

# BIG PHARMA



ANTONY SAMMEROFF

# 7

## **Big Pharma Myths Debunked**

**Antony Sammeroff**



*“Treason doth never prosper: what is the reason?  
Why, for if it prosper, none dare call it treason.”*  
- John Harlinton

*“You never change things by fighting the existing reality  
To change something, build a new model that makes  
The existing model obsolete.”*  
- R. Buckminster Fuller

*“Don’t believe anything, not one thing, put out by a  
Pharmaceutical company. Just don’t believe it.”*  
- Catherine DeAngelis, editor in chief  
Journal of the American Medical Association



## Legal Disclaimer

This little book is a combination of information found in reports from public health organizations like *The Centers for Disease Control (CDC)*, *Food and Drug Administration (FDA)*, *National Institutes of Health (NIH)*, *American Medical Association (AMA)*, and *World Health Organization (WHO)* as well as reputable medical journals like *The Lancet*, *British Medical Journal (BMJ)*, the *Journal of the American Medical Association (JAMA)*, in addition the literature on the economics of healthcare, as well as critiques of the healthcare system from medical researchers, journalists, medical doctors, naturopaths, alternative health practitioners, academics from multiple disciplines, economists, independent thinkers and my own experience and observations. Nothing in here should be construed as medical advice. You are advised to consult with your physician regarding any medical decision relating to your health. This information is for educational purposes only. Nothing, including communications with the author, should be taken as medical advice. Any information is provided as is, with all faults, with no representations or warranties of any kind expressed or implied, including but not limited to implied warranties of merchantability or fitness for a particular purpose. You assume total responsibility and risk for using this information and any sources related to it. No oral or written information shall take precedence over this warranty. In no event will the author, publisher or its employees, directors, or agents be liable to you or anyone else for any decision made or action taken in reliance upon the information provided herein. You are responsible for your own actions. Your health and healthcare is also your own responsibility.



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## 1. Pharmaceutical Medicine has Made Us Much Healthier.

I'm sure you've heard as much as I have about the wonders of modern medicine, and how we are all living longer, happier and healthier lives as a result of it. After all, our ancestors were plagued by diseases like polio, tuberculosis, whooping cough, rickets, and scurvy – not to mention various plagues, like the Spanish flu – but thanks to the modern miracle of pharmaceutical science we are free from them all now.

Apparently not, according to official sources. In fact, *The Centers for Disease Control and Prevention* told us in 1999 that, while “the average lifespan of persons in the United States have lengthened by greater than 30 years [since 1900]; 25 years of this gain are attributable to advances in public health,”<sup>1</sup> rather than medicine. In 2000, the prestigious journal *Pediatrics* released a very comprehensive study in which they explained that the 90% decline in all infectious disease mortality were down to improvements in sanitary conditions and nutrition rather than medical treatments.<sup>2</sup>

So, while it's true that no one would rightly trade the living conditions we enjoy today for those our predecessors had to put up with, that is largely due to the availability of better nutrition and hygiene, housing with ventilation, indoor heating, garbage collection, cleaner water and food, and sanitary sewage systems.

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<sup>1</sup> “Ten great public health achievements-United States, 1900-1999”  
CDC MMWR Weekly 48:241-243, 1999

<sup>2</sup> “Annual Summary of Vital Statistics: Trends in the Health of Americans During the 20th Century”

In the 19<sup>th</sup> century, people's housing – as well as the conditions they worked in improved dramatically. Most of the basic conveniences we take for granted today, like an indoor toilet that flushes and clean running water through the faucet, were not widely available in the first half of the 20<sup>th</sup> century. In fact, in the 1950s half of the people still didn't have a washing machine, refrigerator, or central heating yet. Before the internal combustion engine, city streets were lined with horse dung. People lived several to a room, sharing disease. The average living space per person in America doubled as recently as between 1973 and 2014. Cleaner drinking water was responsible for nearly half of the total mortality reduction in the 20<sup>th</sup> century, and nearly two-thirds of the child mortality reduction.<sup>3</sup>

All in all, medical care for disease increases the lifespan of Americans by around three and a half years, according to researchers at Harvard and King's College London, and preventative care (including blood pressure and cancer screening, counselling about smoking, routine immunization, and aspirin to prevent heart attacks) add perhaps 18 to 19 months to our lives.<sup>4</sup> Although, shockingly, life expectancy has actually been declining since 2014, according to *The American Medical Association!*<sup>5</sup> Unless we change something about the way we look at health care we are going to live shorter lives than our parents – and maybe even our grandparents.

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<sup>3</sup> Cutler, D. and Miller, G. (2005) *"The role of public health improvements in health advances: the twentieth-century United States"* Demography 42, 1(February 2005): 1-22.

<sup>4</sup> J. P. Bunker, H. S. Frazier, and F. Mosteller, "Improving Health: Measuring Effects of Medical Care," *Milbank Quarterly* 72:225-258, 1994

<sup>5</sup> JAMA (2019) *"Life Expectancy and Mortality Rates in the United States"*, 1959-2017 Steven H. Woolf, MD, MPH1; Heidi Schoemaker, MAEd2,3

## **2. Pharmaceutical Medicine is Responsible for the Disappearance of diseases like Polio, Tuberculosis, Pneumonia, Whooping Cough and Measles.**

The mainstream doctors would like to take credit for the disappearance of conditions like polio, cholera, rickets, tuberculosis, scurvy and leprosy, and this account of things certainly continues to help pharmaceutical companies sell drugs, but in actual fact all these diseases disappeared due to better nutrition, cleaner water and food, and modern sewage systems that were more hygienic and sanitary.

Want proof? Well, for one thing, Polio reached epidemic proportions in the early 1900s. Incidents of it were already way down by the 1950s when the first oral vaccine was made available and continued to fall right up until 1955 when the Salk one, credited with eradicating it, was introduced. Tuberculosis (which has existed since antiquity) caused widespread public concern in the 19th and early 20th centuries when it became common among the poor in urban areas. Incidents of that disease were already way down by 1945, before the development of the antibiotic streptomycin in 1946 which is often credited with ending it. In the case of pneumonia, whooping cough and measles – countries that did not receive vaccines early because they were too poor still saw similar rates of declines in these diseases to countries who received the vaccines sooner. When it comes to other conditions like scurvy, rickets, and cholera, they had no mainstream medical treatments at all – but they all declined too! This is all a matter of *Public Record!* I invite you to fact check me and see who's lying! Antony Sammeroff – or Big Pharma?

### **3. Pharmaceutical Medicine is Effective,** and with just a little more funding, Pharma will save us from chronic disease.

It's easy to point to the achievements of mainstream healthcare. The introduction of MRI machines, insulin, clot-busting drugs, joint replacements, cataract removals, IVF treatments, Viagra for ED, dental care, reconstructive surgery, skin grafts, organ transplants, anesthesia, antiseptics, and don't forget penicillin of course. But these achievements are taken to be ubiquitous when they're not.

This sells the lie that all Big Pharma needs is a few more years and a lot more funding to finally crack the cure to your disease. The sad truth is, if that was going to happen it probably would have happened by now. Americans are already spending *four trillion a year* (\$4,000,000,000,000) on mainstream medicine, and what are they getting for it?

Diabetes is skyrocketing, Alzheimer's disease is through the roof, autism has reached unprecedented levels, obesity is off the charts, arthritis is endemic, cancer is epidemic, the rates of multiple sclerosis, lupus, asthma, and migraines, have all hit the ceiling!

More people suffer from stress, anxiety, and depression, have acid reflux, ulcers, and stomach problems than ever before. More people are on psychiatric drugs. From 1999 to 2012 the percentage of Americans on antidepressants nearly doubled.

More kids are being diagnosed with ADD, ADHD, insomnia, bad skin, acne, dandruff and other conditions. We have obesity epidemics. The number of smokers has fallen but the number addicted to sugar, caffeine, additives and other stimulants continues to soar. Not to mention the tremendous rise in addictions to prescription medications. America, we are told, is in the midst of an opioid crisis.

Despite \$500 billion or more being spent in the war against cancer, we have a one in three chance of contracting cancer today as compared to with a one in ten chance back in the 1970s. According to *The National Center for Health Statistics*, the age-adjusted deathrate for cancer in the United States has actually *increased* by 74 percent from the beginning to the end of the twentieth century.<sup>6</sup> Statistics are often bent to make it look like more people are living longer after cancer treatment because the cancer was detected earlier. Why do they have to deceive to the public to make it look like they are making progress when they're not? Can't they come clean with us and let us make our own judgements on what kind of treatments we want based on the data? It's regularly reported that most oncologists and healthcare workers dealing with cancer will not take chemo. (Physician – heal thyself).

Get this. Despite the massive PR campaign and a century of being in charge of all the medical universities, scientific journals, hospitals, public health institutions including the CDC, AMA, FDA, NIH and WHO, writing all the textbooks, and directing the untold trillions spent on

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<sup>6</sup> Dr. J. Abramson (2008) *Overdo\$ed America: The Broken Promise of American Medicine* Harper Perennial, 3<sup>rd</sup> Ed. p50

medical research – much of it taken from the taxpayer - mainstream, allopathic medical science has not been able to cure a single one of the major degenerative, metabolic, or autoimmune disease that are most likely to affect the average person during their lifetime on earth. In fact, all of them have all become more common.

I'm talking about *all* diseases, ranging from irritating skin conditions like eczema and psoriasis, to acid reflux, to life-destroying conditions like chronic fatigue and colitis, to long term, chronic, life-threatening conditions like diabetes, heart disease and Parkinson's disease. They still are no closer to a cure than they were from the 1950s for anything, including the common cold, let alone cancer.

All the major medical breakthroughs in recent decades have been in surgery and trauma crisis care. The field of regenerative medicine looks very promising – but it's still just in its infancy. What we have got up until now are things like the invention of kidney dialysis machines, technology to aid emergency surgery, the mastery of hip and knee replacements, organ transplantation, internal hemorrhages, skin grafts, the treatment of broken bones, lacerations, cuts and contusions, and the cardiopulmonary bypass machine (which allows surgeons to perform intricate heart surgery by providing the body with an external lung and heart,) and things like that. If you break a bone, need reconstructive surgery or have to have something removed from your body, then the medical field is full of miracle workers. But here's where people get confused, and the lines get blurred. Surgery is not the same as the treatment of disease.

Some people depend on medicine. Type I diabetics *need* insulin. If you have your thyroid removed, you need to have the hormones it produces replaced. Epinephrine is necessary to save lives from anaphylactic reactions. So far as I know, no one has yet found a way to treat epilepsy holistically, and so those who suffer with it are left with precious little choice but to take mainstream treatments and accept their side-effects. Some conditions, like Parkinson's, cause extreme suffering and can only be managed with drugs, although I am led to believe that earlier intervention can stop them from developing in the first place.

That said – fully seven out of ten Americans are on prescription medications, and with only 4% of the world's population the USA consumes half of the pharmaceuticals consumed worldwide. A pill for every ill, a drug for every bug, a vaccine injection for every infection, chemotherapy and radiation for every mutation, and when in doubt – cut it out! If this approach was working, The USA would be the healthiest country on the planet. But the truth is most of these people are just poisoning themselves. The evidence for that is that by the time they reach 65 they are on several more drugs! If their medication was actually treating their condition, they would be getting better instead of worse.

#### 4. Pharmaceutical Medicine is Safe.

According to the *American Medical Association*, mainstream medical care is the third leading cause of death.

Unnecessary treatments, diagnostic errors, surgical errors, hospital acquired infections, malnutrition, and bedsores. About 128,000 a year die from taking *properly prescribed pills*. We are talking about people who had faith in the system and did exactly as they were told when they were told because they believed in their doctors. About the same again die because of dosage errors, or the use of a drug that is contraindicated for them. Not everyone who is damaged by a drug dies though. Every year, 840,000 hospitalized patients are given drugs that cause serious adverse reactions, making up a total of 2.74 million serious adverse drug reactions.<sup>7</sup>

In the latter part of the twentieth century, dozens of common treatments, including the tonsillectomy, the hysterectomy, the frontal lobotomy, the radical mastectomy, arthroscopic knee surgery for arthritis, X-ray screening for lung cancer, proton pump inhibitors for ulcers, hormone replacement therapy for menopause, and high-dose chemotherapy for breast cancer, to name just a few have ultimately been shown to be unnecessary, ineffective, more dangerous than imagined, or sometimes more deadly than the diseases they were intended to treat.

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<sup>7</sup> Gøtzsche, P. C. (2014) *“Our prescription drugs kill us in large numbers”* see *National Library of Medicine* online.

Other examples of widely accepted medical treatments that have been discredited and frequently harmful include routine episiotomy, brain bypass surgery for patients with warning signs of stroke, and hormone replacement therapy to prevent a second heart attack in women, radical mastectomy – the removal of the entire breast and underlying chest muscle of women with breast cancer (studies would finally show that a lumpectomy with radiation was just as effective while far less traumatic).

When the FDA regulator, Dr. David Graham, fought against the approval of Vioxx – an anti-inflammatory drug – because it caused heart attacks his supervisor told him that the FDA's client was the pharmaceutical industry. Consequently, the FDA approved Vioxx.

When Graham tried to make the scientific community aware of Vioxx's deadly side effects, he was offered a better position within the agency to stay quiet. Fortunately, he refused to take what he regarded as a bribe. He shared his data at scientific meetings and Merck voluntarily withdrew Vioxx from the market. By the FDA's own reckoning, about 140,000 heart attacks and 60,000 deaths were attributable to Vioxx, making it the biggest single drug disaster in U.S. history. Given the number of people who took Vioxx, the number of casualties is probably much higher. Around one out of ten American adults had taken Vioxx in the five years before it was recalled.

*The LA Times* reported that 12 of 22 “principal investigators” overseeing the Government-sponsored study of Rezulin, a diabetes drug, were receiving fees or

research grants from the manufacturer. The NIH and FDA continued to support long after it was known to cause fatal liver toxicity. And the drug didn't even offer any advantage over existing diabetes drugs. One doctor, Robert I. Misbin, was threatened with Dismissal for providing a copy of a letter to members on Congress from a group of colleagues at the FDA expressing concern about the FDA's failure to withdraw the drug.<sup>8</sup>

The foxes are guarding the chicken coop.

We are told alternative medicine is dangerous, and there is no doubt that some of them may very well be. But here's the thing – no Naturopath has ever prescribed a treatment that caused about 140,000 heart attacks and 60,000 deaths like Vioxx did. No homeopathic remedy has caused 94,000 cases of breast cancer like Hormone Replacement Therapy. Chiropractic care has never created an epidemic of opiate addiction like Oxycontin has. Acupuncturists have never caused 12,000 babies to be born with missing limbs like thalidomide did. But pharmaceutical medicine is safe and alternative medicine is dangerous!

How many treatments are they still applying that they will later say, "Oh sorry, we made a mistake after killing and maiming tens or hundreds of thousands of you? our bad. But don't worry we've got this *new* treatment – and the science behind it is really great! We know it's really great because it was peer reviewed in *the same journal* that said the last treatment was safe and effective?

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<sup>8</sup> Dr. J. Abramson (2008) "*Overdo\$ed America: The Broken Promise of American Medicine*" Harper Perennial, 3<sup>rd</sup> Ed. P86-88

Let's be clear about this. *All* the treatments in mainstream medicine have negative side-effects. Many of them are dangerous, and often they cause harm or death. What's more, when mainstream treatments cause harm to their patients, rather than be penalized for it, the medical industry is actually *rewarded* with *more money* for treating side effects. If people later develop cancer because they had one too many CT scans, no one will be able to trace it do the medical radiation they received, they will not be compensated, and even if they were – it wouldn't bring their health back!

The mainstream medical industry routinely profits from ineffective treatments, unnecessary treatments, treatments that cause long-term side effects that are worse than the conditions they are meant to treat, and regularly administers expensive treatments with large profit margins where cheaper treatments will do an equal or better job with less side effects. They also regularly administrate treatments that are not properly backed by good evidence or good science.

Drugs are dangerous and should be *treated* as such, but they get handed out left and right because *someone* is making a killing from them, and people innocently believe their doctor wouldn't prescribe anything that could harm them.

Whenever there is a new scandal, people assume that it's a one-off thing that is bound to happen from time to time and can't be helped. They can't imagine that the rot is in the system itself which, given its incentive structure, is bound to turn out these sorts of results.

## **5. Pharmaceutical Medicine is Scientific.**

We are told that mainstream medicine is the only scientific medicine, but there are a bunch of dirty tricks that pharma companies can use to turn out the results they want in studies, and you would be shocked how often they get away with them:

- Comparing their drug to a placebo rather than an established therapy.
- Treating side effects and then claiming the rate of side-effects was low.
- Use data from only patients who did well on the product, and then exclude data from patients who dropped out of trials because their side effects were too severe.
- Generalizing from the wrong demographics – for example doing a study on young, healthy adults who are unlikely to have complications or adverse reactions to the drug, but then recommending the treatment to elderly people, less healthy people, or children.
- Running a bunch of studies and cherry-picking the ones that show the desired results to submit to the regulators.
- Simply burying studies that do not turn out desired results by exercising intellectual property “rights” and not publishing them.

- Tinker with the doses when comparing two drugs to one another, so that the desired drug comes out top in trials.
- Use a “discontinuation group” and call it a placebo. For example, in the drug trials for antidepressants and antipsychotics they often take a group of people that are doing ok on the drug already and take them off it, provoking withdrawal symptoms. Half of that group are randomized into the ‘placebo’ group, while the other half are put back on the drug. You then compare a group of people who are withdrawing from a drug to a group of people who are accustomed to it – and you call that science!
- Ending a study prematurely while it is turning out favorable results in case the side-effects turn out to be too severe if it continues.
- Simply not running controlled trials – which are very expensive but provide very good evidence in support of a treatment – because the treatment is already selling well and risking an unfavorable outcome is not deemed in the interests of the manufacturer.
- Safety test treatments individually but then issue them all at once or over a period without having proven that they are safe in conjunction. E.g. Individual vaccines are safety tested, but the CDC has never safety tested the entire vaccine schedule as a whole for synergistic reactions, despite calls from experts and even congress.

The vast majority of people are at risk of harm in their lifetime from *mainstream medicine*, but the good folks over at Skeptic's Magazine just keep chasing after chiropractors and acupuncturists. That is *a* shame, because we actually *need* critical minds to expose bad science in medicine so we can make it better.

We are *told* that allopathic medicine is the only scientific medicine, but if you actually bother to dig around a little you will find all sorts of embarrassing quotes and facts like these:

“Stunningly little of what physicians do has ever been examined scientifically... when many treatments and procedures have been put to the test, they have turned out to cause more harm than good.” (Brownlee, 2013)

People are under the illusion that medicine is somehow a completely scientific evidence-based pursuit and that everything they do is validated and proven, but that's far from the case.

In many cases medical procedures are adopted without being empirically verified. “Only a fraction of what physicians do is based on solid evidence from Grade-A randomized controlled trials; the rest is based instead on weak or no evidence and on subjective judgement.”<sup>9</sup>

In 1990 the *Bipartisan Commission on Comprehensive Health Care* released a report publishing their findings

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<sup>9</sup> Alberto J. de Armendi, “Pedagogical Shifts in Medical Health Education”, [http://bit.ly/126\\_shifts](http://bit.ly/126_shifts), *Scientific Research* 4, no.6a (June, 2013): pp20-22.

that “only 10-20% of the medical procedures used today have been subjected to randomized clinical trials – the most conclusive method of determining if a procedure is medically effective.”

In 1992 the Institute of Medicine, which has funded some of the best clinical trials around, estimated that less than half of the treatments and tests are backed up by strong scientific evidence, with the rest being based on very weak evidence, or even none at all.<sup>10</sup>

The British Medical Journal used to publish a report every few years outlining how much of medicine is based on actual scientific evidence. The last report, published in 2013 found that just 11% of medical treatments are “beneficial” and 50% have “unknown effectiveness.”

Dave Eddy, a heart surgeon turned health care economist and a leader in the evidence-based medicine movement, estimated that as little as 15 per cent of what doctors do is backed up by valid evidence.

“The goal of performing rigorous medical studies is often replaced by the goal of creating the perception that rigorous medical studies call for increased use of the sponsors’ products.” (Abramson, 2008)

Further to the 1990s trend for evidence-based medicine, too much of medicine is still not grounded in good evidence. “Deans of medical schools often tell graduating doctors that half of what they have learned in the past four years is wrong-but nobody knows which half.”

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<sup>10</sup> Marilyn J. Field and Kathleen N. Lohr, (1992) *Guidelines for Clinical Practice: From Development to Use*’s

The editors of *The New England Journal of Medicine* and *The Lancet* both resigned in disgust, claiming that at least 70% of the articles in their journal were trash and biased towards the corporate health care industry bodies that funded the research. Richard Smith, who was the editor of *The British Medical Journal* for 25 years said: "Major medical journals are just an extension of the marketing departments of major drug companies." Richard Horton of *The Lancet* wrote, "Journals have developed into information laundering operations for the pharmaceutical industry." Journals want to avoid alienating their advertisers. They often reject studies that demonstrate existing treatments are less safe than originally realized if the manufacturers of those drugs advertise in their pages.

Commercial sponsorship affects what is being studied, but also how it is studied. Studies repeatedly show bias in sponsored research. In 2003, separate studies were published in JAMA and the *British Medical Journal* showing that the odds are 3.6 to 4 times greater that commercially sponsored studies will favor the sponsor's product than studies without commercial funding. Another study published in JAMA the same year found that among the highest-quality clinical trials, the odds that those with commercial sponsorship will recommend the new drugs were 5.3 times greater than for studies funded by non-profit organizations. In other words: even the best studies in the best journals are not free of bias. Studies that support sponsored interests are published quickly while unfavourable results are often slow to come out, or even completely buried.

The odds are five times greater that new products will be supported by commercially sponsored studies than by studies with non-commercial sponsorship.<sup>11</sup> Editors of the most respected journals have warned that they cannot protect readers from pro-industry bias in the scientific articles they publish.

In 1992 congress passed the Prescription Drug User Fee Act, or PDUFA (known as Padoofa for short) which allows companies to pay fees to the FDA in order to speed up drug approval, creating an extremely suspect situation where the regulator is now partially funded by the industry they are meant to regulate. Quite a conflict of interest. It is normal for drug companies to donate to congressional candidates too. The drug companies paid a \$300,000 fee for each new drug application in return for the FDA's Center for Drug Evaluation and Research to adhere to a speedier timetable for the drug approval process and now half the CDER's budget was coming from drug companies themselves for the approval of their own drugs. An anonymous survey done by *Public Citizen* in 1998 revealed that FDA review officers felt that standards had declined as pressure to approve new drugs increased.

*The Los Angeles Times* reported that 12 of 22 researchers overseeing the Government-sponsored study as "principal investigators were receiving fees or research grants from the manufacturer of Rezulin, a diabetes drug that the NIH and FDA continued to support long after it was known to cause fatal liver toxicity. The drug

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<sup>11</sup> Dr. J. Abramson (2008) *Overdo\$ed America: The Broken Promise of American Medicine* Harper Perennial, 3<sup>rd</sup> Ed. p242

appeared to offer no significant advantage over other diabetes drugs.

The FDA granted waivers – 800 between 1998 and 2000 according to an article in *USA Today* – to allow experts with financial ties to products being presented to bypass the fact that this is something which federal law “generally prohibits.”

Whoever funds the study tends to come out top: “Companies commonly use positive results from head-to-head trials to encourage doctors to prescribe their drug rather than a competitor’s. When the authors of the *Journal of Psychiatry* survey looked at the trials, they found a curious thing: In five trials that were paid for by One doctor, Robert I. Misbin, was threatened with Dismissal for providing a copy of a letter to members on Congress from a group of colleagues at the FDA expressing concern about the FDA’s failure to withdraw the drug. In 2003 an article titled “Stealth Merger: Drug Companies and Government Medical Research,” revealed multiple examples of NIH officials receiving payments of *hundreds of thousands of dollars* from drug companies. Eli Lilly, it’s drug, Zyprexa, came out looking superior to Risperdal, a drug made by the company Janssen. But when Janssen sponsored its own trials, Risperdal was the winner three out of four times. When it was Pfizer funding the studies, its drug, Geodon, was best. In fact, this tendency for the sponsor’s drug to come out on top held true for 90 percent of the more than thirty trials in the survey.”

A study in *JAMA Internal Medicine* reported that as many as 42% of U.S. Medicare patients were subjected to procedures providing little if any medical benefit, costing the tax-payer up to \$8.5 billion.

In 2011, researchers at the Mayo Clinic, a non-profit academic medical Centre based in Rochester, Minnesota, found that almost half of the established medical practices they reviewed were no better than alternatives that were less expensive, simpler or easier.<sup>12</sup>

John Abramson, author of *Sickening – How Big Pharma Broke American Health Care* (2022) was involved litigating against Pfizer who were given *the biggest fine ever* for fraudulent science. When pressed to share what Pfizer had actually done, he told a famous podcast host: “I know, but I can’t tell you!” because the court had made him sign a nondisclosure agreement! So here we have a clear case of *convicted felons*, who are responsible for our healthcare *defrauding* us outright, *in plain view*, risking our lives – and we’re not even allowed to know what they did – even once they’ve been *proven* guilty!

### **Sources for all quotes that are not otherwise indicated:**

Dr. J. Abramson (2008) *“Overdo\$ed America: The Broken Promise of American Medicine”* Harper Perennial, 3<sup>rd</sup> Ed p85-89

Brownlee, S. (2003) “Overtreated: Why Too Much Medicine Is Making Us Sicker and Poorer” Bloomsbury USA, p218-242

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<sup>12</sup> Vinay Prasad et al., (2011) *“The frequency of medical reversal.”*

## 6. Pharmaceutical Medicine Treats Disease.

Pharmaceutical medicines don't treat diseases, they only mitigate symptoms.

None of the mainstream medicines are prescribed to cure anything, because in mainstream medicine they don't actually believe you *can* cure anything. In their view, the body doesn't have the power to fix itself, because if it did then *it wouldn't have got sick in the first place*. They think that the body is on a pre-determined course to breaking down little by little like a car destined for the scrapyard. You're just on the road to the grave, and your imperfect parts are bound to break down along the way, so the best you can hope for is not to feel the pain of your injuries. Then how come I saw so many strong, healthy people in their 80s with no chronic diseases when I was in Rishikesh, India the birthplace of yoga?

The mainstream doctors are dispensing pills with harmful side effects left and right and they should only be used in the short term to comfort the patient, mitigate symptoms, and buy them time while you attend to the underlying cause of disease.

Meanwhile, the symptoms appear go away and you are thinking, "Wow, my rash or headache has gone, the wonders of modern medicine, huh? I'm getting better already!" No, you're not! As far as the disease process is concerned you are getting worse, and now your body needs to deal with the harmful compounds in the pharmaceutical that is bound to cause side-effects. Soon you'll be back to the doctor with a raft of other symptoms of another disease which needs medicated with more pills like a never-ending game of whack-a-mole.

You've been doing all the right things. You've seen all the right specialists, took all the meds you've been prescribed, exactly when you've been told to take them: Statins for your cholesterol, ACEs for your blood pressure, NSAIDS for your pain and inflammation, you've done everything the doctor told you to, and you wonder why nothing is working. You start to wonder why life is so unfair and you can't just have a normal body that doesn't keep breaking down on you and throwing up symptoms no matter what you do. The doctor just comes in to mitigate your symptoms while you deteriorate with expensive pharmaceutical drugs. My teacher Gary Tunsky (1960-2019) used to call this *David Copperfield Medicine*, after the famous stage magician. It's the illusion that you're getting better when you're actually getting worse. He said it would be like going to the mechanic because a red light went off in your car to tell you there was something wrong, and he just snipped the wire to the light and said, "There you go, all fixed! That'll be 300 bucks please!"

Health comes on a spectrum from very well to very sick. You are not either diseased or healthy. I know that sounds obvious, but the mainstream medical mentality says that you're healthy until you get sick and need treatment. Then, of course, it's CACHING! But until then, - we don't care about you. That's why everyone is getting sicker and sicker while Big Pharma gets richer and richer. They don't act ahead of time, and they don't understand disease *etiology* (origins) so they can't reverse it! You need to treat *the whole patient* - not just the symptom. A drug has no nutritional elements in it, so how can it help you build healthier tissues? As your *tissues* get sicker, you get sicker, which means more and more symptoms.

Why do people with more inflammation end up with more cancer? Why do people who have fibromyalgia as often as not have lupus? Why do people with Parkinson's disease often get dementia in the advanced stages? Why do more than a third of them get depression and anxiety? Why do they get sensory, sleep, and emotional problems? It's because these aren't actually different diseases but the cascading consequences of the same underlying disease growing more severe. The patient first got ill with something minor long before it progressed to a severe condition like Parkinson's. Because that wasn't treated properly, the underlying cellular condition of the patient got worse, and this manifested in more symptoms which, collectively, the doctors refer to as "Parkinson's Disease." But the doctors *still* don't know how to treat the underlying cause, so it continues to get worse and worse, until the poor individual has suffered so much nerve-damage that they start trembling, experiencing rigidity, loss of balance, and finally can't even walk unaided. Eventually they need around-the-clock nursing care and may experience hallucinations and delusions. It's an unspeakably tragic – and the more so, because so often it could have been prevented with the correct care.

When each condition is seen as separate it needs its own medication, with its own side-effects, that may also require treatment. One blood pressure medicine, one for heart burn, one for arthritis, one anti-inflammatory, one anti-depressant, one pain medication, one for your insomnia, a pill for every ill. When you realize there is one common cause to all of it – that ALL symptoms arise out of the underlying cellular condition of the body – then that is what you treat. We treat the underlying cause – and all its outward manifestations will disappear.

When you understand that health is on a spectrum you think of things differently. You think of preventing disease and attending to the underlying causes of disease when they arise, rather than just popping pills or rubbing on creams to make the symptoms go away.

“You cannot heal selectively,” as Charlotte Gerson would say, “If you truly heal – everything heals.”

Unfortunately, the treat-the-symptom attitude is endemic in the general population as well as among the medical establishment. Even when people go to alternative practitioners, they are usually looking for symptom relief because they are already very sick.

When I was in Morelia, Mexico I experienced the benefits of hyperbaric oxygen chamber. I have done tons of alternative therapies by the way, and most of them were useless or next to useless. I agree with the mainstream doctors so far as that goes – just because something is alternative doesn't mean it's any good. However, hyperbaric oxygen chamber was epic. I went ten times over two weeks and felt incredible. More energy, better moods and improved digestive function. Unfortunately, the woman who ran the clinic had real trouble promoting it, because people usually only came once they were already significantly sick. She just couldn't convince enough people to care for their health *before* they got ill.

Now that you know what's going in, will you approach the dis-ease differently? Will you act to prevent it rather than react after the fact?

A good place to start is: [www.terrainscience.com](http://www.terrainscience.com).

## 7. Pharmaceutical Medicine is Better than Alternatives otherwise Alternatives would be more popular.

In 1995 Duke University Medical Center instituted a program to prevent congestive heart failure, which was the most common diagnosis leading to hospitalization among the elderly. Nurses would call heart failure patients at home to check on their breathing and make sure they were taking the right medication properly. Nutritionists helped patients improve their diets. Doctors shared information about them and came up with new ways to improve care. The number of hospital admissions for congestive heart failure at Duke declined, and patients who were admitted spent less time at the hospital, bringing the costs down for insurers by 37%. One would think with such astonishing results to boast programs like these would have become commonplace in the two and a half decades since. But they haven't. And under the current system they won't. Because as a consequence of the program Duke lost money.<sup>13</sup>

A system based upon humane values would be established to prevent disease when possible and treat it when necessary, but because the system *loses* money when people are healthy, and *gains* money when people are sick, the only thing incentivized within these systems is the treatment of ill-health. Prevention of diseases and the general promotion of good health can never be a priority, because to promote that policy would be *to slay the goose that lays golden eggs*.

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<sup>13</sup> Brownlee, S. (2003) "Overtreated: Why Too Much Medicine Is Making Us Sicker and Poorer" Bloomsbury USA, p218-242

If there are more effective treatments for cancer and heart disease outside the realm of pharmaceuticals and surgery, but they have not come to light or been discovered, then it's because of factors relating to mainstream medicine.

Allopathic medicine gets all the research funding. Despite the fact they have spent at least \$500 billion on researching cancer, cancer rates are off the charts. The rates of heart disease are no lower either, nor are the rates of stroke, diabetes or chronic lower respiratory disease. Medical journals rarely or never want to print papers about nutrition-based treatments, herbal medicine, or lifestyle changes. Alternative treatments are typically not even on the radar of mainstream medical researchers. Sometimes they are regulated out of existence. At other times – when studies have been carried out and they are shown to be effective – no one wants to publicize them because the remedies made of natural ingredients can't be patented. Plus, even if doctors *did* come to know about them somehow or another, they are still not legally allowed to prescribe anything but surgery and drugs anyway.

For example, the FDA refused to allow folic acid manufacturers to make the proven claim that “800 micrograms of folic acid is more effective in reducing the risk of neural tube defects than a lower amount in common food form,” even once the courts ordered them to do so – twice! This was even despite the fact that the CDC began recommending that women of childbearing age take it during the first 6 weeks of pregnancy, and approximately 10,000 American babies were born with deformities. (See Ruwart (2018) “*Death by Regulation.*”)

Why? Probably because there are no patents on vitamins, so pharma cannot charge monopoly prices on them.

According to a very well researched report called *Actual Causes of Death in the United States* published in *The New England Journal of Medicine* in 1993, 70% of disease is lifestyle related but doctors are typically given less than 20 hours of nutrition education over 4 years. Why is it then, that whenever anyone considers a change lifestyle that might improve their health, they are advised to consult their doctor first?

If even only a small percentage of the \$4 trillion we currently spend on healthcare was spent *simply bribing people* to eat healthy and take exercise classes, then we might have done a better job of reversing the leading causes of death than mainstream medicine has. Yet, for decades, mainstream doctors were telling patients that food was “all just calories-in-calories-out.”

The major causes of death are also destructive of the *quality of life* of sufferers, and expensive to treat. If we were able to cut *a quarter* of the money, we spent treating disease by preventing it, society would be \$1 trillion dollars a year richer, which means mainstream medicine is *a major cause of poverty*. Indeed, in America, healthcare is the leading cause of bankruptcy. People in poverty have poorer health outcomes and more unhealthy habits on average than more affluent people. Since they typically cannot afford their own treatment, they tend to be cared for out of public funds, which means the affluent cannot afford (pardon the pun) to turn a blind to the plight of the less-well-off because they are ultimately going to pay the price for doing so (sorry, I can't stop.)

Pharma stands to lose billions or even trillions a year on drug sales if alternative treatments come to light. There is a tremendous financial incentive to keep things exactly as they are. They have the money to be the major source of funding for colleges, Continuing Medical Education programs, and even political campaigns. The FDA, CDC, NIH, AMA and WHO *all* list big pharma as major sources of funding.

Governments all over the world have shelled out money hand over fist to keep the mainstream medical paradigm ticking, despite an incredible rate of failure to reduce disease rates. Public funds and licensing laws ensure that everyone who wants to go into the medical profession in-*doctor*-inated in the mainstream way of thinking – they and will *really believe* that allopathic medicine is effective and in fact that it is the *only* scientific form of treatment.

Amazingly, there is not a strong relationship between healthcare spending and healthcare outcomes. Clean drinking water, access to nutritious food, workplace safety, sanitary living conditions, being able to get a job, having a supportive social network have a bigger effect on health outcomes than access to healthcare. Singapore spends 50-60% less than the average developed nation, and a quarter of what the USA does in terms of GDP and delivers better healthcare outcomes. This isn't because Singapore is poor country like Haiti or India where everything costs less, either. Singapore is a high-waged, fully industrialized, technologically advanced nation like. The US and has a similar per-capita GDP. Singapore's *Housing Development Board* builds high-quality housing for the poor instead of wasting money on treatments which to do not increase the length or quality of life.

If someone, getting into government, *really* wanted to do something to improve people's health and longevity, they could go to the areas of the country where living conditions are worst, where health outcomes are poor and everyone is on government-provided healthcare, take 10% of the money they are currently spending on that and invest it in improving the quality of the worst housing. The program would likely pay for itself in the drop-off in health visits. Especially if you are picking low hanging fruit like eliminating mould in houses where big families are breathing it in.

The American system is replete with people ordering expensive treatments with large profit margins where cheaper treatments will do an equal or better job with less side effects. Third-party payers also order stacks of unnecessary treatments. In 2008 Oregon gave Medicaid health insurance coverage to an additional 10,000 citizens via a lottery. There was no improvement in their health outcomes, but they did increase hospital admissions by 30%, outpatient ones by 35%, and ER visits by 40%. It cost a lot of money – 36% more – for no tangible benefit whatever!<sup>14</sup> *JAMA Internal Medicine* reported that as many as 42% of U.S. Medicare patients were subjected to procedures providing little if any medical benefit, costing the taxpayer up to \$8.5 billion. The *Institute of Medicine* wrote: “Unnecessary health care costs and waste exceed the 2009 budget for the department of Defense by more than \$100 billion. Health care waste also amounts to more than 1.5 times the nation's total infrastructure investment of 2004.”

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<sup>14</sup> Flynn, S. M. (2019) *The Cure That Works: How to Have the World's Best Healthcare - At a Quarter of the Price* Regnery Publishing, p179-181

I'm picking on Medicare right now because we're talking about how the government props up quack treatments that wouldn't survive the market if people weren't forced at gunpoint to pay for them through the tax system. I'm giving insurers a pass. You'd think at least private insurers would want to keep care costs down so they could offer competitive premiums, but actually they get a kickback-ahem-sorry, I mean *administration fee*, when they pay out, called a reimbursement. The more they pay out the more they can claim back.

If I told you, "The government should just *give* people in need money to spend on healthcare instead of paying hospitals for treatments," you'd probably tell me that that would be incredibly open to corruption. And you'd be right. But I would still choose it over the present system *any day of the week*. It would be far less open to exploitation than Medicaid, Medicare or the NHS in Great Britain are. Because these programs don't give money directly to the poor, but instead pay healthcare providers to treat them for free, they are incredibly open to fraud. For example, hospitals can easily "upcode" procedures, which means issuing a bill to the government or insurance for a more expensive procedure than the one necessary or the one administered. Fraud is incredibly hard to prevent because there would be no way to police so many claims even if the government wanted to. According to the government's own figures, fraud accounts for ten percent – over \$100 billion – of the dollars it pays out to health care providers<sup>15</sup> and many serious critics think that is a very optimistic estimate.

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<sup>15</sup> David A. Hyman, (2002) "*HIPAA and Health Care Fraud: An Empirical Perspective.*"

People are much less stupid when it comes to spending *their own* money than other people's. They tend to shop around for the best service at the best price. When it comes to healthcare, they don't undergo unnecessary treatments so readily, and tend to buy generic drugs rather than expensive brands. So, if rather than pay Big Pharma and Big Medical for people's treatments – which basically amounts to corporate welfare, vouchers were issued into a *Health Savings Account* for people to shop around for healthcare wherever they wanted, there would be a lot less corruption. People would research the best value treatments and where to get them – including flying abroad where you can sometimes get top notch surgery for a fraction of the price. The cost of healthcare would drop dramatically while the quality improved dramatically because when companies have to compete for your money, they find ways to root out inefficiencies and offer a comparable service to their competitors. Best practices emerge and tend to become more-or-less ubiquitous. That's why all "elective" (non-essential) medical procedures have followed the same pattern as LASIK. Cosmetic surgery, IVF treatments, contact lenses, dental veneers and tooth whitening have all become more available to more people at lower prices from better experienced, better trained practitioners while healthcare just goes up in price in while people get sicker and sicker.

Another advantage is that people's *Healthcare Savings Account* would not be tied to their job. They would still have cover if they became unemployed. Plus, insurance providers are not concerned with preventative care or lifestyle decisions, because by the time a young person gets a chronic disease, they will be in a different job and therefore somebody else's problem!

The HSA could be spent on gym classes or a personal trainer. Consumer Advice Agencies would meet the demand for good information on risks and benefits of different treatments, as well as their comparative safety profiles. Their job would be to collect and analyze all the data then inform consumers and medical professionals with reports to help them make good decisions according to the individual circumstances and values of the patient.

Yeah, sure, some people would still pay for hokey treatments that don't work in the alternative field, but how would that be any worse than what is happening right now? Trillions wasted! At least it would be their individual choice and responsibility. Because they knew it was down to them to make good decisions with the help of their doctor and other experts, the average person would be far more careful under the new system.

Over time there would finally be a meritocracy in medical treatments which wasn't based on monopolization of the entire field by Big Pharma and Big Medical with the backing of government money, preferential regulations, and the state's insistence that so much of people's salaries are given over to corrupt health insurance companies. Some people would pick mainstream, pharmaceutical treatments and surgery, of course, because these have a place too – especially in emergency situations. Other people would go farther afield, even trying weird and wacky treatments. Some of them would work, some of them wouldn't. Consumer Watchdogs would collect the data. Over time it would become and more obvious what worked and what was mere snake oil. One thing is for certain, though, it would be the end of the \$4-trillion-dollar-a-year Big Pharma medical racket.

## 8. Healthcare Shouldn't Cost an Arm and a Leg!

Dr. Keith Smith, MD., opened a Surgery Centre in Oklahoma. It's called *The Surgery Center of Oklahoma*. Does what it says on the tin! The clinic specializes in providing cheap, pay-over-the-counter services to those who require surgery. They publish the cost of the procedures they perform transparently on their website. The cash price offered is sometimes as low as a tenth of the amount that Medicaid may pay at so-called non-profit hospitals.

*The Surgery Center of Oklahoma* has provided services so cheaply that other hospitals have had to respond by lowering their own prices – creating a deflationary effect that started first in Oklahoma but has spread even farther afield. One patient, upon finding their website, made a print-out quoting the cost of a prostate operation at \$3,600 and took it into his local hospital in Georgia who were ready to charge him \$40,000 for the same procedure. When he phoned the *Surgery Center...* to, rather apologetically, report that his local hospital had offered to price-match the combined cost of the surgery and his air fares to Oklahoma and back (saving him \$36,000), Dr. Smith said not to worry about it, because *the story itself would prove far more valuable than the \$3,600 he would have charged for the operation*. Indeed, this exact story was picked up upon and reported in the media online. It's amazing what a little market competition will do! Imagine everyone in the USA saved 80-90% on surgery. How much money would that free up? Americans just don't know how rich they would be if it wasn't for their corrupt system of healthcare.

Americans are now paying \$4 trillion a year on healthcare, but the dirty secret is – most healthcare is that it isn't actually that expensive to provide. I believe if I was the dictator of healthcare in America, I could slash that figure down to \$1 trillion and make everyone better off at the same time – except of course those profiteering from the system that exists right now! But, in my opinion, even *they* would be better off *spiritually*, if not financially, due to my reforms. For what does it profit a man to gain the whole world but lose his soul? **You are making people sick and poor!**

There is a vast difference between what people are charged and what it costs to deliver care. A study published in Health Affairs found that hospitals were charging 3.4 times the cost of patient care on average. At the 50 so-called “greediest” hospitals, they were charging more than ten times the actual cost and typically pricier hospitals are no better than the cheaper ones. Retail prices for hip and knee replacements can range from between \$11-\$70,000 depending on where in the states the operation takes place and in which hospital.

There has been a massive increase in the proportion of administrative staff needed to comply with the complex array of regulations in proportion to the number of doctors and nurses.

In December 2011, the Administrator for the Centers for Medicare & Medicaid Services, Dr. Donald Berwick asserted (as he was leaving his job) that 20-30% of health care spending in the US is going to waste. He listed the five major causes as over-treatment, failure to coordinate care, the administrative complexity of the

system, burdensome rules, and outright fraud. Here are some of the main causes of waste: Unnecessary tests (\$200-800bn.) Fraud (\$58.5-\$83.9 billion), overtreatment (\$75.7-\$101.2 billion), failure to coordinate care (\$27.2-\$78.2 billion). And the administrative complexity of the system (\$265.6 billion.)<sup>16</sup> Enough money to remedy world hunger.

Government spending on healthcare in the US has actually inflated costs rather than making provision more affordable because private hospitals and pharmaceutical companies account for the fact that patients are being subsidized and increase their rates. Those who rely on Medicare and Medicaid expect the government to pay for treatments regardless of cost, so companies abuse the system by charging absurd sums for their products. For example, in 2014 Gilead Sciences introduced a cure for hepatitis C named Solvadi and marketed it at the astronomical price of \$1000 per pill. The cost of treating every American infected with it would have been \$268bn – about the amount Americans were already spending on all prescriptions over the course of a year. Medicaid budgeted \$1.3bn to pay for the drug, but when faced with rationing, Hepatitis C sufferers filed a class action lawsuit in which they accused Medicaid and private providers of violating the law by refusing to cover medicines that were approved by the FDA. In other words, they demanded the government pay \$1000 per pill to treat them! Sadly, this was not an isolated incident either. I will cover how we could reverse overspending on healthcare in *far more detail* in my up-and-coming book *None Dare Call it Quackery*.

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<sup>16</sup> Waste in the US Health Care System: Estimated Costs and Potential for Savings (2019)

Concierge services now exist where instead of incurring a per-visit charge, customers pay a subscription fee, like a gym membership. Subscription can range from \$500 to \$5000 a year and may vary according to age.

For example, Dr. Josh Umbehr of *Atlas.MD* offers a concierge family practice in Kansas, offering unlimited home visits, work visits, as well as over-the-phone, email, social media and Skype support. Outcompeting even Walmart they dispense medications in Kansas wholesale, 1000 blood pressure pills for \$8.33 after 10% mark up under a penny a pill. They are also getting huge discounts labs and imaging, and 95% off of bloodwork, just by cutting out the middlemen. He believes they can reduce price of healthcare by 80-90% and reduce premiums of insurance plans 30-60%. Any procedure that can be done in the office is done free of charge, including stitches, biopsies, bone scans, lung scans, urine testing, minor surgical procedures to name a few.

Because up-front fees are higher, physicians look after a smaller number of patients, perhaps as little as 500-2000 patients rather than the 3-5000 that might typically constitute a medical practice. Physicians can get to know their patients' circumstances and their needs better, and offer a higher quality of care. If they do a good job of encouraging their patients to adopt better habits, then those patients will need less health care and so the clinic will be able to manage more subscriptions, meaning the incentives are pointed in the right direction. Some concierge providers affiliate with other practices and can provide cross-coverage so that people can access medical care away from home. If more people adopt this model this will surely become more prevalent.

Medibid, launched in 2010, offers an online marketplace where people seeking medical care can bid for procedures ranging from tummy tucks to hip replacements from high quality services providers. It has experienced huge growth because Americans are worrying about rising cost of healthcare.

Ralph Weber of Medibid explains, "Usually when people buy things in the US they assume that the more you pay the better the quality, and that's the case in most aspects of the economy, but in health care it's almost exact opposite... as a matter of fact very often the more you pay the lower the quality... an experienced surgeon does 500 procedures a year, and an inexperienced one that does let's say five. The experienced one might take 25 minutes to do a knee replacement. If he comes across a complication – he's seen it a hundred times... You're still in and out in 30 minutes... The inexperienced surgeon might take 2 hours to do the same knee replacement, and if he comes across a complication, he's got to call in another doctor. You're under anesthesia for 2 or 3 hours... you might even need one or two nights over in the hospital... so those bills all add up."

You can investigate [crowdhealth.com](http://crowdhealth.com) and see if it's for you. *Crowd Health* is a community-based alternative to health insurance that seeks to help people find guidance, support, and quality care outside the expensive/exploitative health insurance system. Members pay a monthly contribution and when they go to the doctor, they draw down money from the community pot to pay for their healthcare needs. This allows likeminded people fund their healthcare needs together while cutting out many of the middlemen.

You can also consider boycotting the costly American system for some medical tourism. Hyman and Silver report, “A hysterectomy is likely to cost \$32,000 in the United States but can be had for only \$4000 in Thailand. A kidney transplant goes for \$150,000 here at home but costs on \$25,000 in the Philippines. An American couple can expect to spend about \$20,000 for a round of in vitro fertilization here but can get the same service in Israel for only \$3,500.” Again, pressure from competition abroad would force domestic providers to drive costs down.

One clinic in Bangalore, India charges only \$1,600 for coronary artery bypass surgery (known as “cabbage” for short), an operation that can cost more than \$100,000 in the US and their mortality rates are comparable with, or better than, those in the UK or USA. They save money by running 500 tests a day keeping the average cost down, and they can negotiate better deals with suppliers because of the volume of products they require. They do without heavy administrative overheads on bureaucrats. Because they have very skilled surgeons at work they can perform them quickly. The Narayana Hrudayalaya hospital still manages to see a tremendous number of patients for free or at discount rates and provides care comparable with The US and UK. They also train specialists there, offering 19 postgraduate programs.<sup>17</sup>

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<sup>17</sup> Charles Silver and David A. Hyman, *Overcharged: Why Americans Pay Too Much For Health Care (1st Edition)*, (Washington, D.C.: Cato Institute, 3 July, 2018), pp343-345.

## **9. To attain knowledge, add things every day. To attain wisdom, remove things every day.**

Imagine your friend complained that despite having gone to the doctor over and over he couldn't get rid of his darned migraines no matter how many painkillers he took. You ponder it over but can't think of anything helpful to say so you just offer a few words of consolation. Later, in the evening, you overhear the same friend shrieking and smashing his head against the wall repeatedly following a stressful argument on the phone. All of a sudden, you suspect you might know what is causing the headache.

See, I have nothing against prescribing pharmaceuticals for diseases, but the thing is – before you prescribe *any* treatment, wouldn't you first want to find out if there was anything harmful the patient might be doing to create their symptoms in the first place? Or maybe there is something they *ought* to be doing that they are not which exacerbates their condition unnecessarily.

You can't easily fill a bath while the water is draining; and filling your basement with food for the winter while you have a rat infestation will only make it worse.

As a society we are obsessed with adding things. We want to add another room to the house, or another zero to the end of the balance in our bank account. And why not? It's good to be opulent. The problem comes when this obsession extends to dealing with our health. Everyone wants a magic bullet. They want to take a pill or get an injection that will fix them. Even when they go outside of mainstream treatments, they are usually looking to buy a

supplement or start adding some superfood to their diet. What they *don't* want to do is eliminate. Eliminate bad foods. Eliminate their bad habits. Eliminate stress factors. Fast or go on a liquid diet to give their digestive system a couple days rest to clear itself out. You see, people *used to* get sick because they were too poor to eat well. Now they get sick because they're so rich they think they can't live without constant access to the worst sources of calories. An old saying goes, "A man lives on a third of what he eats. On the other two-thirds live his doctor."

In a sane society, the first thing that would happen when you went to the doctor for an ongoing condition is that they would take a profile of your habits to see how they were contributing to your health. They would tell you want to *eliminate* rather than adding pills and medical treatment. Excessive junk food, alcohol, tobacco, stress and drugs. Including harmful pharmaceuticals!

Then, they would work to find out if there is anything in your body that shouldn't be in there which might be exacerbating your condition... Do you live in a house with rising damp, for example? Are you breathing in mold or synthetic and chemicals that are toxic? Are you suffering from heavy metal poisoning and need chelation? There are so many toxic chemicals in our food, air, water, and the cosmetics we rub into our skin these days, and these put an additional strain on our system which has to remove them or store them somewhere to keep us safe.

Mainstream medicine currently denies that detox protocols can reverse disease, but as someone who has first-hand experience, this strikes me as a blind denial of

reality. For example, we know that some chemicals are toxic, and that they can accumulate in the tissues. We also know that every cell in the body must create metabolic waste to run. The hypothesis of detox is simply that if these waste products are synthesized faster than they are excreted through the detoxification channels of our mouth, nose, skin, bladder, and colon, then they back up in the cells and cause illness as well as attracting mold, fungus and bacterial forms that feed upon them. It's simple and intuitive. And in a society where the average person gets 60% of their daily calories from "ultra-processed" food, very prevalent. Various detoxification protocols have been shown to increase the quantity of various metals purged from the body through the urine. I, myself, have reversed conditions through detox protocols and seen dozens of others do the same. Seeing is believing.

Only after the doctor had made sure that your condition was not a result of your being poisoned either by your own waste (autointoxication), or by external agents, *then* would they start to consider whether anything needed to be added. But rather than start with drugs, they would begin by checking if your body was lacking in any of the basic elements which a biological organism needs to rebuild its tissues and stay healthy. You see, drugs don't have any nutritional elements in them. There is no such thing as a statin deficiency, or a deficiency in NSAIDs, or an SRI deficiency that is causing your depression. But multiple conditions can be caused by one single nutritional deficiency.

Just as you can't build a house without lumber, bricks and cement, you can't build healthy cells, tissues, organs or a

healthy body without the necessary materials. How are you supposed to stay healthy if you are lacking in some essential building blocks or micronutrients? It seems utterly insane that mainstream medicine will only look at nutrition once you get scurvy.

Not only that, but mainstream sources admit that doctors receive little or no education in nutrition. Typically, medical students are getting less than 20 hours of nutrition education over 4 years, and even most of that is of limited clinical relevance. Many receive none whatever. Am I mad for thinking this is crazy, or is it the rest of the world for allowing it to continue?

In *The Kellogg Report* (1989), Dr. Joseph Beasley explained how a deficiency in just one nutrient – Vitamin B3 – would impair the absorption of Vitamin C, which would impair the absorption of iron, which causes excessive copper absorption, which inhibits nickel metabolism, which in turn adversely affects iron metabolism and so on. Nutrients act in concert with one another. If all this can happen from a deficiency in just one nutrient just think how much illness may be caused simply by the anti-nutritional junk food most people consume every day. In addition to that our soils are significantly depleted of minerals compared to in the past. There weren't many minerals in the soil in the first place, and they were by no means evenly distributed across the planet, and due to intensive farming methods, we have less than ever. Every now and then you see a report in the newspaper saying you'd have to eat many more apples, carrots or tomatoes to get the same nutrients that your grandparents got from one.

In addition to that, the micro-organisms in the soil are required to pre-digest the minerals so that plants can absorb them. Herbicides and pesticides kill them off, as well as the microorganisms that make up our digestive flora and are meant to help us absorb the nutrients from the food we eat.

Only after looking at causal factors like nutritional deficiencies, excessive toxicity, poor diet, lack of sleep and exercise, excessive stressful and what have you would *adding* medical treatments to supplement lifestyle changes be considered. That would mean we actually had a *healthcare* system rather than one that was merely profiting out of prolonging sickness.

The logic of this is simple. You can spray the cockroaches in the kitchen with all the poisonous chemicals you want, but so long as there are a couple of weeks' worth of dishes in the sink, they are just going to keep coming back bigger and uglier. If you clean out the kitchen sink, wipe down all the worktops, and take out the trash – suddenly something magical happens. The cockroach infestation goes away all by itself

For some incomprehensible reason, we are not training doctors to *think about* – let alone *attend to* – those elements which are fundamental and essential to human health before treating the symptoms arising from their neglect. As far as the system is concerned, if you're not sick, you're healthy enough. If you *are* sick, it's too late to look after your health anyway, now it's just time to take drugs.

## 10. The Value of Detox.

By way of analogy, let's compare your body to your family home. You have a kitchen in the back, and there are two trash cans in your garage which you drag out front each week for the garbage truck to drag away. For years this system was working just fine. Each garbage can could hold 4 bags of garbage and your family only produced an average of 5 bags of garbage a week. But as the kids got older and you slowed down you got lazy and stopped cooking so much in the house. The kids decided they didn't like fruit and vegetables too much anymore, and you couldn't be bothered arguing with them or trying to convince them to eat healthy. Plus, you were making more money anyway. So, you started ordering takeaway more often. A few times a week you'd order pizza or Chinese. All the packaging took up more room in the trash can – at least one extra bag a week. Besides, when you went shopping you spent much less time in the produce aisle and looking at the butcher section for fresh meat and fish. You grabbed far more packaged, processed food off the shelves. Those took up at least another couple extra bag of garbage a week as well. These habits went on and escalated. At first you didn't notice anything, because the kids always took out the trash anyway, but after a while there was a strange smell coming from the garage. Then after a few months not even the kids wanted to go in there to take the garbage out! The whole place was infested by rats!

Now let's look at the body and see what's happening with all people who are sick. When you were young and eating well and taking regular exercise the garbage truck was coming once a week to take away two trash cans full of garbage and you were only filling one of them a week.

Then you got older and lazier. You started eating more processed food, and now you were producing 6 bags of garbage a week. Then you were drinking on weeknights instead of only at weekends and now you were producing 7 bags of garbage a week. And when you drunk you smoked inside and now you were producing 8 bags of garbage a week. You went to the doctor to have a look and find out what was wrong with you, but he didn't understand the concept of auto-intoxication (self-poisoning) so all he was able to do was give you some drugs which alleviated some of your symptoms, but the drugs were also poisonous and had side-effects. Now you were producing 9 bags of garbage a week.

You may have been able to handle those bad habits, but then you stopped taking exercise because you felt too tired. So, the garbage truck was only coming every 8 days instead of every 7. Then you stopped taking walks in the park and going on camping trips because you couldn't be bothered driving out the city, so the garbage truck was only coming every 9 days instead of every 7. Then you stopped drinking enough water because it bothered you getting up to pee all the time, so the garbage truck was only coming every 10 days instead of every 7. Because you were eating a lot of dry, processed food instead of high fiber, high water-content fruits and vegetables your bowels did not move very often and now the garbage truck was only coming every 11 days instead of every 7. Gradually your detoxification organs and filtration systems– the intestines, liver, kidneys, skin, blood circulation and lymphatic flow – became impaired themselves because they were also full of backed-up metabolic waste. And eventually the garbage truck was only coming once every two-weeks!

The mainstream doctors say you just get sick because you were infected by a bug, but we say you just got infected by bugs because your body was already sick. Your tissues attracted them because they were full of food for them to eat. The toxins from what you eat, drink, rub on your skin and breathe are poisoning your cells, making them a hospitable environment for germs, and then when the germs come in they start eating and pooping more metabolic wastes out into your body – creating your illnesses!

In light of this alternative understanding, a lot of what is *taken* to be disease are actually just symptoms of the body's natural tendency to clean itself of particles it doesn't need and heal. In other words, they are not symptoms of disease, but symptoms of cure.

A running nose is the body's attempt to mobilize the swift removal of cellular wastes and unwanted microorganisms through the nose. The mucosal cells of the body will spit out mucus in an attempt to trap invading microorganisms and toxins in a spider web to pull them up into an elimination route, such as the nose or the mouth.

A fever is the body's attempt to speed up all metabolic processes by increasing the temperature of the body. Suppressing it with pharmaceuticals is blocking the self-healing process. So long as the fever is below 105°F (40.5°C) taken orally then while it may be uncomfortable, it is not dangerous. If it does start to reach dangerous temperatures, then the risk of harm should be taken seriously. It can be treated by bathing the body in cold water. All sugar should be eliminated during a fever,

including fruit juice and honey as it makes the immune system weaker when someone is ill. Fasting is a better option still. All animals fast when sick, drinking only water.

Inflammation increases the blood flow to an affected area. Like all symptoms, it's the body's own attempt to heal itself. One should treat the cause of the inflammation rather than the inflammation itself.

Diarrhea is a toilet flush mechanism to get the stuff that is not needed out of the colon.

There is not much money for big pharma in prescribing a detoxification program. In fact, doctors are *forbidden* from prescribing anything other than pharmaceuticals or surgery, so even if they did know that these things are helpful – there's not much they could do to raise awareness of them.

I, myself, have had some considerable experience with fasting, juicing, juice feasting and experimenting with periods on a raw food diet and can attest to the benefits. I reversed a skin condition that the mainstream doctors had no cure for; my digestion improved radically, and so did my energy levels. I had a lot of food allergies that I mitigated significantly. I had felt enervated and thought that life wasn't fair because everyone could eat junk and I couldn't even have a couple slices of cheese without getting a bout of eczema. When I went on a fasting retreat there were people there who reversed skin conditions, kidney pains, digestive issues like colitis and IBS, hypertension, diabetes, and even cancer, usually using only a combination of fasting and a "detox" diet.

## 11. Tubes in Trouble!

The human anatomy is all just a series of flowing tubes – the blood vessels, the lungs, the nerves, the alimentary canal, and what have you – each of the vital organs are made of tubes. So long as all the tubes are flowing like a river, you're fine. But when the tubes get blocked, constricted, smashed, cut, or balloon out... then you've got your health problems.

If you had a heart attack or stroke, then you had a blood clot and couldn't get any blood up to your brain. You had a plumbing problem. You had *tubes in trouble*, because you ate the wrong food and got arterial plaque which thinned them out and raised the pressure until something burst.

This outlook on disease is so enlightening. An aneurysm is the result of a blood vessel tube that became weakened in its lining and ballooned. A stroke is a blood clot in a blood vessel or artery tube in the brain, shutting off blood flow and oxygen to the brain cells. Constipation is severe impaction of the intestinal tube, leading to abdominal pain. Heart disease is the blocking or obstruction of the coronary artery tubes that lead to the heart tissue.

You have congestion? That's the tubes of the lungs being backed up by excess waste products. The uncomfortable symptoms of coughing up mucous, sinus drainage, sweating and intestinal diarrhea are the body's built-in purging mechanisms for tubular drainage of acids, parasites, mucous and toxins. The common cold may be nothing more than the body's healing crisis response to a viral infection causing mucous secretions in the sinus

tubes, lung tubes or intestinal tubes. If you try to stop these symptoms with pharmaceutical you may be blocking the healing process itself, as well as adding more poisonous chemicals for your body to try and purge.

Eating the wrong foods, that's going to turn your body fluids thick, over working the heart, lungs, kidneys and liver, and accumulating as sludge in the blood vessels, arteries, veins, capillaries, and micro-vascular tubing. That's what gives you tubes in trouble.

What people are really dying from is things like their own waste matter backing up in their tubes. You're filthy inside because the sewage system that's supposed to clean all your cells isn't able to clean out your waste as quickly as you produce it. That's why fasting is in, now. People are discovering that if you give the body a rest it can finally catch up with the backlog of garbage you've been accumulating as a consequence of what you've been stuffing into your mouth.

So ultimately, when most of us die, it's going to be largely our own fault! Due to our very own choices! We can blame society, of course. After all, we have all been indoctrinated into believe that disease is something that just happens to us when we're unlucky. But where's that going to get us, blaming society? *We are part of society*, and if we want *society* to be responsible, then it's high time *we* took responsibility for ourselves and the ones around us. It's our responsibility now to create a responsible society.

## **12. Basic Physiological Needs.**

Because the doctors are not going to do anything about it, we now need to take health into our own hands. This list is not exhaustive but in the healthcare system of the future, hopefully the doctors will help us with these.

1. Nutrition. Make sure you are getting a full complement of trace minerals, 16 vitamins, 12 essential amino acids and 3 essential fatty acids in your diet. If necessary, use high quality supplements, but do your research because most commercial brands are garbage.
2. Water. Make sure you are drinking enough high quality, filtered water. It's important to get a lot of water from food though, because this goes all the way through our digestive tract which rehydrates the whole system. Our stools should be 75% water which means anything that you eat that is less than 75% is acting like a sponge in your system, dehydrating you. In other words, you need plenty more fresh fruit and vegetables and less bread, pizza and corn chips.
3. Fiber. There are stacks of studies showing that most people's health would improve dramatically if they would just add a little more fiber to the diet. Due to all the highly processed "food" we have been eating, most people are just getting dead junk with nothing to feed their microbiome. Get at least 35 grams of fiber a day. Eat fruits and vegetables.

4. Exercise. Enough of the right kinds of exercise including cardiovascular training, resistance and strength training, mobility, and flexibility training. Some experts have said that exercise is not exactly an anti-depressant – but rather, that, if you don't take exercise, you are bound to become depressed. Our ancestors did extreme physical activity *most days*, including working on a farm or going down a coal mine. The body was made to move and won't do well without enough movement. Even the simple act of walking significantly improves circulation through the limbs and aids digestion by moving the bowels around in the body.
5. Oxygen. Oxygen is essential to bond with metabolic wastes like carbon and take them out the body. Get lots of fresh air. Learn to breathe properly through the nose into the bottom bulbs of your lungs. Oxygen therapies like hyperbaric chamber or ozone therapy can help with many conditions.
6. Emotional wellbeing and relationships. A famous internet meme goes: “Before you diagnose yourself with depression or low self-esteem, first make sure that you are not just surrounded by assholes.” In some cases, talk therapy and other interventions can significantly improve people's mental and physical health. You can also take up yoga and learn to meditate to reduce stress.

7. Microbiome support. Our quality of life is strongly dependent upon the trillions of tiny “good” bacteria that inhabit and even make up our body.

Modern living seems to be taking its toll on the gut microbiome as many people are not coping with foods our grandparents used to eat. It is maybe partly due to the overuse of antibiotics, and also to the increased use of pesticides in our food – both of which kill microorganisms indiscriminately. Poor gut health is linked to anxiety and depression as well as a cause of physical disease. Plus, if your digestion isn't all there, how are you going to absorb the nutrients from the food you eat? You are bound to end up feeling sluggish and lifeless.

You can research probiotics and prebiotics to find out which ones might support your health. Pick a good brand, because when they did studies on some of the commercial ones, they found most of the bacteria were dead!

There are some of the things that end up in our body are more difficult to remove than our standard metabolic wastes. When we had a natural diet rich in fruits and vegetables these came pre-packaged with all the enzymes, we needed to digest them intact. But once we started to process our food, things changed. Processing food is literally killing off enzymes in the interests of increasing shelf-life. Components of highly processed foods can stick around in our bodies for days, weeks, months and even years, creating inertia within the system. Digestive enzymes can aid the body in breaking down and clearing up excess stored waste from highly processed foods in our digestive tract, blood and cells.

8. Collagen support. Collagen is used to build the connective tissue for almost all the structures of our bodies, including our heart, lungs, arteries, joints, internal organs, hair, nails, and you name it.

As we age our collagen production tends to slow down and all our systems are affected by that. Our muscles and skin tend to sag, our bones lose their density, joints and ligaments become weaker, organs and arteries are affected, and our cartilage becomes thinner. Then we are told we need a hip and a shoulder replacement.

You can get some of the collagen you need from eating animal products like chicken feet, but it's not very metabolically efficient. The body first has to break it down in the digestive system, reabsorb it, take it to the exact places where it's needed, and then reassemble it into the exact structures your body needs to repair itself.

Clever scientists learned that if they break down collagen into its most basic building blocks, then it is way easier for the body to assimilate it and put it to work rebuilding our systems. That's why you buy *hydrolyzed* collagen. If you go on the internet, you will find *countless* testimonials of people with before-and-after x-rays showing complete reversal of the need to replace hip and shoulder joints with the right collagen support.

The highest quality hydrolyzed collagen supplements are made from cattle hides. If you're a vegetarian (like me) don't worry, because collagen is a biproduct of the leather industry. It would be going to waste anyway if we did not consume it. Remember to get an organic, grass-fed brand as it does make a tremendous difference to the quality of the product. Raw unprocessed collagen can

contain almost all of the essential human amino acids, including glycine, proline, hydroxyproline, glutamic acid, alanine, arginine, aspartic acid. It doesn't have tryptophan so get that elsewhere.

How much? Dosage varies from 2 – 6 tablespoons per day, blended in juice or just water. If you have acute conditions, injuries, arthritis or are trying to avoid a hip or shoulder replacement you can take it twice a day instead of once. You should see pain relief after two months, and you may get lucky if you persist for six months and reverse your condition.

9. The good kind of fat. Our bodies require the correct kinds of fats to build the walls of our cells. Most of the fats we are eating are damaging and dangerous for us. If you consume bad fats like most “vegetable” oils (seed oils), canola oil, sunflower oil, and margarine then your body needs to use them to make your cell membranes, and what you will get is leaky cell walls that don't keep nutrients in and admit toxins too readily.

You will not get the essential fatty acids you need which creates cravings for the worst kind of carbs (like processed sugar) and will drive you to eat badly. Even a lot of olive oil today is unfortunately faked! In fact, when we look at the statistics, we find that more olive oil is supposedly sold than produced – which is a little suspicious!

To avoid the biggest landmines, don't buy items with hydrogenated or partially hydrogenated on the label – those are tasty (toxic!) trans fats.

Cold-pressed flaxseed oil has been shown to improve cell-membrane integrity, enhances oxygen respiration and may reverse cancer process to some degree. It's a cell-membrane medicine! Have one tablespoon of cold-pressed flaxseed oil every day. Keep the bottle refrigerated in the dark and consume it within three weeks once opened to avoid it going rancid.

10. Oral Chelation. When we consume refined sugars the lining of our arteries become inflamed. They attract oxidized (hydrogenated) fats, and this debris sticks onto them and eventually becomes infiltrated with calcium. At this point we call it plaque. Because plaque is not soluble in water, we may need some extra help to remove it. Same goes for synthetic chemicals, as well as heavy metals like cadmium, chromium, mercury, lead and aluminum, which many people now think may compromise the functionality of the body.

It is alleged that certain chelators, taken orally, can chip away at the plaque. I will tell you what some of them are but do your own research to get details. Chlorella, alpha lipoic acid, garlic, zeolite. sodium alginate, raw cacao (food-bound magnesium and chromium), activated charcoal.

11. Minimize environmental toxins from the air, water, food, pharmaceutical drugs, and cosmetics rubbed on the skin and hair. A good guideline is *the body isn't designed to have anything in it that it is not made from*. If you can't pronounce the name of a chemical ingredient, it's probably not for human consumption! If you can fast periodically, drinking one large glass of filtered water an hour

for a minimum of twelve hours per day, so much the better. If that is too strenuous for you at the moment you can go on a juice cleanse to detox instead, drinking between three and thirteen glasses of freshly juiced organic produce every day.

If you are interested in attending a detox retreat with me where we will drink tasty, healthy, juices; do yoga and light stretching; and hang out with amazing people who are also taking their health into their own hands let me know: [antony@beyourselfandloveit.com](mailto:antony@beyourselfandloveit.com)

12. Stress Management. Stress has been called “the biggest killer.” A raft of recent studies claim that stress is a greater predictor of early death than what you eat, how much you exercise, whether you eat a diet high in cholesterol, and even whether you smoke or not!

Stress has been linked to all of the most common causes of death and implicated as a causal factor in as much as 75% of disease. For example, when stressed, the body manufactures adrenaline which draws down vitamin c which causes vulnerability to heart attacks.

In response to stress, the muscles tighten and blood flow is decreased to the joints. This compromises digestion and makes it harder for the blood to remove waste and supply the body with oxygen. Stress also lowers the body’s natural defenses against illness and disease by taking it out of the “rest and digest” mode in which it conducts repairs into “fight or flight” more in which it prepares itself for crises and limits the function of non-emergency functions like the immune system.

Stress causes relationship problems as we are more reactive when under stress and more likely to find ourselves at odds with loved ones, family members, our spouse, or kids. Our ability to communicate effectively is compromised and we are more likely to be combative. We simply were not intended to be stressed too often and for so long, but we have made it normal. Hectic modern lifestyles drive people to reach for anxiety medications, but these come with side effects ranging from heart problems and hypertension to tremors and seizures. Wherever possible we want to take our health into our own hands and learn to improve our ability to self-regulate our moods.

The number one cause of early death is stress. Stress increases heart rate variability. Heart rate variability is where the amount of time between your heartbeats fluctuates slightly. If there is no variation in your heart rate while you are inhaling versus when you are exhaling, then you are in a high rate of stress! The effects are so pronounced that there has been talk of health insurance companies looking into measuring heart rate variability to predict the life span of clients and charge them accordingly. This may prove to be a double-edged sword, on one hand people in an already difficult position may be forced to pay more, on the other hand it may raise awareness and prompt people to take on better habits.

A treatment you can self-administer to improve your heart rate variability is to take a series of breaths that are five seconds in and then seven seconds out. This helps take you out of the stress response. Journal, meditate, exercise, walk round the block, phone a friend. Find out what works for you and make a habit of it.

A couple of other words of advice for would-be parents:

1. Make sure that when your child is born you don't let them cut the umbilical cord until it turns white. The baby needs the blood more than the private hospital who are likely to sell it for stem-cell research! It's a huge source of health and nutrition.
2. Don't circumcise your child. It can be traumatic. The foreskin is a lip and was given by nature for a reason! Selling foreskins is also big money, which is why this still goes on and there are lots of lies and propaganda about it saying that circumcision is healthy and beneficial when it isn't.
3. Look into having a healthy home birth if possible.
4. Read books like *How to Talk so Kids Will Listen and Listen so Kids Will Talk* by Elaine Mazlish and Adele Faber and *Parent Effectiveness Training* by Dr. Thomas Gordon to learn excellent communication skills for dealing with conflicts at home and creating an emotionally nurturing environment for your child. This will make all the difference when it comes to how emotionally nurturing the home environment is for your child and will make a great impact on their health and innate sense of well-being when they grow up.

Any questions, email: [antony@beyourselfandloveit.com](mailto:antony@beyourselfandloveit.com)

## ~ Next Steps.

If you are interested in attending a detox retreat with me where we will drink tasty, healthy, juices; do yoga and light stretching; and hang out with amazing people who are also taking their health into their own hands let me know: [antony@beyourselfandloveit.com](mailto:antony@beyourselfandloveit.com)

Everything you have read here are excerpt from my full-length upcoming book *Big Pharma – None Dare Call it Quackery*. Join my mailing list at [www.7pharmamyths.com](http://www.7pharmamyths.com) for regular articles and to be the first one to know when it comes out. There is also an expanded paperback of *7 Pharma Myths...* available on Amazon. I wanted to keep the eBook lean but I also had lots of other great material I wanted to make available asap. Please buy a bunch of copies and hand them out!

Writing is lonely and often goes unpaid. If you think this information is useful and would like to contribute voluntarily, you can at: [www.7pharmamyths.com](http://www.7pharmamyths.com)

If you like what you read, you can find more at: [www.terrainscience.com](http://www.terrainscience.com) who kindly publish my work alongside that of other great writers who are talking about natural health and exposing lies and deception used to propagate dangerous and ineffective treatments.

You can follow my podcast *Be Yourself and Love It!* for lots of practical information on improving your life.

When I am not writing this, I work as a psychotherapist. For consultations and counselling services, email: [antony@beyourselfandloveit.com](mailto:antony@beyourselfandloveit.com)