Light as Medicine: How IV Laser Therapy Fits Into Lyme Care Transcript

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Podcast Introduction and Guest Welcome

We are light beings and every cell in our body has photon receptors because a lot of the line people who have joint pain, it's due to the spirochetes, like kind of hiding and we're embedding there.

They want to feed on the hyaluronic acid and it degrades cartilage. The body circulates your entire blood system. in about one minute. So a three-minute treatment, you have treated the entire body three times.

Less is more, and then you can actually overshoot the mark. Most people have seen the movie Lord of the Rings, right? The character Gollum, he had been living in the dark and in a cave for forever.

If you walk into that cave with floodlights, it hurts. Yeah. Right. But if you walk in with a candle, you might be able to engage. So by the time patients come to us complaining of neurodegenerative conditions, we're already kind of behind the game.

What if aging isn't about slowing down but leveling up? I'm Dr. Isaac Jones. This is the Longevity Leaders podcast. Welcome everybody to the Longevity Leaders podcast.

I'm your co-host, Dr. Rudy Euler.

Overview of Weber Endolaser Capabilities

Yeah, so Weber Endolaser is actually more than just infrared and red. We have six different lasers, true lasers not LED, that can be run intravenously, interstitially and also intraarticulary in addition to being able to be used topically.

So it's really a very diverse and adaptable system for both cancer care, regenerative medicine, longevity care chronic complex illness. Amazing. Okay.

So walk me through what it looks like to do an intravenous IV with light there. Yeah. I always like think of it as like we are light beings and every cell in our body has photon receptors.

When we harness the power of the sun, essentially, we're taking the best studied wavelengths from light and putting it directly into the body via the the bloodstream with intravenous laser.

And so each color will turn on different physiological responses within the system.

How Intravenous Laser Therapy Works

So a good example is yellow. Yellow is our most gentle color in all of the six colors that we have. To back up, we had six color. We have red and infrared, which you already mentioned.

Then we also have green, yellow, blue, and ultraviolet. A lot of people are familiar with the red in infrared from the longevity space with regeneration.

They're also usually very familiar with ultraviolet because it's been used for a long time with Major Auto Heme and UVBI pairing them together. But now we brought in yellow, blue, and green, which also do other things.

And just to give you kind of like the cliff notes, because there is an enormous amount of published peer-reviewed research on all of the different colors and how they're used in photodynamic therapy and photobiomodulation.

But yellow is sort of your feel-good color. So it's the color that increases serotonin production, helps enhance vitamin D production. It's one that when people have a lot of anxiety and their nervous system is closed and shut down, is a very opening color, so we'll often start with yellow.

to then introduce other colors or other therapies because the body becomes much more receptive when the nervous system moves into parasympathetic. It's also a great closing color that just sort of like, one of our nurses, nurse Andy Rainville will say, it's our aloha color.

Its the knock on the door saying, can I come in? And it is also the goodbye, have a nice day. Okay, all right. Green we often use for enhancing lymphatic flow.

Blue enhances nitrous oxygen production and helps with modulating pain. And then we have the ultraviolet, which people are obviously familiar with because it disrupts biofilms.

It helps reduce the body burden for viruses and bacteria and molds. There's just a lot of ways to tailor each of those colors specifically to your patient and the other protocols that you're creating to support them.

Oh, that's pretty amazing. So what you asked, though, was how do we use it intravenously? And so basically it's a simple catheter insertion into the vein.

We use a 22 gauge catheters, which is not super large, but does have to be that size to accommodate the sterile fiber optic cable that is then threaded into So you can run this treatment with just the sterile fiber optic and get a really amazing treatment.

Using Light with IV Nutrients and Pharmaceuticals

Or you could piggyback it on other IV nutrients and pharmaceuticals that are photosensitizers. And so then once the body has taken out those nutrients or pharmaceutical, The different colors will hit different spectrums of absorption that enhance the benefits of those treatments as well.

So again, just two different ways. We have what's called a Y port that allows you to run both fluid and the light therapy at the same time, or you can run them sequentially.

Very interesting. Yeah. OK. So I mean, we run IVs at our clinic. We do high dose vitamin C, NAD, B vitamins, et cetera, so this is something that we could just load right into the back end.

I guess you would recommend before the IV if you're doing sequential? I would definitely recommend that you do your nutrient or pharmaceutical IV's first because you want the cells to take up those.

And then the light will enhance the benefits of that. Now an exception might be you might want to run yellow on somebody who's just really shut down, open them up first, then run their other IVs, and then come back to the laser and run the rest of your treatments.

Like I said, I really think it's important that clinicians who are using this therapy are really thinking critically about their patients. This is not cookie-cutter medicine.

It really is precision medicine, and so it's you as a clinician deciding with your patient how to best augment their therapy and treatment. So what works best for one person may not be best, for the next person, right?

But yeah, you could do it either way. Very interesting. So, I mean, you mentioned IV. I'm also curious about intraarticular. Yeah. How do you do intra-articulars?

So I do a lot of orthopedic injections. One of the reasons Dr.

Intra-Articular Laser Injections for Joint Care

Klinger brought me into his office was to do ozone joint injections because a have joint pain, it's due to the spirochetes, like kind of hiding and embedding though.

They want to feed on the hyaluronic acid and it degrades cartilage. So when you inject other things into the joints like ozone or prokane or people use all manner of things.

Right. Hyaluralic acid. you can augment those benefits with the laser as well. So Weber Medical has designed sterile packages with needles that are specific lengths for different joint areas.

Obviously, the hip joint needle is going to be longer than the one for the knee, and then the fiber optic matches the length of that needle so that just the very tip of the fibre optic is protruding past the end of the needle so that the entire joint area is being bathed in that light.

So for like a Lyme patient, we might wanna drop the ultraviolet into the knee joint to help then enhance the benefits of breaking down those biofilms, lowering the body burden.

And then we follow with like blue to modulate pain or red or infrared to enhance regeneration. If you're a medical doctor, nurse practitioner, chiropractor, or other health expert that's stuck in a broken system, there's a better way.

The Freedom Webinar shows you a proven five-step system to build a seven-figure virtual health practice or how to modernize your current brick and mortar practice without the burnout.

Learn to create high ticket programs, automated income, residual revenue, and attract clients ready to work with you. Book your million dollar strategy session today by clicking the link in the description.

I find that really interesting. So with the intraarticular injection, we're able to go in with that fiber optic. How long are we keeping that in there to be able do its thing to address some of these spirochetes infections and shut them down?

Yeah. So, I mean, obviously, again, it's going to be practitioner-dependent from what your coupler zone is. I am a little bit risk-averse, so I don't like to leave the needle in the joint too terribly long.

Usually, if I'm going do PRP or something, right? I'll inject procaine first. A lot of physicians are opposed to putting any kind of anesthetic in a joint with PRB.

Procaine is an entirely different ballgame than lidocaine or marcain or fupivacaine. I'm so totally comfortable with propane because I do a lot of neuro therapy and as a neuro therapist I like to reset those cell membrane potentials.

Treatment Timing and the Principle of Less Is More

I want to make the joint a little bit more comfortable So I'll do propene first often followed by some ozone or PRP and then I might decide well I only want the needle into that joint for maybe 15 minutes, right?

Okay And so then if I want to run multiple colors, I'm going to divide the number of colors by how much time. Sure, if i'm running, say, each color three minutes, i've got six colors.

That's 18 minutes. Right? If iIm just gonna run red or infrared for regeneration, maybe I split that and I do six and six, and only do a 12 minute treatment.

So when you think about when we're doing the intravenous, the body circulates your entire blood system if you're an average adult with normal blood pressure in about one minute.

So a three-minute treatment, you have treated the entire body three times, right? So if I'm doing a 3- minute treatment in a precise maybe even ultrasound guided injection, and I leave that light therapy on for even a minute, that's a really profound treatment.

So I think one of the really important things for practitioners to start adopting and teaching their patients is that less is more and that you can actually overshoot the mark.

There is a law of diminishing returns with all of therapies we do, including laser light. Just like you wouldn't lay out in the sun all day, you also are not going to run laser for vast amounts of time without actually causing more harm than good.

So a brief couple of minutes is more than enough to get a really good biological response. That's awesome. And with Lyme, co-infection, what kind of results are you seeing with the integration, obviously, of things like ozone, along with laser, or the light therapy, whether that be IV, intraarticular, and then you said do transdermal as well?

Yes, you can also use it transdermal. We have different cables that are blunt tip so they don't penetrate the skin. And we have like different adapter heads to be able to thread those cable into them so that you could use them more like a wand to radiate broader areas.

Okay, all right. we also have little stickies. So if you wanted to do acupuncture points or specific points of pain, You could also attach the laser light directly to those.

For some people you're not going to penetrate. Right, right, You're not going to penetrate the skin with a needle because of whatever thing is going on with them, right?

Especially children sometimes. But different wavelengths will have different depth penetration as well. So sometimes you need that intraarticular interstitial to actually get the light deep enough into the body to be as effective as you want it to.

Transdermal and Home Laser Devices

I'm sorry, I forgot the question. Well, no, I'm really curious about its application for Lyme disease and co-infections. So what I was going to say is we already get really good results with a lot of the protocols that we do, especially IV protocols and injection protocols.

But when you layer on light, you're building in a synergistic effect. What I have seen and what most of my colleagues who do similar types of approaches to Lyne Care is that you get better results faster.

So maybe when you were before having to do a series of six treatments, now maybe we can do three or four treatments and still let the person to the same end result, right?

The other thing too is that sometimes your patients will be so sensitive when they're this sick that you can't start with a really heavy protocol, so when I mentioned that yellow is our most gentle color, I've also had Lyme patients where I hooked them up to yellow only, And we dialed down the power from 100% to 10%. And I still had a patient once that was only able to tolerate about three minutes of treatment before she needed it turned off.

And it's like a Herxheimer kind of like feeling or reaction? So what I tell people is I was like, think about it this way. Like most people have seen the movie Lord of the Rings, right?

The character Gollum, he's been living in the dark and in a cave for forever. If you walk into that cave with floodlights, it hurts, right? But if you walk in with a candle, you might be able to engage.

I love that analogy. So we want to walk gently with our patients that have been ill for a very long time, and we'll start gentle and work up to other therapies.

Light therapy can be a really gentle, nice way of tiptoeing into more aggressive protocols as needed. The other thing, too, though, is thinking about the blue and the green and ultraviolet, and that greenish thing enhances lymphatic flow, ultra-violets killing things off.

If your patients in monkteries are not open and they're not having their kidneys filtering and their liver and all of those things working, I don't want to run a lot of movie and do a lotta urzone, because they still have to clear all that out, right?

So maybe I'm gonna start with yellow and green, start working on lymphatics and monktaries, And then, again, tiptoe into some more aggressive treatments.

Yeah, I mean, this is such a sensitive population because you are going to be able to have those patients, although more rare, that it can handle a full-on, let's go after this.

More so, it's this stair-stepping, whether it be a finger of a binding agent instead of doing a half a capsule. So the light seems to me, what I'm hearing you say, is that number one is it's cool, we can control different aspects through the color of light, but then also the intensity of the light with your candle floodlight analogy, and then really focus those types of frequencies or the colors of that light to the intensities to be able to really walk this patient gently through that treatment process.

The flexibility there is very nice. Precision medicine. Yeah, yeah, absolutely. But to have that flexibility all in one device is pretty special too. Yeah.

And to be able to use it in so many ways. Intervenous, interstitial, intraarticular, topical, yes. We do have other devices for home use for patients as well.

So a lot of times, you know, working at Sophia in particular, patients fly in from all over the world, allover the country. They're not going to stay with us forever, right?

So they need more of the support at home. So having those home units available to them to use pre and during and post treatment can be really helpful as well.

And so what are the home unit doing? Is it just transdermal or is it? So our home units are all transdermal. In fact, the newest thing we have coming out is a new cranial device.

Cranial, Intranasal, and Pediatric Home Use

And this is true laser, so different from even some of our older devices and a lot of other devices on the market. This one is not LED. So it will actually penetrate the skull.

and will impact the brain tissue. So if you're using therapies or nutrients and pharmaceuticals that cross the blood-brain barrier, you are now able to use photodynamic therapy to enhance the benefits of that as well.

But it's great for that. But I also think it is really important that we start treating these things sooner. So by the time patients come to us complaining of neurodegenerative conditions, we're already kind of behind the game.

Oh, for sure. And so I would like to see more longevity practices and primary care doctors adopting these thing for people in the higher risk categories and getting them on these therapies sooner and having them using them at home more regularly.

and then coming into the clinic for more robust treatments. Sure, sure. I'm not sure, are you familiar with the one for the intranasal? We have that as well.

You do? Okay. So we have two different devices. We had what we call the endo band, which you've probably seen. It looks kind of like a watch. And what it does is it drives the light directly into dispersion of those light colors as well, but it has an adapter piece.

So you can plug in a piece that can then be used intranasally or into the ears or as a pad on top of. And for some of these colors they're LED and for them they are true laser aswell.

Then during COVID we came out with one that was just UV. The UV light can be use intrasnasally, or in the mouth aswe. A lot of adaptability. For its antimicrobial effects.

Those can used at home. So, you know, especially for kiddos that maybe are not going to want to get venous, You can take those shower that we call the shower head and we can Take that same laser light that We would use with the endo laser or with The ultraviolet that is made for home use and you can put it directly under the tongue and those veins are so superficial that the blood is going To pick up that for tonic energy and be able to utilize it very similar to having gotten an IV treatment Yeah.

Sorry, I keep it. No, no, go ahead. We all know that, especially during COVID times, it was really difficult to get into places to give medical care. It was difficult order products to have.

So if you have these devices at home, you can just plug them in. I'm a naturopathic physician, right? So one of the things that we were taught early on in our education was that it's physician as teacher, docere, so what we're supposed to be doing is teaching our patients how to take care of themselves at home as much as possible and to take care of their family members and these devices allow a lot of that.

Yeah, I mean, so what I'm thinking about is the superficial areas. And so you mentioned the wrist, intranasal, mouth, ears, like, because that's where we're going to be able to have the effect.

I think about kids, cause we have a lot of kids in our practice, but then of course I've got my own two kids and my four-year-old who comes home all snotty and everything.

So ultraviolet would be great for all those colds and flus and stuff that they're picking up at school and bringing home. You know, it's sort of funny.

I try to be a very compassionate, empathetic mother, but at the end of the day and you come home and your kid's like, this hurts and that hurts. And I'm like we have a closet full of Weber tools and they have learned to just go get them out and do them.

Right. It's really empowering the next generation to understand their bodies, understand what works and what doesn't work and to do it. That's wonderful.

Well, Dr. Summer, thank you so much for taking the time and walking us through this.

Support, Education, and Closing Remarks

I've learned a lot. Look forward to speaking with you more. So if people are interested in checking out the devices, learning more about IV transdermal, intraarticular, the intranasal devices.

What would be the best way for them to move forward and look into that? So Weber Medical has really transitioned to a new patient and provider support model.

And so with that, we have Luke Ferrari, and he's the sales representative for all of the United States. Okay. Then Vitality Systems, which is Tracy, she helps manage all the shipping and delivery.

So Luca sells and Tracy does all this selling. Yeah. Myself and nurse Andy Rainville, We're the educational department. Awesome. So we don't just sell you products, but we make sure that somebody is available to come into your office if you need it and or to get on a Zoom call with you so you know how to set up the machines, how do you implement them in practice.

We don' want people feeling left unsupported after they. Awesome, for a white glove service. And I mean, obviously the education is probably the most important so that you know when to do it, why to it and how to.

We don't want expensive fancy tools sitting in your office not being used. Yeah. Awesome. Well, thank you so

much, Dr. Sommer. I appreciate you. Appreciate the time and appreciate your educating our audience and all the work that your doing.

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Until next time, stay strong and live long.