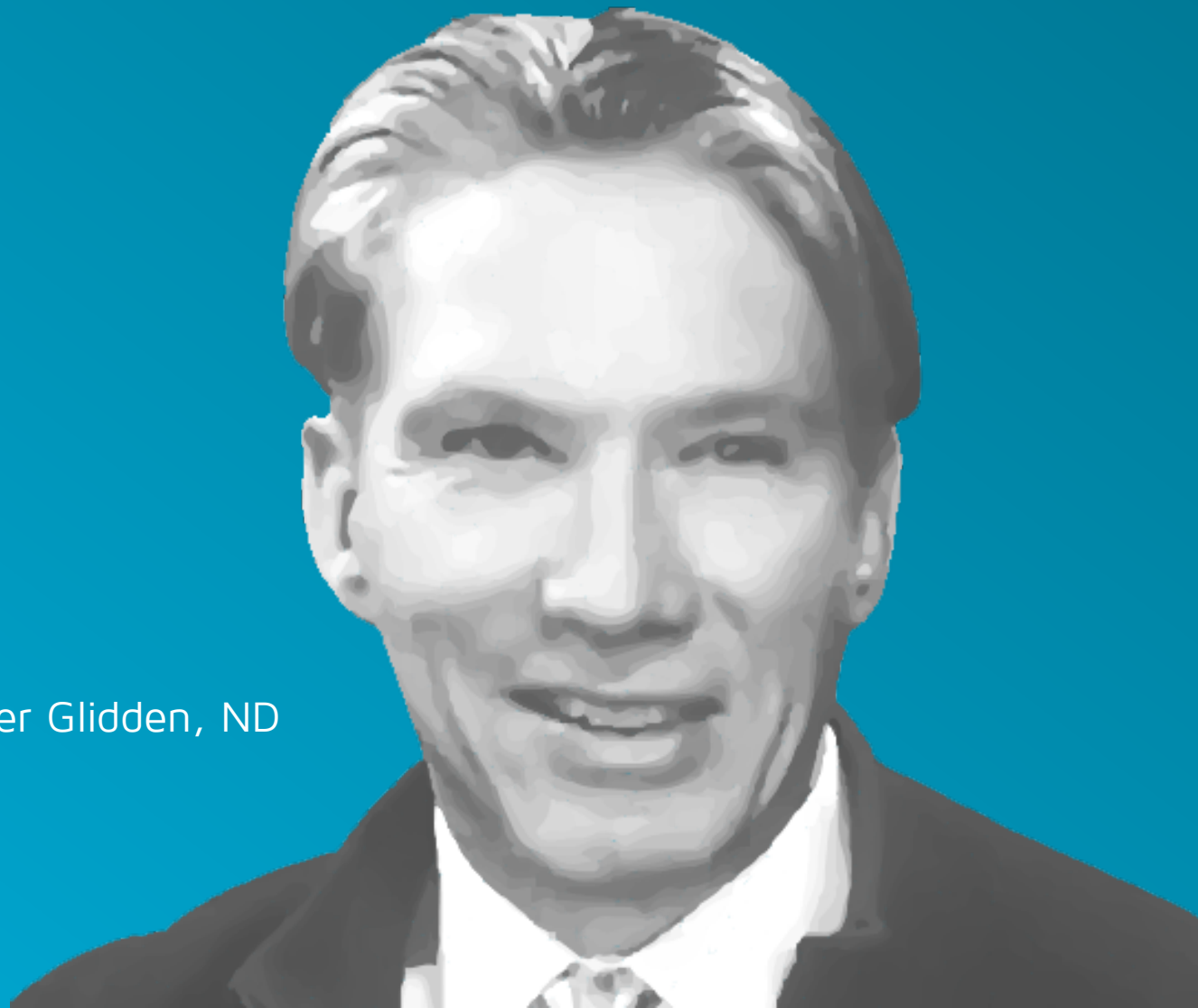
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 19

King of the World!

Dr. Peter Glidden, ND



One of the problems with our culture is that we have somehow taken up the belief that *Allopathic medicine* is the King. I mean, if a treatment isn't advocated by an MD, well then, it is just not valid. Harrumph! But MDs are NOT the Kings of Medicine. Their profession doesn't even come close to being able to help us with our most basic health problems. Yet we worship at its altar none-the-less. Instead of recognizing their limitations, and moving on, allopaths just dismiss everything that they have had no training in as irrelevant, foolish or imaginary. How very scientific! The fundamental problem here is that most MDs are arrogant and pompous. They are the Duke, but they think they are the King. To allopaths – God, Clinical nutrition, Homeopathy, Acupuncture, Energy medicine, Poetry, Religion, Spirituality, Human relations,

Emotion, Philosophy, Art, Music, Psychic phenomena and hundreds of other subjects, are all nonsense and irrelevant because they do not fit comfortably into their Cyclopean, left-brained, reductionistic world-view of: “Life as a Measurable Machine.”

Arguably however, metaphysical concepts such as Spirituality, Love, Thought, and Consciousness itself are pretty heady ones. I have used them here only as examples to help you to understand how allopaths and Wholistic doctors think about the world that we all live in, because how somebody thinks about something informs how they act about it.

On a more practical level, these differing world views are completely responsible for all of the therapies prescribed by each and every doctor of each and every different medical discipline. Allopaths do what they do because they are trained in a reductionistic medical model, not because they are malevolent. The trouble I have with most of them is that they think they are know-it-alls, and they have absolutely no time to entertain any conversation about *anything* that is outside of their ken. As far as allopaths are concerned, if they didn't learn it

in medical school, it is simply not valid, period, end of discussion. If they just left it at that, it wouldn't be too bad. I mean, nobody's perfect, right? But they just had to take it a few steps further. They just had to try and monopolize the medical industry. They just had to go out of their way to make it difficult/impossible for any other doctor to practice any other type of medicine. Meanwhile, their poor patients suffer the brunt of their failed and dangerous treatments on a daily basis. In today's medical culture, the majority of patients have no other medical option than to go to the allopath. It is a travesty. Most of the clinical work that I have done in the last 20 years has involved cleaning up the messes that allopaths have made with their patients' health.

Remember - knowledge is power, and perspective is clarifying, so let me summarize this situation for you once and for all. Then we can move on to the second part of my diatribe – a little something I like to call: The Acquisition of Health.

- Allopaths do not believe in anything that they cannot measure with machinery - and the more machinery the better.

To them, the soul is a figment of the imagination, and has absolutely no impact on the health of the body. Consciousness and emotions are merely the result of biochemical interactions. Life itself - that Spirit-like Vital force that brings light to the eyes of the living, is the result of some uncategorized biochemical phenomenon. There are no energy meridians, no Vital Force, and no such thing as intuition or anything psychic. All disease has its roots in the physical body entirely, and is best studied by post-mortems and examination of tissues in culture dishes under a microscope. The specific details of the subjective symptoms of a living person who is sick are more or less irrelevant. What is most important is to arrive at the correct diagnosis through objective discovery, and then to deliver the standard treatment for that particular disease. The treatments employed rely on synthetic, patented, pharmaceutical drugs exclusively. Synthetic drugs are used to thwart the symptoms of the disease as best as possible, and to subdue and overpower the natural expression of the disease process. The treatments

are rarely curative, because they do not attack the root cause of the illness. There is no such thing as “The Wisdom of the Body.” Nutrition is an afterthought, is never delivered as a primary medical treatment, and is often dismissed as irrelevant. Symptom suppression is encouraged. Individualized treatment is unnecessary, unless the patient has an allergy to the standard medicine used. Symptom migration after symptom suppression is a fiction that does not happen, and the organ systems of the body should all be treated separately. Specialization is encouraged. Surgery is encouraged. Patients should not complain about their treatment, nor ask too many questions about it because, well, what other option do they have? All other medical disciplines are little more than quackery and should be outlawed. The doctor should not be questioned, and the less the patient communicates the better. If the treatment engenders troublesome side effects, the patient will just be given another prescription drug to manage them. If the treatment kills the patient, it is OK, because it was all done in the name of science.

Are we clear now? Makes you want to run right out and visit your MD doesn't it? All of this clarity and perspective makes one thing certain: For all chronic disease states, Allopathic medicine is a bad choice. It is only good for dental care, surgery (when it is absolutely necessary), emergency care, military field medicine, and for some nasty infectious diseases. In these areas, it *excels*, fittingly. For everything else it is dangerous, destructive, harmful, suppressive, stupid and just plain wrong.

The King is dead! I wish! Regretfully, the King is very much alive and well, and living off of drug company stock dividends. Woe is me, and you, and everyone who is sick and has no idea of what Wholistic medicine is, or any idea at all of what it can really do.

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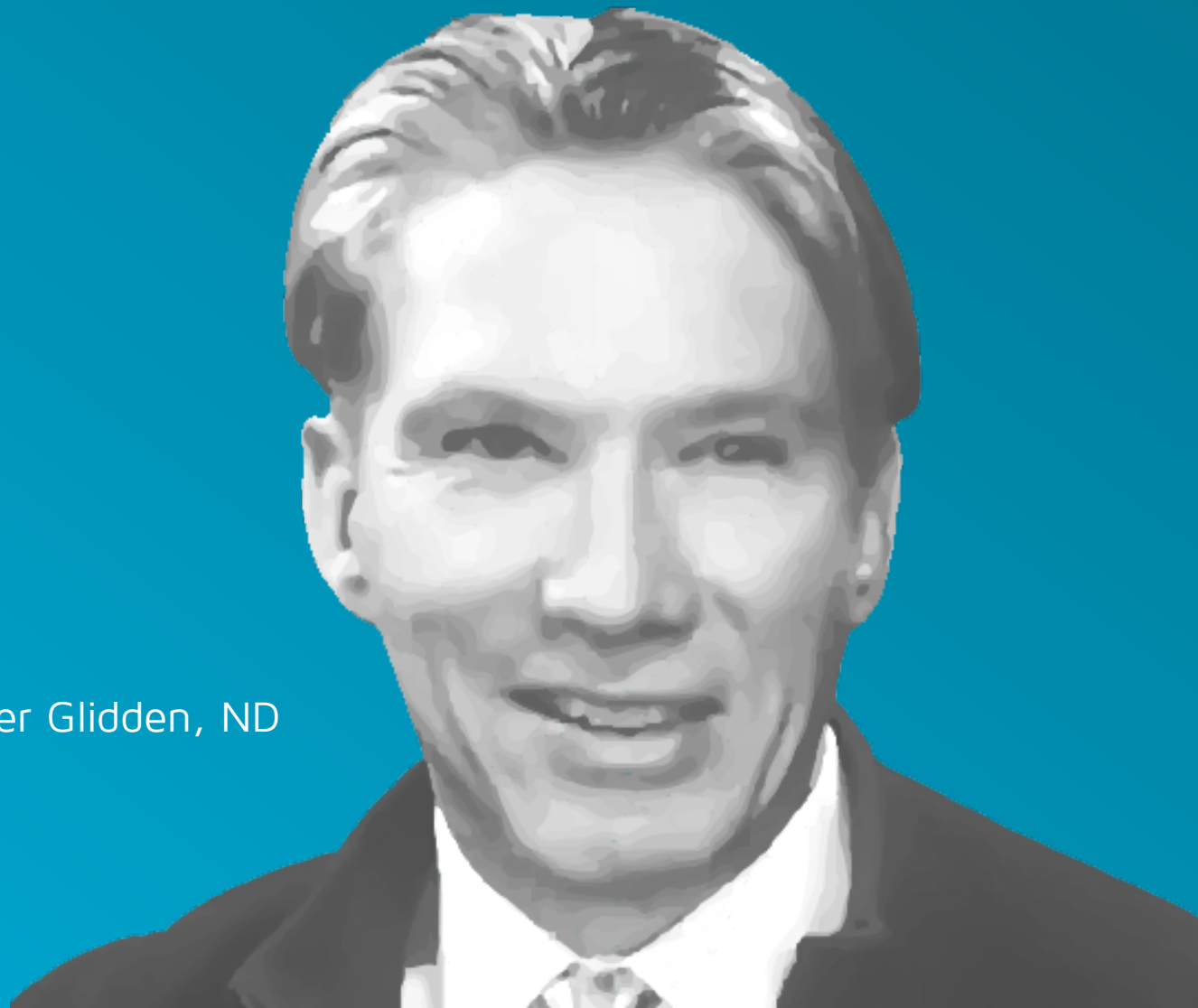
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 20

The Acquisition of Health

Dr. Peter Glidden, ND



The Latin root of the word “doctor” translates as “teacher.” In keeping with my role as a doctor, and with my philosophy of empowerment through education, I am about to give you unsolicited health advice. It is for your own good. Everything I am about to recommend from here to the end of this book is based on 22 years of my clinical experience, working with real patients who have recovered from real medical problems. It is also the result of hundreds of millions of dollars of research, and decades of combined clinical experience amongst a few of my licensed naturopathic colleagues. All of my recommendations are based on what I and my colleagues have actually seen work, whether or not the treatments have been published in medical journals. These are “boots on the ground”, REAL, and effective treatments. Most of these

treatments you can do on your own. If you hurt yourself following this advice, well – someone would have to be really stupid to hurt themselves following this advice...so just be careful, use your common sense, and don’t let this advice come between you and your Wholistic physician. It is always best to consult a licensed Wholistic medical provider when attempting to produce a positive outcome with your health. There is no substitute for real-time professional medical supervision, and I do not intend this information to be viewed as such. OK – my lawyer is happy now, so having said that – let’s proceed.

Here are my recommendations for a healthy life in outline form. There are 6 of them. The rest of this book goes on to explain them in detail, and to give you some knowledge of how they work, and why they are necessary. If you can’t do them all, then don’t expect remarkable results. Do them all. If you can’t do them all, then do them all. If you are a wicked lazy-ass, then just do #s 1-6. If you are an unbelievably “wicked pissa lazy ass,” as they say in Boston, then just do them all. Whatever else you do, DO THEM ALL.

1. Supplement your diet with the 91 essential vitamins, minerals, and fatty acids (in absorbable forms) that your body needs EVERY DAY. Use Youngevity products exclusively (see chapter 26).
2. Take antioxidants equaling or exceeding 20,000 ORAC points EVERY DAY.
3. Stop consuming any Oil that is in a bottle – even olive oil and salad dressing, and remove the following foods from your diet immediately:
 - ☐ Wheat
 - ☐ Barley
 - ☐ Rye
 - ☐ Oats
 - ☐ Fried food
 - ☐ Well done meat (rare or medium rare is OK)
 - ☐ Meat with nitrates added to them.
 - ☐ The SKINS of baked potatoes, yams and sweet potatoes.
4. Drink 1-3 quarts of pure water daily, depending on your body weight. Avoid water bottled in thin plastic. Do not use alkalized water. Do not use carbonated or sparkling water. Preferably get a water filter for your tap and store your filtered water in a glass container.
5. Eat less than you need to fill yourself up. There should always be a sense that there is some more room in your stomach at the end of each meal. Reduce the amount of food that you eat. Eggs for breakfast, Nuts for lunch, and a regular sized meal at dinner are perfect. Have protein be at least 40% of each meal. 1500 calories a day is optimal. Regular periods of fasting are a good idea.
6. These foods are beneficial and should be emphasized:
 - ☐ Eggs
 - ☐ Butter
 - ☐ Salt
 - ☐ Meat (if it is beef, eat it rare or medium rare only)
 - ☐ Chicken (with the skin)
 - ☐ Fish
 - ☐ Vegetables
 - ☐ Fruit
 - ☐ Nuts (mixed and salted are best)
 - ☐ Rice
 - ☐ Beans
 - ☐ Milk & milk products
 - ☐ Millet
 - ☐ Quinoa

- ☐ Seaweed
- ☐ Red wine
- ☐ Herbal teas, Green tea, Coffee
- ☐ Spices
- ☐ Lard – That’s right, Lard!

This “Good Food” list is relatively self-explanatory with a few noteworthy exceptions. Numbers 1-4 are pretty interesting and fly directly in the face of conventional wisdom. This is because conventional wisdom about food was invented by people with an allopathic agenda and zero experience with autopsy and pathophysiology. You would be better off to listen to me.

Eggs are one of nature’s perfect foods for the human body. They are the protein that all other proteins are compared to, and they contain lots of cholesterol that you now know is really good for you. The best ways to cook eggs are: soft scrambled in butter, soft boiled, or poached. If you cook an egg too much, the yolk will turn green. This is an indication that the cholesterol in the egg has become degraded, and has lost some of its nutritional value. The only time that an egg is not good for you, is if you have developed an allergy to it. (See next chapter).

Salt is one of the most important nutrients that you can put into your body (see chapter 24). The word “salary” was coined because Roman soldiers were paid (among other things) in salt. This is where the term “Worth his salt” came from. **DO NOT** listen to your knuckle-headed MDs when they tell you that you should be on a salt restricted diet. Salt has **NOTHING** to do with high blood pressure or with swelling of the limbs. If your limbs get swollen it is because you do not have enough protein in your blood stream.

Butter is a saturated fat and it is just about impossible to turn it into a “bad” trans-fat. Also, it is loaded with cholesterol, which you now know is good for you. Because we advise eliminating all oils from your diet, you can use butter (and lard) to sauté things in on low heat.

When red meat is cooked “well done” and/or it is charred on the grill, some of the proteins in the meat are transformed into chemicals called Heterocyclic Amines (HCA). This is not good. HCAs are carcinogenic and pro-inflammatory. Here is a little information on heterocyclic amines pulled off of the National Cancer Institute’s website: www.cancer.gov/

cancertopics/factsheet

- Heterocyclic amines (HCAs) are the carcinogenic chemicals formed from the cooking of muscle meats such as beef, pork, fowl, and fish. HCAs form when the amino acids and protein present in muscle meat react at high cooking temperatures. Researchers have identified 17 different HCAs resulting from the cooking of muscle meats that may pose human cancer risk.

We advise against eating *anything* that has been fried because of the Acrylamide connection. The information below was taken from the website, www.naturalnews.com, which is an excellent source of information about Acrylamide.

- Acrylamide is a cancer causing agent that is created when foods are grilled, fried, baked or roasted. It is a byproduct of cooking starchy foods at high temperatures. Acrylamide is found in the highest levels in foods that become browned in the cooking process such as French fries, potato chips, and grilled meats and vegetables that have grill marks on them. Toasted bread and cereals, and baked foods such as sweet potatoes and

browned meats also contain substantial amounts, as do dried fruits.

- Any starchy food cooked at high temperatures will contain acrylamide. Potatoes that are fried may be the worst offenders, with potato chips fried to a golden brown containing the highest levels. Boiled or mashed potatoes will contain acrylamide, as will cooked sweet potatoes. It can also be found in toasted or roasted cereal grains and bread products -- again with the highest levels contained in those baked to a golden brown, and roasted on a grill, or popped in oil. Pretzels are promoted as healthy snacks, but that golden brown color is your tip that they contain high levels of acrylamides. Coffee creates acrylamide during its roasting.

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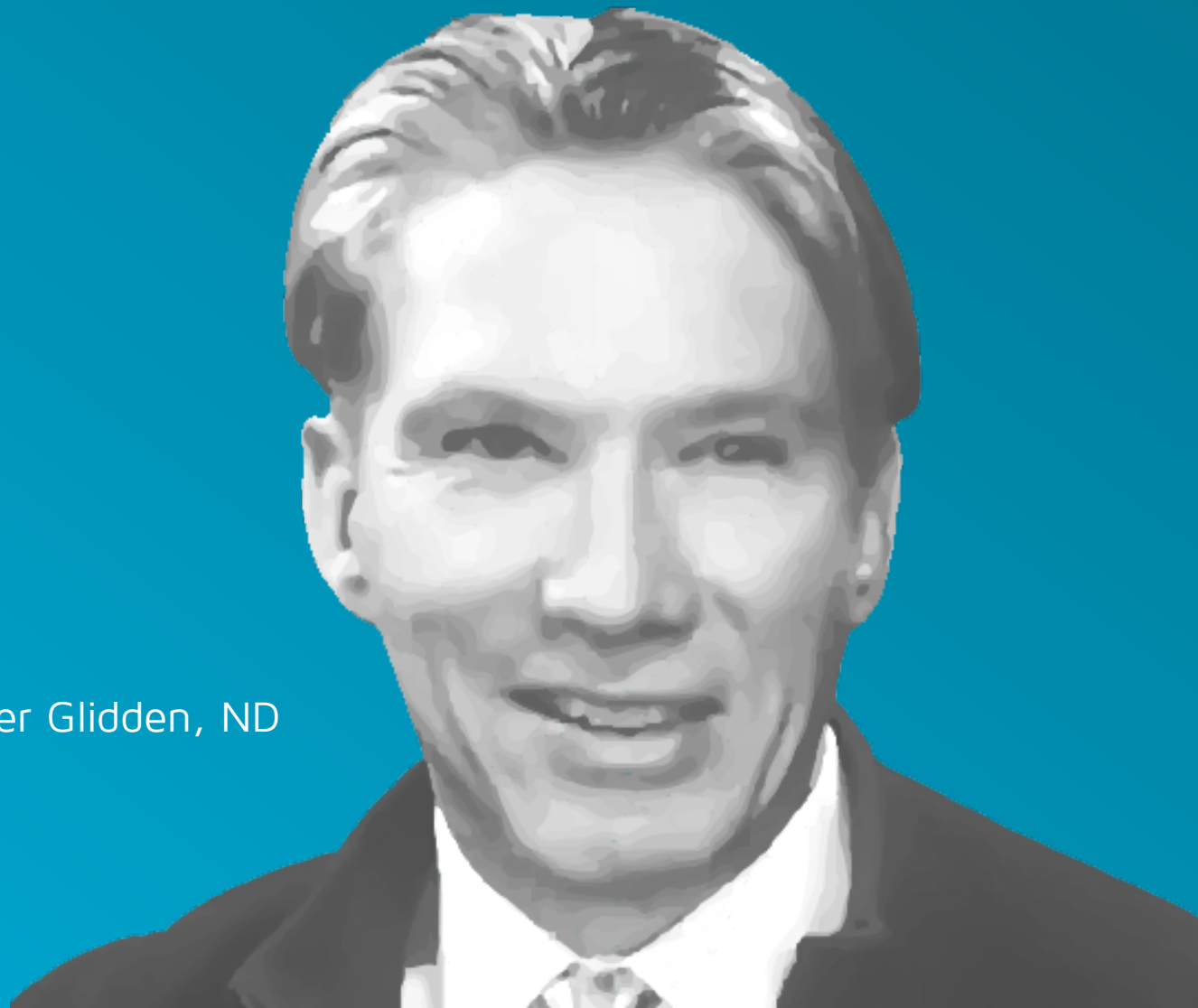
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 21*

Where's the Fire?

Dr. Peter Glidden, ND



Inflammation is one of the major contributing factors to the development and the persistence of disease. Medical professionals refer to inflammation in the body as “itis.” *Arthritis* is inflammation of a joint. *Pharyngitis* is inflammation of the throat (sore throat). *Bronchitis* is inflammation of the lungs, etc. etc. Many things can cause inflammation: Bacteria, Trauma, Pollution, and too much Tequila are all pro-inflammatory, but they are infrequent offenders. A repeat offender – in fact the King of the repeat offenders, is something called a “free radical.” Free radicals are found in some foods and drinks, and are also formed by the liver as it detoxifies nasty things (alcohol, pesticides, nicotine) that have found their way into the body.

Free radicals are like metabolic Velcro – they will stick to just about anything. When a free radical sticks to something in the body, that thing becomes oxidized. When something becomes oxidized, it becomes destroyed. When iron is oxidized, it turns to rust. If you cut an apple in half and leave it on the counter, the exposed apple fruit will oxidize, turn brown, and rot. Oxidation is not good – unless we are *trying* to destroy something. Interestingly enough, the body (in its wisdom) uses the process of oxidation to kill bacteria. But this sword cuts both ways, and oxidative damage caused by free radicals in the body is most often a BAD thing. But fear not! The body, in its wisdom, has many ways that it puts out the fires of oxidation. You have probably already guessed that one of the things that the body douses the fires of oxidation with is called an *anti-oxidant*.

The effectiveness of an anti-oxidant is qualified by its ORAC score. ORAC is an acronym for Oxygen Radical Absorption Capacity. (The most common type of a Free Radical in the body is formed from oxygen

*Special thanks to my good friend Mark Denning, RN for coming up with the title for this chapter and chapter 24.

– hence the term, Oxygen Radical). Most Americans, following the juvenile and ass-backwards nutritional advice of their MDs, accidentally consume about 1,500 ORAC points of antioxidants a day. Current research on Longevity clearly shows that in order to extend our life-spans and secure our health into our second century, we need to consume a minimum of 20,000 ORAC points a day! This is another of the leading reasons why Everyone Is Sick. We need 20,000 ORAC a day and we only get 1,500. This is like living in Chicago in the winter, in a leaky tent without any heat, and then wondering why we got pneumonia.

Many foods and drinks have antioxidants in them. It would be prudent for you to learn about the ORAC value of different foods & drinks, and then to start consuming those that are high in ORAC value. Green tea, yerba matte tea, curry powder, cinnamon, red wine, dark skinned fruits, unsweetened, unpasteurized chocolate, all contain relatively high levels of ORAC. That's right – I said "Chocolate!" The easiest way to get ORAC into your body is with nutritional supplements. The Youngevity Company has a nutritional supplement made from chocolate that contains

16,900 ORAC points per piece! Per piece! This is the highest ORAC score of any single nutritional supplement currently on the market. Whether you secure 20,000 ORAC points with food or with nutritional supplements doesn't matter, as long as you do it.

As a parting shot, I have to mention a common misconception regarding nutrition. It is a Medical Myth of Gargantuan Proportions. If I had mentioned this earlier on, you would have thrown the book down and walked away, thinking that I must be out of my mind. Imagine what you would think if you lived in Spain in 1499 AD and there was this guy Christopher Columbus going around town saying that the earth was round. Your entire life, everybody *knew* that the earth was flat. Now someone was saying that it is round? What!?

We who practice wholistic medicine have the same problem Columbus had. Our message is revolutionary, and is more often than not misunderstood... Having said that, here is the latest medical myth to be busted. Take a deep breath. Ready? One of the worst foods that you can consume on a regular basis is..... any Oil in a bottle. That's right, even everybody's

favorite – Olive Oil. Sorry! I know, I know! Remember - I am only the messenger. Don't shoot the messenger!

Why is oil in a bottle a problem? Like the cut apple on the table top turning brown, when oil in a bottle mixes with air, over time, it becomes oxidized. When you cook with it, it oxidizes much more quickly. When you consume oxidized oil, you are literally pouring free radicals into your body. This is NOT good. One of the other bad things that olive oil does is it *lowers* your cholesterol. Remember – cholesterol is our friend, and low levels of it will cause tons of trouble.

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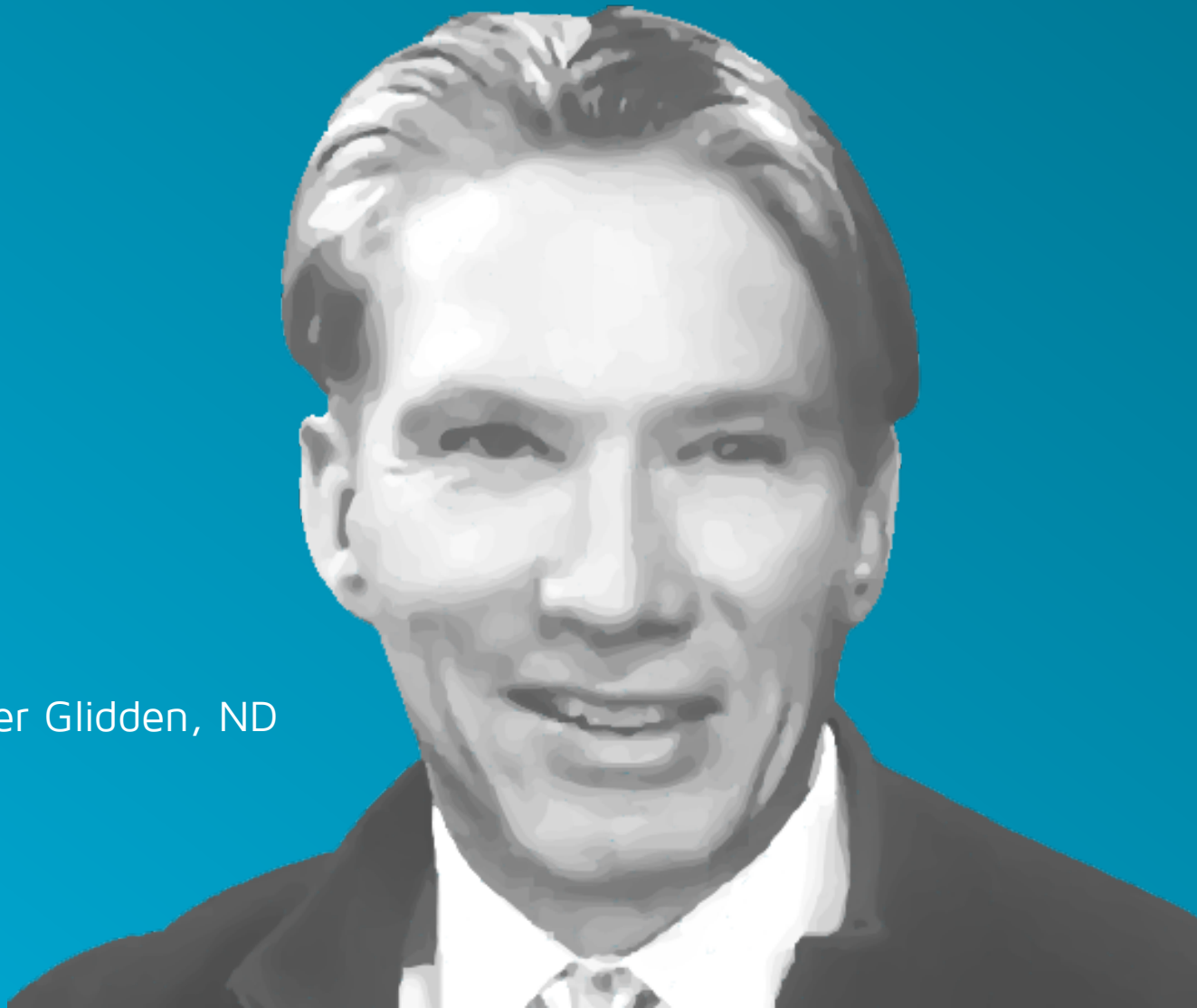
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 22

Low Calories = Long Life

Dr. Peter Glidden, ND



Baby boomers are entering their 60s now, and they are getting nervous about old age and death. As a result, there is a new and emerging field of medicine called “Anti-Aging.” MD reductionists are falling all over each other in their mad rush to discover, synthesize and patent the Fountain of Youth pill. They will never find it, because theirs is a futile approach and has been doomed from the very beginning. When you bring a *reductionistic* approach to bear on a sophisticated biological *system*, you will always fail to produce anything worthwhile. This is the same reason that MDs have lost the war on cancer. They are trying to fix a wholistic phenomenon (cancer) with a reductionistic approach. Because MDs think that the reductionistic approach is the **ONLY VALID APPROACH**, and because they are completely invested in their reductionistic view financially,

emotionally and intellectually, they will not even consider the possibility that the world of human physiology is round and not flat. So they persist in grinding out futile research that fails over and over and over again. Because they are too pig headed to change, and because they control everything, we all suffer.

Never fear, because the Naturopaths are here, and we know how to fix everything (almost). Want to live into your 2nd century? Want to do it with optimal health? Then take all of the advice in this book to heart, and you will remarkably increase your chances of living to your maximum life span, 120 years – with health.

Research done at UCLA shows that low calorie diets are essential for securing a long life. Animals fed as much as they wanted to eat lived significantly shorter and less healthy lives than their counterparts who were given restricted calorie diets. The jury is in. The less you eat, the longer you live. Go figure. My colleague Dr. Joel Wallach wrote an entire book concerning the longevity issue. It is called Immortality. I highly recommend it. (All of Dr Wallach’s books can be found at my website.)

Restricting calories is one of the easiest things to incorporate into your lifestyle,

because it requires *eliminating* things, not adding them.

Now – you are probably thinking: “How can I possibly eat less?” It is easier than you think. One of the reasons that we eat so much is because our bodies are deficient in multiple nutrients. A nutrient deficient body *knows that it needs more nutrients*, so it increases its appetite in the desperate attempt to fill up the nutrient tank. But remember -the food that we eat is *deficient* in nutrients. So the more we eat, the more we need to eat because we are just eating empty calories! The fix to this endless cycle of ridiculousness is to fulfill your body’s nutrient needs. This is only possible with high quality supplements (see appendices). If you are supplementing with high quality essential nutrients appropriate for your body weight, then your appetite will automatically be reduced – because for the first time in your life, your body is nutrient-satisfied. When you are nutrient-satisfied you crave less food. Supplementation is the key to a reduced calorie diet, and the optimal number of calories is 1100 – 1500 a day.

If eating a restricted calorie diet is not realistic for you, there is another way to skin the longevity cat – fasting.

Once a week, fast for 24 hours. Once

every three months, fast for 3 days. Once a year, fast for 7 days. When I say fast, I mean DO NOT EAT anything. This means *anything*. On the days that you fast, you *must* supplement with the 91 essential nutrients appropriate for your body weight, and you *must* drink a minimum of 2 quarts of water a day. It is also prudent to take a gentle laxative each night that you are fasting before bed. My favorite is “Colon Plus” by Youngevity. Fasting is a very interesting thing to do. It is more challenging psychologically than it is physically. It will test and strengthen your willpower and make you more compassionate towards those in the world who are fasting involuntarily because of poverty or politics.

Beware of fasting too much or too early. Like my father used to say: “Don’t scrub the pot so hard that you break it.” When you fast, your body’s detoxification mechanisms kick into high gear. These mechanisms demand nutrients. Since you are not eating, you are nutrient poor, so you can actually hurt yourself by going on some type of detoxification diet (or fasting) without taking the proper supplements. This is why you *must* supplement with the 91 Essential Nutrients during and *at least 4 weeks before* you begin your fast.

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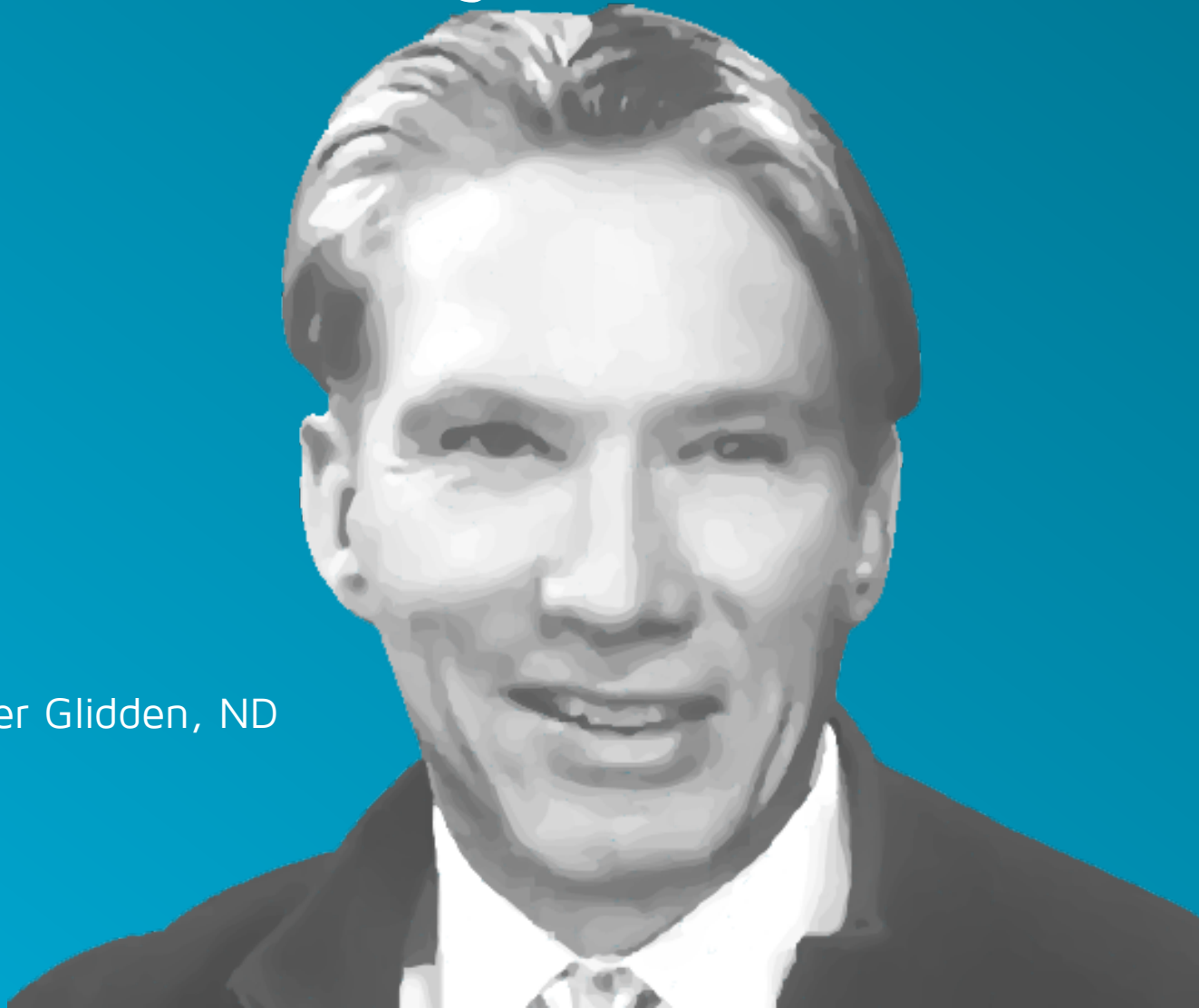
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CHAPTER 23

Water, Water, Everywhere...

Dr. Peter Glidden, ND



Nobody knows how much water is necessary for optimal health, but everybody thinks that they do. The fellow that wrote the book, Your Body's Many Cries For Water, died from pneumonia when he was 73 years old. The average age of death in the US is 75.5. I guess water wasn't all it was made out to be. He chose poorly. He did not take his supplements. He did not alter his diet, and he died at 73. I am not going to spend too much time on this topic of water, because nobody has figured it out. My recommendation is as follows: 0-50 lbs, drink 2 cups of water a day. 50-100 lbs, drink 1 quart of water a day. 100-200 lbs, drink 2 quarts of water a day. 200-250 lbs, drink 2.5 quarts of water a day. If you weigh more than 250 pounds, lose weight.

Use filtered water stored in glass, ceramic or metal containers. An interesting thing to do

with water is to put it in a big glass container and set it out in the sunlight all day long. Drinking sun-infused water has potential health benefits that regular water does not. It is also a good idea to fill the glass that you are going to drink from with your water, then get an empty glass and pour the water back and forth from glass to glass before drinking it. The yogis of India say that this technique infuses the water with more life force. Give it a try and see what you think.

There is one water myth that does need busting. There are people that are espousing the use of *alkalinized* water. The idea here is that if the water is alkaline, it will make your blood alkaline. Alkaline blood has anti-cancer properties. This all sounds good. Cancer cells do in fact have a very difficult time growing in an alkaline environment. The only problem here is that it is virtually impossible to alter the blood PH (which is the measurement of its acidity or alkalinity). The body has 6 buffering systems that it uses to maintain tight control on the PH of the blood. If the blood gets just a little bit too acidic or a little bit too alkaline, you pass out. It would be easier to start a fire with water than it would be to alter the PH of your blood with alkaline water. There is however a negative impact of drinking alkaline water. The

same thing happens when you drink *any* beverage that is carbonated (soda pop, even soda water or Perrier!). Alkaline water or carbonated water will *neutralize* your stomach acid. This is not good. The acid in the stomach *needs* to be acidic – another “no-brainer.” One of the worst things you can do when you eat a meal is to wash it down with soda pop, carbonated water, or alkaline water. If you do this, your stomach acid becomes neutralized and you don’t digest your food appropriately. This, of course, will increase your nutrient deficiencies, and pave the way for the development of a chronic illness.

It seems that I am not done myth busting, because now I am about to explain to you why whole wheat bread and oatmeal are bad for you. Can you believe it? The naturopathic doctor is telling you NOT to eat whole wheat! What next? Well...just wait and see.

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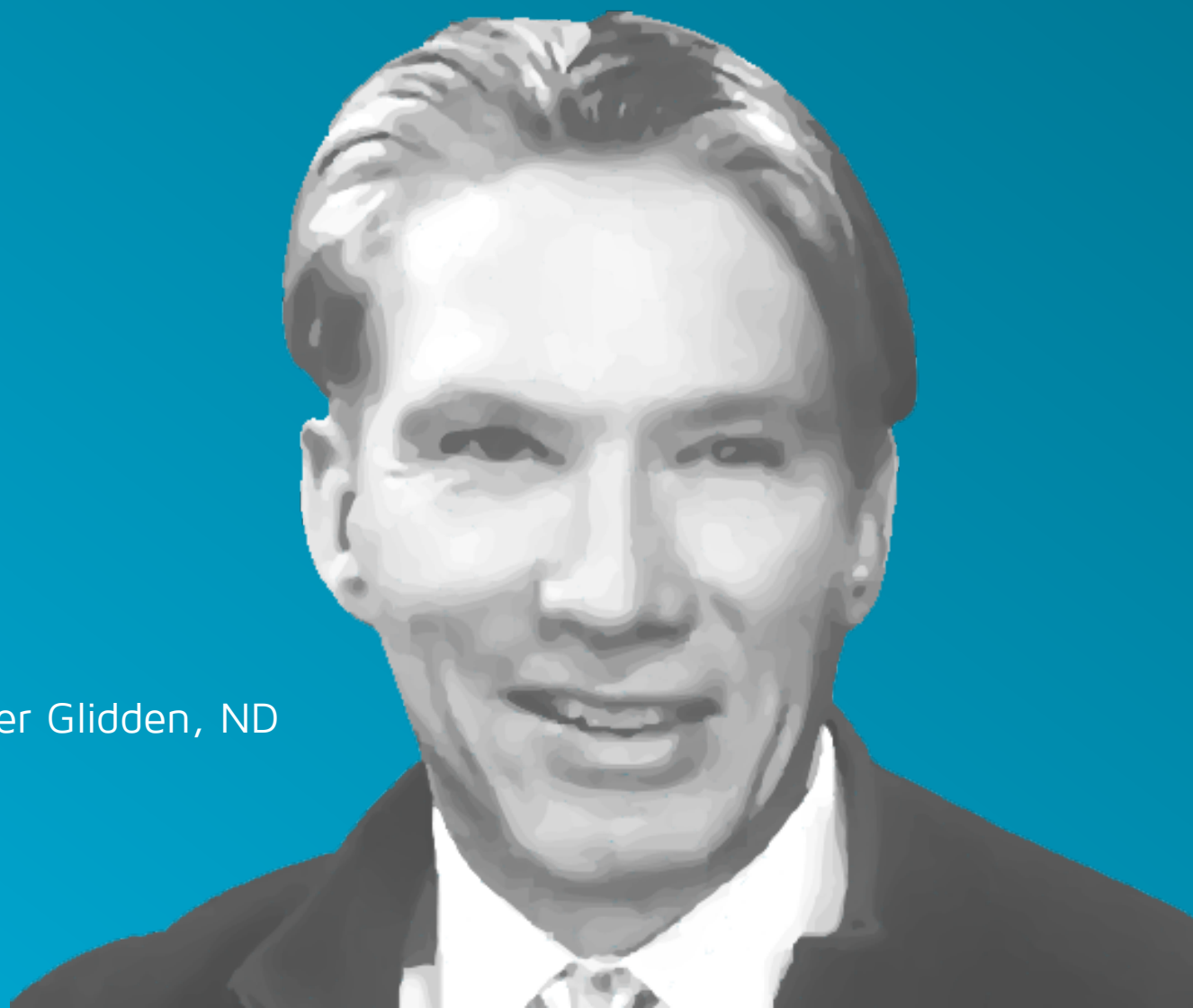
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CHAPTER 24

Against the Grain

Dr. Peter Glidden, ND



For over 2000 years, we and our ancestors have been in love with wheat. It all started with the Egyptians, Pharaoh, Jacob, and famine. The Egyptians discovered that if they grew LOTS of wheat during times of plenty and stored it, when famines rolled into the country they would not starve to death. Not bad. Wheat was easy to grow, easy to store, easy to transport, and could be made into lots and lots of different food items. Furthermore, every time you grew wheat, you got lots more wheat seed for the next crop. Such a deal! The economic and social value of this miracle food soon spread worldwide, and bread made from wheat became so prevalent that it was referred to as the “staff of life.” Like rice, wheat could be grown inexpensively, and the poor of every culture since the ancient Egyptians have come to depend on it to stay alive. This worked pretty well when the aver-

age person only lived to be 25 years old. But in today’s world of longer life spans (78 being the average in the US), the cumulative negative stress caused by the consistent consumption of wheat will have a NET NEGATIVE effect on our health.

I understand that this notion that wheat is actually a *bad* food for human consumption certainly is a revolutionary idea, but as our revolutionary friend John Adams said: “Facts are stubborn things.” So let’s look at the facts.

The protein of wheat is called “gluten.” Any protein, whether it comes from fish, or meat, or nuts, or grains, or soy, or from the green cheese of the moon is made from molecules called “amino acids.” A protein is simply lots and lots of amino acids that are daisy-chained together into rather large and complex structures. As you may remember from a previous chapter, amino acids are Essential Nutrients. The main reason we need to eat protein is to get the amino acids that they are made from into our bodies. The stomach is where this job gets done, and the stomach acid is the key player here. If the stomach acid is strong enough, it breaks the chemical bonds that hold the protein together, releasing the individual amino acids.

The strength of any acid is measured by

something called “PH.” PH is measured along a scale that goes from 0 to 14. The lower the PH number, the stronger the acid. A PH of 7 is considered “neutral.” The optimal PH of stomach acid is 1.5. In order for the acid in the human stomach to get to a PH of 1.5, it needs 2 major ingredients: Salt and Calcium. That’s right – I said, “salt.” Good old fashioned *table salt* is one of the major and necessary ingredients that the human body needs to make its stomach acid strong. If you are on a salt restricted diet, your stomach acid will be weak. Bummer! If your stomach acid is weak, it can’t pull calcium out of your food, and your stomach acid becomes even weaker. Double bummer! Once your stomach acid becomes really weak, a funny thing happens – you get heartburn. Bet you didn’t see that coming!

That’s right; heartburn is caused by NOT ENOUGH stomach acid – not *too much*, as your MD has told you. The insistence by MDs that heartburn (AKA: esophageal reflux; GERD; or Barrett’s esophagus) is caused by too much stomach acid is as juvenile as thinking that cutting someone’s wrists and letting the blood out of their body is a way to cure illness. Wait a minute! This is exactly what MDs used to believe! Blood-letting was a common medical

practice in the 18th century. It is what killed our first president, George Washington. But I digress...

So – if our stomach acid is too weak it will have trouble digesting the proteins of wheat, barley, rye and oats. Even if the stomach acid *is* strong, there will be trouble digesting these proteins. If the stomach acid is weak, as it is with most people, it will be virtually impossible for the stomach to digest these proteins. What happens next is one of the overlooked causes of most chronic disease. This is a HUGE medical problem, and nobody but I and a handful of my colleagues are talking about it.

The digestive tract in a human is called the alimentary canal. It is basically one long tube that starts in the mouth and ends in the butt. The part of the alimentary tract that is immediately downstream from the stomach is the small intestine. The function of the small intestine is to absorb the food that we have eaten and deliver it into the blood stream. Approximately 20 feet long and 1.5 inches in diameter (in an adult male), the small intestine is lined with millions of structures called “villi.” They number anywhere from 6,000-25,000 per square inch! The villi look like octopus tentacles, and at their tips they are covered with

hundreds of “Micro-villi.” The micro-villi grab onto passing food molecules and transport them into the blood stream. Kind of like an octopus tentacle reaching out and grabbing onto a passing fish. This is how we absorb nutrients into the body. This is also why our belly gets warm after we eat a meal – the friction caused by the action of the villi creates heat.

Individual amino acids are handled by the villi with no problem at all, and are transported into the bloodstream easily. But *long chains* of *undigested* amino acids (proteins) are a **BIG** problem. Imagine a vacuum cleaner trying to suck up 18 strings of pearls that have been twined together and you will get the picture. The villi become damaged from the mechanical action of trying to suck up molecules that are much bigger than they are used to handling. An undigested protein in the intestinal tract is like a “one-two punch” because, in addition to mechanical damage, it also causes electrical damage, but we have to look at thunderclouds to understand how.

Little puffy white clouds in the sky do not create lightning. **BIG** thunderclouds do. In the creation of the electrical discharge commonly known as lightning, it is the *size* of the cloud that matters. Thunderclouds are thousands

of times larger than their non-electrical counterparts. The same thing applies with an undigested protein – as above, so below... An intact, undigested protein is thousands of times bigger than a single amino acid. The relatively large size of the protein gives it an electrical charge. So, as a large undigested protein tumbles through the intestinal tract, it acts like a live wire – zapping every villi and micro-villi that it touches.

If you remember, the function of the villi is to absorb nutrients into the body. So when we destroy villi by the simple act of eating wheat, we impede nutrient absorption. Then we eat some more wheat. Then we eat some more wheat. Then we have some wheat with dessert. Then we eat some more wheat. Then we get sick and die. It is really that simple. All chronic disease is caused by multiple nutrient deficiencies. Our food **DOES NOT CONTAIN** all of the 91 essential nutrients that our bodies need in the first place. Now, to add insult to injury, when we eat 100% organic whole wheat bread, like our knuckleheaded nutritionist told us to, our intestinal tracts become damaged, and it becomes harder and harder for us to absorb the limited nutrients that are in the food! If

this happens *every day*, eventually we will end up with multiple nutrient deficiencies – even though we are eating 3 square meals a day! It is only a matter of time until these deficiencies get so big that something breaks. This is how an illness is born. Then we go to our MD, who gives us a symptom suppressive synthetic drug to manage the problem. We feel a little better but we still have multiple nutrient deficiencies, so a little while later, something else breaks. Back we go to the MD for another prescription drug, or unnecessary surgery. This cycle happens again and again and again...and then we die. Then our MD chalks it all up to a bad gene, and takes a snort of the prescription grade cocaine he has become addicted to. Oh! The humanity!

Inquiring minds want to know – Why is *the gluten* protein so hard for the stomach to digest? Other proteins like eggs, meat, chicken, fish and rice are very *easy* for the stomach to digest. Even a dead person can digest rice! So what is the deal with wheat? I don't know! Nobody knows! That's just the way that it is... It is one of history's greatest ironies that the "staff of life" is one of the worst foods that humans can eat on a regular basis. There are many theories as to how this has come about. It is a fact that the wheat

of today, having been genetically manipulated by agri-business for the last 100 years, is quite a bit different from the wheat of our ancestors. It is also possible that it is the lack of minerals and nutrients in the diet that contributes to this problem, as these deficiencies have become so epidemic that EVERYONE's stomach acid is weak as a result. It is also possible that wheat has always been a problem, but the population just never lived long enough for the trouble to come to fruition. Whatever the reason, the sad fact remains that the gluten protein contained in wheat, barley, rye and the protein found in oats, are very dangerous foods to import into the human body, and we would all be better off to avoid them completely. Here is a partial list of the foods that contain gluten and oat protein (this is probably the last time that you will like me...):

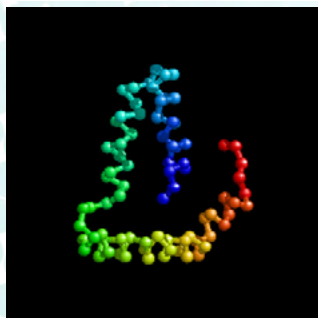
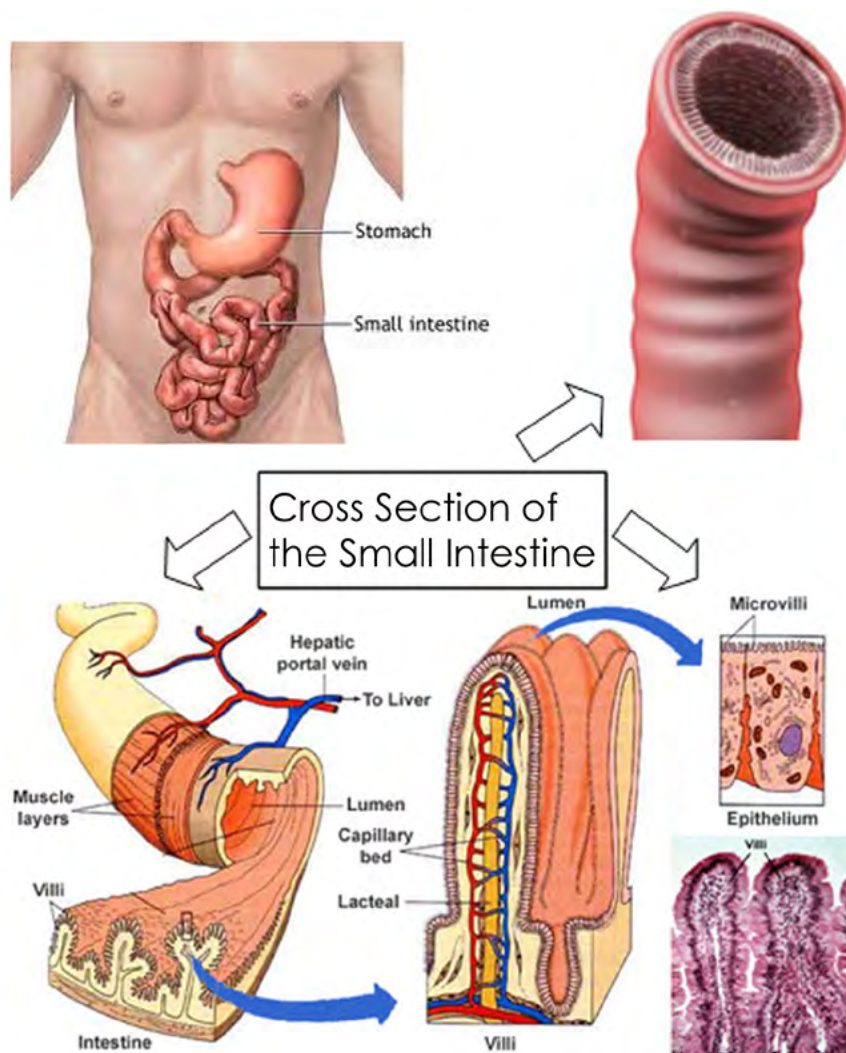
- ☐ Bread
- ☐ Pasta
- ☐ Cookies
- ☐ Crackers
- ☐ Pie Crust
- ☐ Bagels
- ☐ Oatmeal

□ Granola

□ Beer!? Beer!

This is more or less EVERYTHING that we eat, most of the time! Then we wash it all down with a Coke. This is why we are all sick, all of the time. Sherlock Holmes was right: "...when you have eliminated the *impossible*, whatever remains, however *improbable*, must be the truth." Chronic illness is not caused by a bad gene, or a Gypsy curse, nor is it a function of aging. Chronic disease is caused by chronic nutrient deficiencies. Period! Nutrient deficiencies are accelerated by the destruction of the intestinal villi. Undigested proteins destroy intestinal villi. Therefore the consistent consumption of wheat, barley, rye and oats leads to the generation of chronic disease.

Alimentary my dear Watson, alimentary...



A Simple Protein
The balls are Amino Acids. The bars are the chemical bonds that hold the Amino Acids together. The acid in the stomach attempts to break these bonds, releasing the individual Amino Acids.

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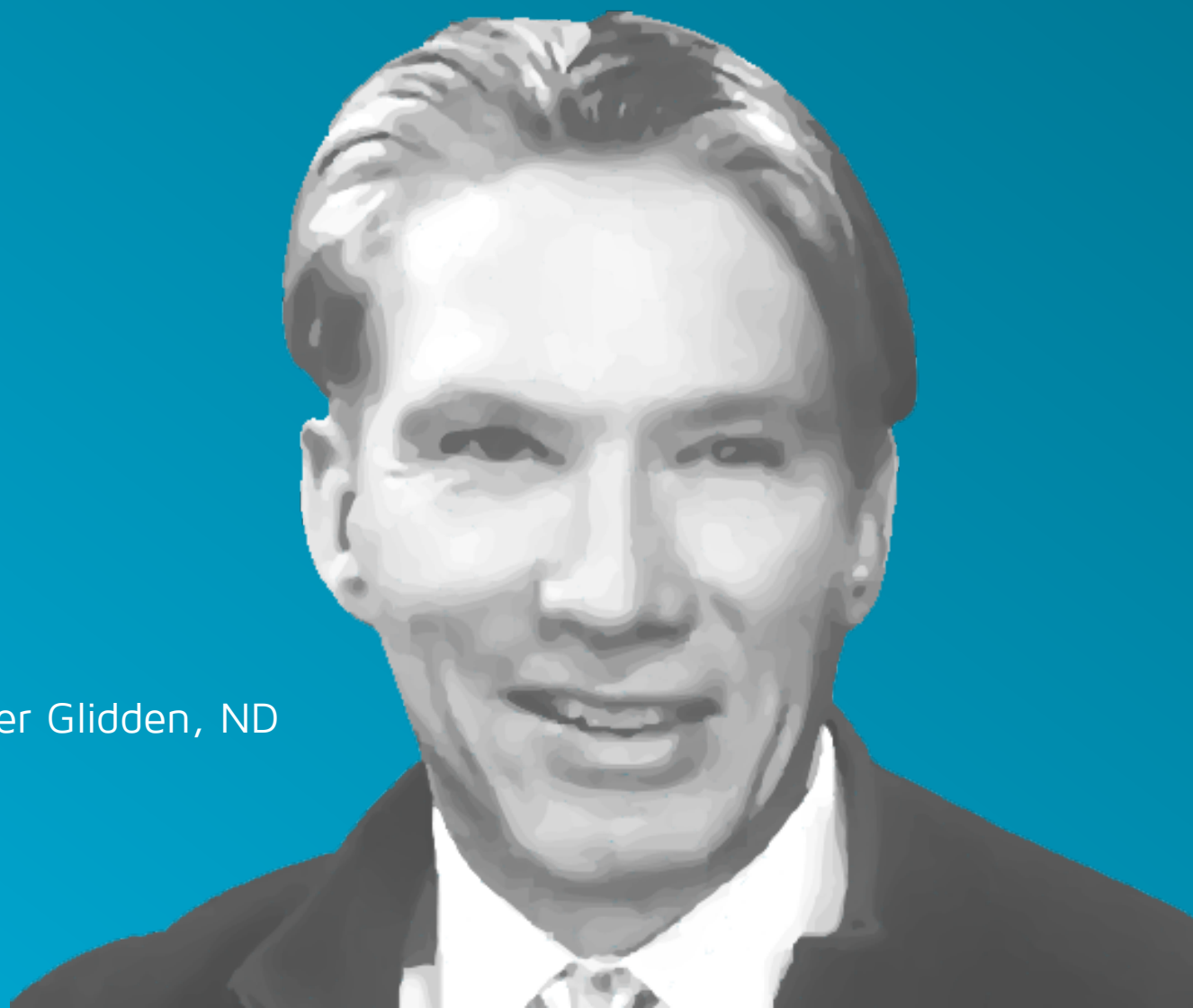
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THE MD EMPEROR HAS NO CLOTHES

CHAPTER 25

The Mighty 90

Dr. Peter Glidden, ND



In fine New England fashion (I was born and raised on Nantucket Island), I have saved the best for last. Special thanks to Dr. Joel Wallach for discovering and formulating this information. If you remember only one thing I have to say, remember this chapter. It is without a doubt the most important one in this book.

Hundreds of millions of dollars of research and decades of clinical experience have uncovered the following:

- The human body requires 91 Essential Nutrients to be healthy.
- Shortages or deficiencies in one or more of these nutrients will cause over 900

diseases.

- Replenishment of the deficient nutrients will eliminate the disease(s) caused by the deficiencies.
- It is impossible to get all 91 Essential Nutrients from our food.
- The human body will *fix itself* if it has the raw materials to do so, and if it is not being negatively stressed by the consistent consumption of “bad” foods.

To help your friends and family to recover from a chronic disease all you have to do is memorize the above 5 facts. Then you have to know where you can get the 91 nutrients. Lastly, you have to learn how best to deliver them to a sick body. Then all you have to do is to step out of the way and let the healing power of the body take over.

The 91 Essential Nutrients* are broken down as follows:

- 60 Minerals
- 16 Vitamins
- 12 Amino Acids

*The essential nutrients number 91. There is debate in scientific circles as to whether there are 2 or 3 essential fatty acids. Years ago, it was accepted that there were 2. This resulted in a tally of 90 essential nutrients. Dr. Wallach started calling these nutrients “The Mighty 90,” and the name stuck. So now, even though we recognize 3 essential fatty acids, giving us a total of 91 essential nutrients, we still call them by the old name “The Mighty 90.” Old habits are hard to break. It also rolls off of the tongue easier than “The Mighty 91.”

□ 3 Essential Fatty Acids (EFAs)

A nutrient is called *Essential*, if the human body cannot make it on its own. Cholesterol is a very important nutrient, but it is not considered *essential* because the body can make it if it needs to. (Cholesterol is made in the Liver, but only about 25% of the body's cholesterol needs can be met this way. The rest must come from the diet.)

Essential nutrients must be imported into the body on a daily basis. This is one of the reasons that we need to eat food. We can get some of the 91 essential nutrients that we need from our food, but it is impossible to get all of them from food. This is because the 60 essential minerals that we need to get into our bodies every day are only found in the soil and the water. Animals can't make minerals, and plants can't make minerals.

If the minerals are not in the soil, they are not in the plants grown in the soil. If they are not in the plants, then they are also not in the animals that eat the plants.

They are not in the soil.

According to US Senate Document #264

written by Rex Beach at the 74th Congress, 2nd Session, *in 1936*, "The soil is so nutritionally deficient of minerals that it will NOT supply the necessary nutrition for good health." This was in 1936! Not good. Trust me – it hasn't changed. But even 300 years ago, when the soils were relatively richer, there was no soil anywhere in the world that contained *all 60 minerals*. This is because minerals are laid down in the soil in veins or patches. The first row of corn might have 13 minerals in the soil. The second row could have 22. The third row could have 7 – and so forth. The corn only needs 6 minerals to grow. We need 60. Do the math! Hoping to get all of our essential minerals just by eating from the 4 food groups is a fool's game. You will lose that bet every time.

While we are on the subject, here is an interesting factoid concerning minerals. In the soil, a mineral (like calcium, iron, magnesium, or selenium) exists in its *metallic* molecular form. Metallic mineral molecules are not that easy for the human body to absorb and use. However, when a *plant* sucks a metallic mineral out of the soil, as it metabolizes it, it transforms the metallic mineral into something called a *colloidal* mineral. Colloidal minerals are over 95% absorbable and useable by the human body.

Thank you Mother Nature! This is one of the main reasons that we need to eat plants – it is not for the fiber, but for the *colloidal minerals* that they contain.

Vitamins can be obtained from lots of different sources. One of the best places to get vitamins is from organ meat (liver, kidneys, heart, etc). Yuk! The deficiency potential persists here as well, because it is impossible to know how many vitamins are in the food that you are eating. It is easy to get short-changed here and not know it.

- Case-in-point #1: Sundowner's syndrome. Sundowner's syndrome is a disease of the elderly that closely resembles Alzheimer's disease. People afflicted with Sundowner's can't remember who or where they are, and have all kinds of cognitive difficulties. Sundowner's syndrome is a simple vitamin B1 deficiency. If you know anybody who has a definitive diagnosis of Sundowner's or a presumptive diagnosis of Alzheimer's, then get them to take vitamin B1 in large doses. If it is Sundowner's syndrome, they will return to their senses in about 2 weeks. If vitamin B1 was readily available

in our food then nobody would get Sundowner's syndrome.

- Case in point #2: Rickets. Rickets is a bone disease caused by a Vitamin D deficiency. If vitamin D was readily available in the food, nobody would ever get Rickets.
- Case in point #3: Pernicious Anemia. Pernicious Anemia is caused by a vitamin B-12 deficiency. If there were sufficient amounts of vitamin B-12 in the food, then nobody would get pernicious anemia.

Get it? Again – if you think that you can fulfill all of your body's nutrient needs just by eating from the 4 food groups, you are incorrect, and it is only a question of time until something in your body breaks.

Amino acids – as discussed in a previous chapter, come from proteins. Our stomach breaks the protein down into its constituent amino acids and we use the amino acids for maintenance and repair of body tissue, and for immune support. Most people do not know this, but our Immune System is made mostly of protein. This is one of the reasons that Chicken soup is good to eat when we are fighting off the

flu or a head cold. The protein of the chicken in the soup is easy for the body to digest and to use. It uses the amino acids it gets from the protein to strengthen its immune system, so we recover quicker from the illness. 60% of the diet should be protein. Chicken eggs are one of the easiest, least expensive, and “best for you” protein sources available. They are, in fact, the protein that all other proteins are compared to in the protein rating system used by dieticians.

EFA's are found in fish oils and plant oils. EFA's are all the rage today, and I am sure that by now you have read or heard something about Omega 3, Omega 6 and Omega 9 fatty acids. These are the scientific names of the 3 EFA's that we need to maintain our health. We can get these oils from many different sources – fish, krill, flax seeds, hemp seeds, borage roots, and evening primrose roots. But wait a minute! Didn't I just spend an entire chapter talking about how bad oils in a bottle were? Why yes, I did – and I was correct. Any oil – even EFA oil – if packed in a bottle, will oxidize with time. Not good. The solution for this problem is easy. Instead of putting the EFA oil in a *bottle*, put it in gelatin *capsules*. If a supplement company was really smart, it would “go the extra yard” and squirt the EFA oil into the gel caps in the

presence of nitrogen. That way, if any gas got into the gel caps while it was being filled with the EFA oil, it would be *nitrogen* and not *oxygen*. That way, the possibility of *oxidative* damage to the oil is completely eliminated. Pretty smart! There are only a handful of companies that make nitrogenated EFA gel caps.

I am going to bet you that your grandmother's chicken soup tasted better than *any* chicken soup in a can at your local grocery store. The recipe, the quality of the ingredients, the way it was cooked and stored all make a difference in the tastiness of the finished product. It is no different with vitamins. As alluded to in Chapter 13, the recipe of a simple calcium supplement can make a HUGE difference as to how much of it you would need to take to get the job done. Calcium is just 1 of the 91 essential nutrients! There are 90 others! What's a person to do? Don't worry, you don't have to go back to school and become a chemist to figure out which nutritional supplements are good and which ones are bad. You just have to consult with someone who is in the know. That would be me.

I have been using vitamin and mineral supplements in my clinical work for 22 years now. I am extremely well informed about this

subject. Vitamin companies don't like me so much because I have extremely high requirements that not too many of them can meet. Having said all of this, the supplement company that I endorse is Youngevity Essential Life Sciences. They manufacture a brand of nutritional products, the recipes of which are unrivaled in the nutritional supplement industry. In my opinion, you are wasting your money if you purchase nutritional supplements anywhere else. It is as simple as that. For more information about Youngevity go to this page of my website: <http://jointeamglidden.com/>



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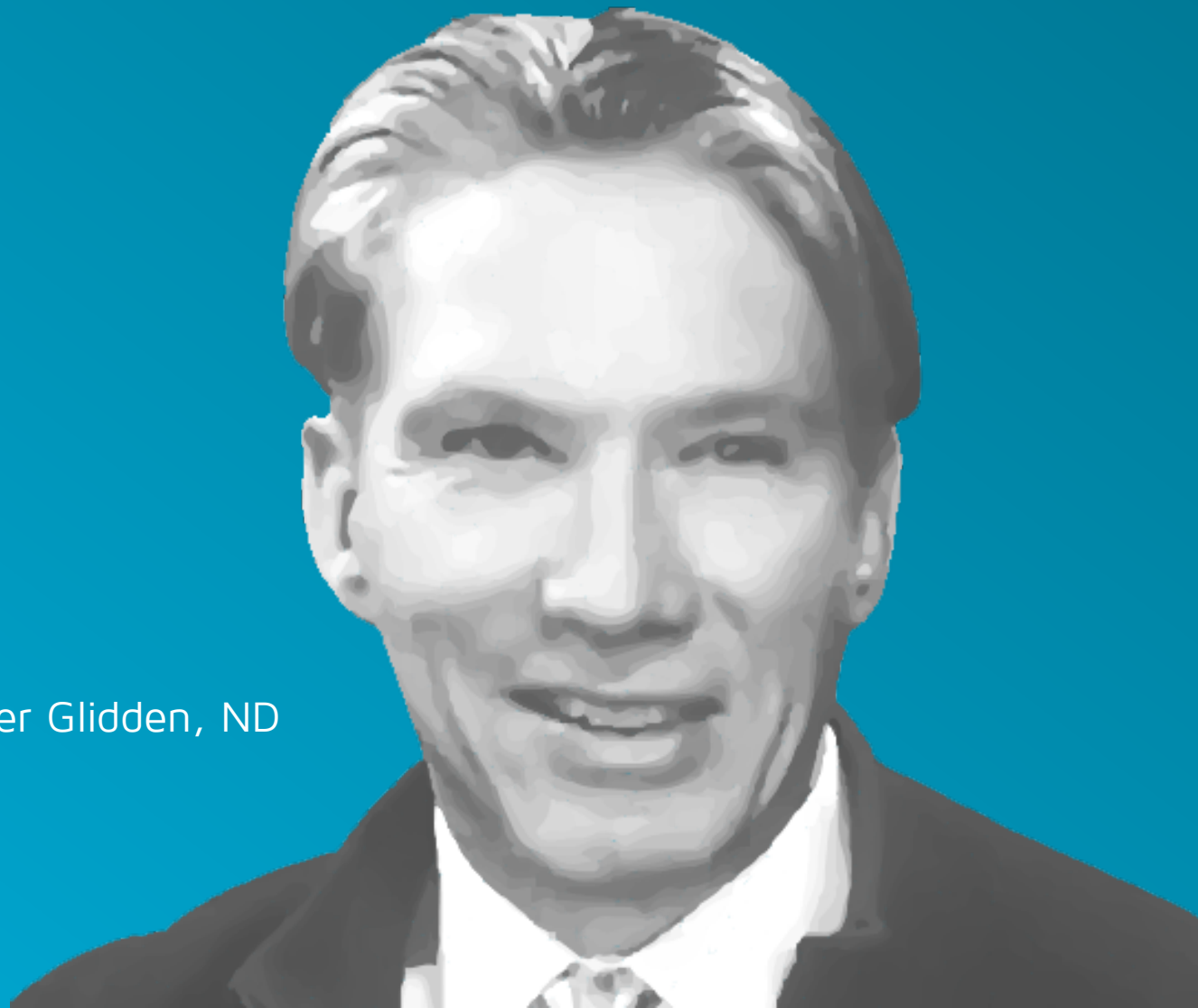
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CHAPTER 26

Everybody's Sick!

Dr. Peter Glidden, ND



One of the themes running through this little diatribe of mine has been: The Generation of Disease and the Recovery from Disease are *simple* processes. We have been tricked by MDs into believing that there is something mysterious, complicated or intellectually sophisticated about healing. There is not. I was raised in the Catholic faith, and I remember when I was a young boy that Catholic Mass was preached in Latin. This was a hold-over from centuries gone by when the Catholic Church was all about exercising control and affirming superiority over *everything*. In those days, the sacrament of Mass was purposely done in Latin because only educated people could speak it. Common people could not. So the common person was duped into believing that the priests were better, smarter and more worthy (of God's grace) than them. This is called "cultural con-

ditioning", and the Catholics weren't the only ones doing it.

Have you ever wondered why medical diseases have been given Latin names? It is not an accident. It was done *on purpose* to make the average Joe on the street feel intellectually inferior – and it worked! A sore throat is a sore throat is a sore throat. But when an MD calls it "Pharyngitis," everyone genuflects in deference to their "superior" intellect. We have been so completely conditioned by 100 years of this nonsense that just about anybody now can put on a white coat, loop a stethoscope around their neck, and *easily* convince us that it is a good idea to take a chemotherapy drug that costs \$15,000 – even though it will not work, and it will create so many side effects (including cancer) that it will completely ruin the quality of our last months on the planet! It is really quite extraordinary what someone will do just because an MD tells them to do it.

Let's end this book the same way that we started it – by talking about *perspective*. 100 years of MD directed medicine has delivered the following specific and measurable results: Our average lifespan has flat lined at 75.5 years, even though we have the biological capacity to make it to 120. We routinely need to have our joints

replaced, our teeth replaced, and our organs removed and/or replaced. Our breathing, sleep, heartbeat, mobility and kidney functions are assisted by machines. Our moods are enhanced by prescription meds. Our pain is kept at bay by prescription meds. Our memory has a 30% chance of leaving us in the last decade of our lives. We can't "get it up" without prescription meds, we can't get to sleep without prescription meds, we can't stop crying without prescription meds, and we can't breathe without prescription meds. It is impossible for even the wealthiest among us to maintain a normal body weight, or to escape the clutches of some chronic disease. Our children become more and more autistic and uncontrollable and fat with each passing decade. Cancer hounds us relentlessly, and even though 3 decades of MD directed cancer treatment and research has completely failed us, we foolishly believe the PR spun by Big Pharma that the cure for cancer is "Right around the corner." We routinely and unwittingly eat foods that hurt our bodies and we avoid the foods that our body needs because we have trusted some guy in a white coat (who has had no training and has no clinical experience with nutrition) to tell us what to eat. The older we get, the sicker we get, the worse the quality of our lives becomes, and then we die in a drug induced fog because

we are in so much pain that we just can't handle a morphine free moment. The "Golden Years" are looking more like rusty iron than gold.

Just about everybody in this country is sick. Sickness is so pandemic that we have all collectively adopted the false notion that poor health is a normal part of life. The only medicine that our insurance pays for is *incapable* of helping us to recover our health, and the only people who can actually help us (the NDs) are too few in number to get the job done. There are less than 3000 naturopathic physicians in the entire country. There are over 300 Million U.S. citizens. If the naturopaths treated 1 person per minute, 40 hours a week, 52 weeks a year, there would still be people left over who needed help. There are just not enough hours in the day to realistically help everyone.

This Is Why We Need Your Help...

A few of my colleagues and I are playing a BIG GAME. We are changing the way that health care is dispensed in the U.S. by building a gigantic grass-roots social network of enlightened people who are showing their friends and family members how to recover from chronic disease with Medical Nutrition. The surprising truth of the matter is that the elimination of (most) chronic disease is *easy*.

Anyone can learn how to do it. This is without a doubt the hardest thing for me to get across to my audiences. Medicine is easy. I am not talking here about surgery, emergency room trauma treatment, or sophisticated biochemical research. Those things are tricky and should only be handled by professionals. What I *am* talking about is the treatment of chronic disease. Believe it or not, with just a little bit of training, *anyone* can help their friends and family to recover from things like high blood pressure, asthma, arthritis, kidney disease, type 2 diabetes, insomnia, congestive heart failure, osteoporosis, kidney failure, fibromyalgia, irregular heartbeat, ADD, ADHD, dementia, and heartburn. It just takes a little practice and training – kind of like learning how to ride a bike.

Just say NO to MD treatment! That's a good motto.

Just say YES to Medical Nutrition!

That's a better one.

The front door of medicine in this country is completely closed, locked, and guarded by Big Pharma. The amount of money and power that pharmaceutical companies possess is too big to imagine, let alone to compete with. The only way that we will be able to realistically generate a real change in how medicine is delivered in this country is by going through the *back* door –

in massive numbers. This is where you come in.

The **ONLY** way that our message of

“Health Through Nutrition”

will reach *everyone* who is in trouble is if *you* help us. Grass-roots movements have historically produced profound results. The Catholic Church started with 2 people - and just look at it now! The abolition of slavery, the ending of child-labor, the securing of a 40 hour work-week, the right of women to vote, the elimination of prohibition, and every single civil right that we currently enjoy were all results of grass-roots movements. The *truth* is compelling, no matter what the subject matter. The *truth* has a certain ring to it. If the truths outlined in this book have struck a chord in you, then it is my hope that you will join us and spread the word to everyone that you can, as often as you can, and as quickly as you can.

Because this is such a serious endeavor, my colleagues and I have developed a way in which you can be *paid* to help us. You will find the details here: <http://drglidden.com/become-a-member/>

Or – you can continue to believe that you are suffering with a chronic health

condition because you were cursed at birth by some mysterious “bad” gene. You can continue to take your synthetic prescription meds, and your super-duper German vitamins. You can continue to eat all of the wrong foods all of the time, and watch your health deteriorate in front of your eyes while the medical system that you pay heartily every month to gain access to, sucks as much money from you as they can, as often as they can, and as quickly as they can.

The choice is up to you. One candle can dispel the darkness of 100 years in a single instant. Imagine what 300 Million could do...

As Sherlock Holmes said: “Hurry Watson! The game is afoot.”

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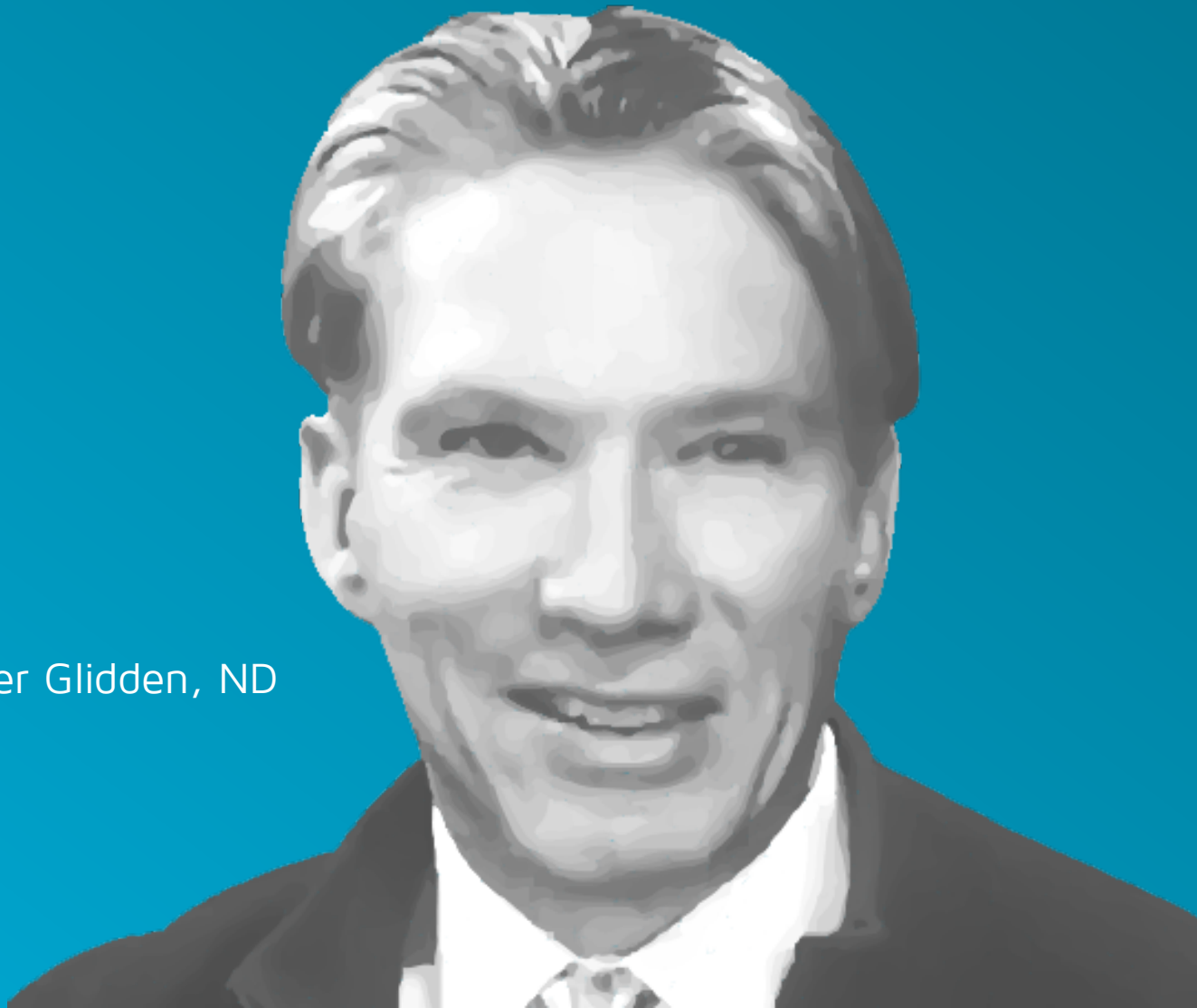
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Dr. Peter Glidden, ND



Appendix I:

Health Condition Categories

- Calcium Deficiencies: 91 EN; Good Food/Bad Food Diet; GlucoGel @ 1 cap per 10 lbs body weight per day. (eg: 180 lbs = $180/10 = 18$. So take 6 caps 3x daily); 1 extra bottle of Osteo Fx+ per month dosed @ 1 oz in 4 oz water before bed.
- Blood Sugar Problems: 91 EN; Good Food/Bad Food Diabetes Diet; Sweet-eze @ 1 cap per 100 lbs *before* a meal. (eg: 180 lbs = round up to 200, then divide by 100 = 2 before each meal).
- EFA Deficiencies: 91 EN; Good Food/Bad Food Diet; EFA+ @ 1 per 20 lbs in 3 divided doses, OR: EFA @ 1 per 20 lbs in 3 divided doses. (eg: 250 lbs = $250/20 = 12.5$, Round up to 13. So take 4 with breakfast, 4 with lunch, 5 with dinner).

- Digestive Problems: 91 EN; Good Food/Bad Food Diet; Ultimate Flora Fx @ 2 per 100 lbs before bed; OxyBody Cherry Berry @ 1 oz per 100 lbs 2x daily. OR Oxy Rich Aloe Vera Tody @ 1 oz per 100 lbs 2x daily.
- Cognitive Problems: 91 EN; Good Food/Bad Food Diet; D-Stress @ 2 caps per 100 lbs in divided doses; EFA @ 1 per 20 lbs in 3 divided doses. (eg: 250 lbs = $250/20 = 12.5$, Round up to 13. So take 4 with breakfast, 4 with lunch, 5 with dinner). Memory Fx @ 1 caps per 20 lbs in divided doses.

Everything Else: Call Dr. Glidden on his radio program. M-F: 3 pm – 5 pm CST (844) 374-5433; Consult Dr. Glidden's webinars – info about them is available: <http://drglidden.com/become-a-member/>

Appendix II:

91 Essential Nutrient (EN) Combinations & Dosages

Per 100 lbs, take 1 of the following per month.*

- ☐ Anti-Aging Healthy Start Pak
- ☐ Healthy Start Pak
- ☐ Classic 90 Pak
- ☐ Toddy 90 Pak
- ☐ Tropical 90 Pak
- ☐ Pig Pak
- ☐ Pig Pak +

Beyond Tangy Tangerine Powder: 1 scoop per 100lbs body weight 2x daily. Mix with at least 8 oz of liquid – preferably water, and drink slowly over 30-60 minutes each time.

Osteo Fx, Osteo Fx+: 1 oz per 100 lbs body weight daily. This is absorbed more efficiently if mixed with an acidic liquid, like orange juice. If only one ounce is needed, give it before bed in 4 oz of water. If 2 or more doses are necessary (200 – 300 lbs), give the final dose just before bed, mixed in 4 oz of water. This product is extremely concentrated, so

invert and shake well before each dose.

Ultimate Classic, Ultra Body Tody, Tropical

Plus: 1 oz per 100 lbs of body weight per day. OK to mix with other liquids for taste.

Do NOT mix with anything *carbonated* – even sparkling water.

Liquid Plant Minerals: 1 oz per day per 100 lbs of body weight. OK to mix with anything else (no carbonated beverages) for taste.

EFA+; Gluco Gel: Divide the amount on the bottle(s) by 30, and give that total per day, in one or two or three divided doses.

* If the budget does not allow the full dosage per body weight per month, then take as much as is possible. It is better to have some, than none.

Appendix III:

Good Food/Bad Food

All of the foods listed in the “Bad” section must be avoided as much as is possible, preferably 100%.

The foods in the “Good” section can be eaten or not, depending on your tastes. The only exceptions to this are Butter and Salt, which should be eaten by everyone. If you are allergic to any of the “Good” foods, then do not eat them. If you have a negative reaction from any of the “Good” foods then do not eat them.

CLINICAL NUTRITION DIET PROTOCOL

GOOD FOODS:

- ☐ Eggs—soft scrambled in butter, soft boiled, or poached.
- ☐ Salt
- ☐ Butter
- ☐ Dairy
- ☐ Fish
- ☐ Chicken
- ☐ Pork
- ☐ Lamb
- ☐ Beef—rare/medium rare only.

- ☐ Veggies
- ☐ Fruit
- ☐ Mixed, Salted Nuts—no peanuts
- ☐ Nut Butters—no extra sugar
- ☐ Rice
- ☐ Millet
- ☐ Pure Buckwheat (Isn't wheat).
- ☐ Beans
- ☐ Couscous (made from pearl millet only).
- ☐ Quinoa
- ☐ Corn – as long as it is non-GMO
- ☐ Coffee, Tea, Green tea, Red wine.
- ☐ 4-8, 8 oz glasses of filtered water each day. Avoid soft plastic bottles.

Lard!

BAD FOODS:

- ☐ Wheat
- ☐ Barley
- ☐ Rye
- ☐ Oats, oatmeal - even if it says that it is Gluten Free.
- ☐ Fried Food
- ☐ Oils—cooking or salad. Yes, this includes Olive Oil!!!
- ☐ Well done meat (rare or medium-rare is ok)
- ☐ Deli Meat, any nitrates added to meat – tell your butcher NO NITRATES

- ☐ Soda/Pop/Any carbonated beverage with a meal. OK between meals, but should be used rarely.
- ☐ Skin of a baked potato (or yam, or sweet potato). If you boil a potato, yam or sweet potato, you can eat the skin.

If there is a blood sugar problem, then also avoid the following foods until the blood sugar problem has been resolved for 2 months:

- ☐ Fruit
- ☐ Fruit juice
- ☐ Dried Fruit
- ☐ Fresh squeezed vegetable juice
- ☐ Honey
- ☐ Sugar
- ☐ Maple Syrup
- ☐ Molasses
- ☐ Any sweetener that has a glycemic index. Stevia, and Xylitol are OK.

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