Your Health and Gluten Insensitivity Transcript

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Introduction and Early Chiropractic Influences

Hey, doctor. Tom O'Brian. What a major honor this is to actually be able to do this interview. I have followed you. I've read your books, I have stalked your website, and it's such wonderful, wonderful, amazing stuff.

For the audience. Tell us a little bit about who you are and. Oh, okay. Well, what's important, I guess, is that I'm on the teaching faculty of the Institute for Functional Medicine, and I have been for about 11 or 12 years, and I'm adjunct faculty at the National University of Health Sciences and go back to my alma mater and teach whenever I can.

And, you know, I'm going to date myself, but it was, it was January 1978, and I'm just starting my professional education at National just starting and eight, the first week, there was a sign in the hallway that Doctor Sheldon Diehl, Mr.

Arizona was coming to teach on campus, and I thought, I don't know this guy. Oh, well, he's a bodybuilder. I'm all right. He's healthy guy I want to learn more about.

So I went and sat and listened, and he had a color television brought into the room and put on a stand, and color televisions were still not the norm.

So it was kind of cool to see all the colors on the screen. And, he turned it on, but turned the volume off. And then he went over to his briefcase and he took out a bar magnet about the size of an iPhone, and he held it up and he walked up to the color television.

The picture turned upside down, and when he walked away, the picture went right side up and he walked towards it. The picture went upside down and he walked away and it went right side up.

And he said, that's what electromagnetic pollution does to your brain and your nervous system. And it's called neurological switching. And these are people that say right when they mean left, they write the number three backwards.

They forget and put the E before the I, you know, I before E, except after C, and they write it backwards and they know. Oh but I wasn't thinking. But they're switched.

And you see this children that write letters backwards, they're switched. And at that time he wasn't talking about there was no such thing as cell phones that he was talking about the battery in a watch on your wrist and having a battery next to your body.

Insensitive people will trigger this neurological confusion that goes on. That was my first week in my education. Well, three weeks later, this is still January 1978.

Three weeks later, a medical doctor comes from California. Doctor Kirpal Singh, and he was teaching about electro acupuncture by vocal Bose, a German guy in the 1950s, 60s and 70s.

They came up with some concepts that were right on the money, and this doctor told us a case study. A 44 year old woman comes in. She's just been diagnosed with, adult onset diabetes.

You know, back then, we used to call it adult onset type two diabetes. We don't do that anymore because kids get it almost as frequently as adults. But back then it was mostly just adults.

And she came in and she said, you know, doctor, I've just been diagnosed with, adult onset type two diabetes, and

I've had blood sugar problems forever.

Can you help me? And he scanned her with his vocal instrument. He said, well, yes, you have type two diabetes and you have a long history of a volatile blood sugar, which will go up and then crash into hypoglycemia.

Yes, all that's true, but it all comes because you were very sick as a child and you almost died. And the virus set up shop and your pancreas. And she said, well, doctor, you're right.

I did have very volatile blood sugar, but I was never sick as a child. Yes. Were no doctor, I wasn't. I'm sorry. You were. No, no, no. You said. Is your mother alive?

Yes. Caller handed over the phone. Hi, mom. I'm at the doctor's office. I'm fine. Everything's okay. But he says I was really sick when I was a baby. Was I ever. Oh, honey, you almost died.

Your fever was at 105 and a half, and the doctor was out of town. They lived in a small town. We put you in ice baths and we put vinegar socks on. Yeah, this instrument picked it up 40 years later.

Wow. 40 years later. So this is my first month in my education, just starting with anatomy and, you know, cadavers and and biochemistry and genetics. And then the third thing that happened was about a month later.

So we're in February now. And there's a sign that Doctor Raymond Nemo was coming to campus, the founder of the Nemo technique, trigger point therapy. Now, this is the guy that taught Janet Torvill, who is considered the godmother of Trigger Point therapy.

Well, she learned from Nemo from the chiropractor Ray Nemo in the Panhandle, a Texas. So I go to listen to this guy, and he's tall and lanky. He's got skin tight, blue jeans on with cowboy boots and a hat, cowboy hat, you know, and he.

He looks like the panhandle of Texas ain't. And and, he's 84 years old and talking about trigger points. And the doctor raises his hand and he says, well, doctor, sometimes it's painful for the patient because Nemo said, you find the trigger point in you, and then he take a breath, hit it.

And that's just how he would say, you find that trigger point and you hit it. And the doctor raised his hand. You said, well, doctor, it's sometimes it's painful.

Hit it anyway. And you said, well, they fall on the floor, get down on the floor. This is an 84 year old guy with a cowboy hat and cowboy boots. Get down on the floor.

And this is my introduction to soft tissue work. Well, I, I didn't know anything about soft tissue work, but. And he did case after case after case of these critical patients that got so much better with trigger point therapy.

So at the time I was a marathon runner, I ran a bunch of marathons. And so I met some of the guys at school. We'd been in school now for about two months now.

You know, you see guys out there running and we'd run together. Sometimes it and there were tables in every room. So after the Nemo weekend, I carried oil in my back pocket.

And yeah, you got ten minutes between classes and there's tables and there was. Come here, lay down, man, let me check your gas strokes and I'd start, get some oil on my hand and then ow ow ow ow ow ow ow ow ow ow.

That hurts. So, yeah, it's good for you. Oh! It hurts! Stop! No, man, this is really good for you. I got it, hit it right, and I'm just. And these guys are screaming on the table, literally screaming on the table.

But they got better. Their stride improved. Because when you break up the trigger points, you've got to break up the membrane on the outside of a trigger point.

So your body can reabsorb all of that congested debris that makes up the trigger point. You got to break up the membrane, but when you do, you now get more elasticity back to the muscle again.

And the muscle tendon connections, because tendons aren't very elastic, but muscles don't hook to your bones, muscles hook to the tendon, tendon hooks to the bones, and you get lots of trigger points, both at the musculo tenderness junction and at the Osco Tenderness junction.

The Pyramid of Health and Whole-Body Assessment

Well, what do you think Shin splints are? Shin splints are when the muscles are so tight all the time, is pulling the tendon off the bone at a minor degree.

So the body puts more calcium and that also tenderness connection. The result is you get like tougher tissue right on the bone. Those are trigger points.

And so this is my first two months in chiropractic school. Now here we are 40 years later and in my career. Well, in my second book called You Can Fix Your Brain, that is in nine languages.

We're really proud of that. It's a fabulous book. It's number one on Amazon for weeks and weeks and weeks. It was number 1 in 7 different categories for brain and nervous system function.

I talk about the pyramid of health, and my entire career has been based on the pyramid of health. Now, one of my mentors was Doctor George Goodheart, the founder of Applied Canisius ology, which is the muscle testing.

Right. And in applied kinesiology, we talk about the triangle of health. Triangle of health is structure or emotional or chemical or emotional or, spiritual and biochemical.

That's the triangle that you have to look at for any complaint. And every ache practitioner has been taught to think that way. Well, I was privileged to have dinner with Doctor Goodheart, a year before he died, before we passed.

And, I said to him, doc, together, I don't think it's a triangle of health. And he had a glass of wine and. Well, what do you think, Tom? I said, I think it's a pyramid.

And he got this little smirk on his face. You tell me more, I said. Well, of course we've got the structure that you always have to check out structure, because structural imbalances will cause anything.

Literally anything can be caused by a structural imbalance. And we've all seen so many miracles in our practices. When you correct the fixations and get more mobility back to the spine, all of a sudden the thyroid is functioning better or, acne goes away.

Or of course, pain. But it doesn't matter the condition. You always have to consider structure as a component, contributing to the dis ease that's causing whatever symptoms they have.

Always consider structure. But it's only one part, you know. But of course we have the structure. Then we have the biochemistry. What you eat, drink, breathe and then we have the emotional or spiritual.

And we all have heard about stinking thinking. And we know the results of that over time can cause any disease, any disease. But there's a fourth one that's just come on the scene in the last almost two decades now.

And that's electromagnetic. And any condition can be caused by an electromagnetic imbalance, any condition. So I say this. So Doctor Goodheart and, you know, in applied kinesiology, when you get board certified and you're a diplomat, you get the pen and the pen is a diamond triangle that you wear on the lapel of your sport jacket or your suit.

And so I explain all of that to have a good heart. And George says, well, Tom, you're absolutely right. Absolutely

right. But I'm not giving up my pen.

He laughed. And I said, that's great, doc. Dude, I that's just fine. Thanks so much for the validation. So in my book, you can Fix Your brain. I talk about the pyramid of health, and every health practitioner needs to understand that any health condition may be contributed to, or fueled by, or even be primarily caused by any side of the pyramid.

And, well, people say, well, there's three sides to appear. No there's not. There's four. Well, no, there's only three sides to a pyramid. Yeah, but there's a base and that's your structure.

And then the three sides emotional, spiritual, biochemical, electromagnetic. And so this concept of electromagnetic energy from my first introduction, my first week in my education all the way through to today has always included electromagnetic health that you must investigate on any patient when you're not getting the results that your therapy should be producing.

Whenever you don't get the results you think your therapy should be producing, there is an emergency brake. You know, it's like you're backing out of the driveway and you say, what's wrong with this car?

The emergency brake? And you let go of the emergency brake and then you back out just fine. So whenever you're sure that this is a really good therapy and this should happen, but it's not getting the results, well, it's a resistant patient.

No it's not you're not comprehensive enough and you're protocol, you know. So we have to get out of the ego that we know best and become a partner with our patients to investigate.

Where is all this coming from? I'll give you an example of a 38 year old, bank president. Really young, smart, smart guy, heavy hitter in the world of financing.

He had been to Mayo Clinic twice. He'd been to some clinic in France. He'd been to Colombia and someplace else. No one could help him. And his wife demanded he come talk to me.

And so he, made an appointment. I see patients about once a week, and it's by zoom. I'll see one patient a week. That's it. Because I'm a Sherlock Holmes, you know, and I my time is best spent teaching others.

But I just love the interaction with patients. So I just announced two weeks ago, you know, I'll do one patient a week. And so he gets he fills out my questionnaire.

Every practitioner should consider this questionnaire is called the Living matrix. Just go to living matrix.com and check it out. And it's a I don't know 3040 page questionnaire.

The patient fills out and it'll take him a few hours. I want to know what was the birth like for you I don't know my mom. Pass. Okay. We'll ask your aunts, do a little investigative work, and if you don't fill it out, I'm not going to see you.

And so he felt, you know, because I want to know what was mom's health during the pregnancy? How many, antibiotic prescriptions have you had in your life?

What kind of problems that you have as a kid? Because all of that relates. And the living matrix is a very organized way of you accumulating a a first class history.

So the guy fills out the living matrix, and I'm going to see him in an hour. So I take a look at it. There it is. And so he gets up and he tells me all these places he's been to.

And his problem is he can't think anymore. He had to take a leave of absence from work because his brain's not working very well anymore. And he had sent me all the tests they'd done in the MRI's and, CT and the spec scan.

The Spect scan shows there's not enough blood, for fusion going into the brain, meaning the brain's not being soaked in blood the way it's supposed to be.

So he's got low perfusion called hypo perfusion, the lack of blood flow into the brain. But nobody can figure out why. And and, so, so he gets on, and I, I can't tell him the answer in the first two minutes because, you know, he's paid for an hour of my time already.

And so we get on and we're talking so tell me about your childhood. And he's a little frustrated. You know, he doesn't want to talk about it. Well, but one I know it's important.

Tell me about your childhood. He was raised on a cotton plantation in an Alabama, and I said, so, did you used to play outside in the fields when the planes would fly by and spray the fields?

Oh, yeah. We used to go out there and get the mist and we'd play in the ponds of water and. Yeah, the guy was loaded with organophosphates that had been in his body now for 30 years.

So I said, just Google organophosphates and brain function. And he said, yeah, hold on. And he said, Holy shit. You know, you just oh my God, how come no one's ever told me this?

Your body is probably loaded with organophosphate. So we ran a test on him and his antibodies. So again phosphates were through the roof. So he needed a detox program.

And I said, this is very dangerous. If you detox too quickly, you could get very sick. So I recommend you go to Swiss Mountain Clinic in Switzerland. They're my friends and they're just the best.

And they hold your hand and take care of you. All the food's organic. They have a, a michelin star rated chef, and, you're just so well taken care of.

You go there for 2 or 3 weeks and you'll be fine. And he did, and he was fine. But it was the history that gave me the evidence of where to look. Right.

So this one page history that doctors are doing is ridiculous, even if your specialty is the base of the pyramid, even if you are a musculoskeletal practitioner, exclusive, which is great, we need the best musculoskeletal practitioners we can get right.

But they're coming to you for help with their problem. They're not coming to you for musculoskeletal care. Usually, you know they've got a problem and they've heard that maybe you could help them.

So when you see the whole picture here and you think, oh, this person, this person might have some emotional stuff going on, so I'm going to fix their structure.

But this is patient. This is a doctor I've worked with before who's really good with dealing with the emotional trauma. You had mentioned in your history that there had been some sexual abuse somewhere in your past, and that's not my area of expertise, but I know that that can be an emergency break that holds back your health, that the stress hormones that we produce affect your entire body.

So that I'll work on your structure and we'll get that all working great. But I suggest you consider having a session or two with doctor so-and-so that if you're on this summit watching this summit, you're a big thinker already.

You may be a musculoskeletal specialist, which I think is great, but don't ever represent yourself as a comprehensive, functional medicine practitioner.

You don't have to be a functional medicine practitioner, but they're coming to you because they think you are the doctor that's going to fix their problem, right?

So recognize where your strengths are and recognize where it's good to punt and get some help. And if you do that, you're going to have a thriving career because people are going to say, oh, I went to doctor so-and-so.

But he fixed me right up and he sent me over to this person and she really did a great job for me, too. Right. And they'll appreciate you. So anyway, you asked me about my history, and that started with Doctor Sheldon Diehl. Mr.

Zona and Ray Nimmo hit it and and and went on from there. I love it, I love it. What what what a great introduction. I, I can't tell you that I have any nice stories like that from chiropractic school, but, except that, hold hands around the weeping willow down at Sherman.

Inflammation, Leaky Gut, and the Roots of Chronic Disease

That's great. So while I was perusing your books and your website, it seems that gluten and God help is is is kind of one of your big thing. Gluten. It seems they've in the last 20 years or so, it's all about gluten.

Gluten grain free. The the vet a few years ago said, don't feed your dogs and cats any grain stuff, grain free. And then all of a sudden, you know, you have people I hear gluten this and gluten that.

What exactly is gluten and what is the big deal? Really good question. Okay. Gluten is the category of a family of proteins. Now gluten proteins are in wheat, rye, barley, rice, corn, quinoa.

There are many different grains that contain gluten proteins. Gluten is not bad for you. Bad gluten is bad for you. And that's a really important differentiation.

Okay. And the bad gluten terms. And I'll show you why, are in rice. I'm sorry. Rice, wheat, rye and barley. Okay. The gluten in rice is okay unless you have a sensitivity to rice.

Okay. And then you you got a problem with rice? If your immune system's fighting rice, you got a problem with rice. And it may be the gluten proteins or other proteins in rice.

Or if you have a sensitivity of corn or something that's possible. But everyone has a problem with the wheat protein. So I'm just talking science. I'm going to show you the science on this.

Everyone has a problem with wheat proteins, whether they know it or not. So I'm going to show share my screen if I may. Sure. And show you some slides.

Now I just did a presentation in Brazil. A week ago yesterday. And so I'm going to show you some of the slides from that presentation. And we're going to start here.

The first thing to recognize is that all chronic diseases let me stop share. Will I talk about this all disease is inflammatory. It's very difficult to consider any disease that is not inflammatory.

I know of one, central pontine, my osis big thing, which is a salt deficiency in children that creates, atrophy in a part of their brain. And it's not inflammatory.

Everything else, as far as I know, is inflammatory. At the cellular level, the cells on fire. Right. It just depends. Is it a kidney cell or a thyroid cell or a brain cell or a heart cell?

But it's always inflammation, always. The National Institute of Health tells us eight out of the top ten causes of death in the modern world are chronic inflammatory diseases.

The only ones that are not are unintentional injuries, accidents, and suicide. But suicide is a depressive state and depression is inflammatory. So arguably it's nine out of the top ten.

Causes of death are chronic inflammatory conditions. So that's a 30,000ft view that everything that comes

everything and anything that's going to take you down eventually is a chronic inflammatory disease.

And these diseases develop over years, sometimes decades, when you don't have any symptoms. You know, when a patient gets diagnosed with rheumatoid, they just got diagnosed.

They didn't just get the disease. They've had the disease at least 14 years killing off collagen, killing off collagen, killing off collagen before they ever had a symptom.

And it's when you kill off enough tissue. Now the tissue can't function correctly. Now you start getting some symptoms. Eventually they get bad enough.

You go to the doctor and they don't can't figure it out. And the average is two and a half years for an autoimmune disease before you get the right diagnosis.

Because the symptoms are kind of subtle in the beginning. And, you know, and doctors don't look for autoimmune diseases very often, but they develop over years and years and years.

Then one day it's so bad, you know, I got to go to the doctor again. That other doctor didn't help me. And so. Oh, Mrs. Patient, you've got autoimmune Detroit disease.

Well, how did I get that? Well, it just happens. No, it doesn't just happen. My first book is called The Autoimmune Fix, and we talk all about the mechanisms that set the stage for all these diseases.

The point for today is that it's inflammation in your thyroid, killing off thyroid cells, killing off thyroid cells, killing off thyroid cells, and eventually you kill off enough cells.

Your thyroid is not functioning very well, and you eventually get the right diagnosis of thyroid disease. But the point is all chronic diseases are inflammation.

Diseases, and for almost everyone, what's going to take them down at the end of their life? What's what they're going to suffer with at the end of their life is a chronic inflammatory disease.

So if you understand that is the baseline, then always the first question is where is the inflammation coming from. And because if you can identify where the inflammation is coming from and you can eliminate that gasoline on the fire, you reduce the chronic inflammation.

Right. And we've got hundreds or thousands of cases of this all over the world. So many functional medicine doctors have large numbers of examples of this.

And we did an entire docu series called Betrayal The Autoimmune Disease Solution. They're not telling you. My wife and I traveled seven different countries, and I interviewed the world leaders, the the big kahuna in science.

And, we interviewed them, and I knew what to add. You know, I didn't say. So. Tell me, how did you get into systemic sclerosis, doctor? What was your interest in it? You know, I didn't do any of that.

I said, doctor, in your paper where you wrote about collagen diseases, and I asked specific quote, I just went right to the jugular, you know, asking the questions.

And they really appreciated. So I interviewed it was 85 interviews. Then I interview doctors all over the world who were using the principles of these scientists.

And then I asked them to bring in some patients who had followed the recommendations and reversed their Ms., reverse their rheumatoid reverse their chronic fatigue, reverse their multiple chemical sensitivity, reverse their severe sciatica, that nothing could help again and again and again.

You know, I'll never forget the, 44 year old woman in London who said, you know, I took the tube to come here today, and that's the underground train.

And it's a seven block walk from the tube station here to the hotel for the interview. And I walked and so she said, and it's not a big deal. But it is.

And then she teared up. And then we show you pictures of her. Two years ago, she was in a wheelchair. She can't walk at all. And she had eight lesions on her brain.

Today, she has no symptoms, and she has two lesions left on her brain. And we show you the MRI. Reversing lesions in the brain. A comprehensive, whole holistic health diet and lifestyle, getting rid of the inflammation.

And there's case after case after case like that. And is that the drawcard the doctor.com. Just don't spell the word doctor out forward slash betrayal and it's free.

You can watch. It's a nine part series. It's all free. We've had about 700,000 people that have watched it. And we get emails of gratitude almost every day still, changed their lives and think it's really great.

It's really great. But so there's a paradigm shift that when you understand that all diseases are chronic inflammatory diseases and you include in your protocol a little investigation where is the inflammation coming from?

Right. You increase the likelihood of getting dramatic results. And so with this concept of gluten, now I'm going to share my screen and talk about sources of inflammation.

So here we have from my presentation last week. What are the mechanisms that set the stage for the production of excessive inflammation in the gut. And I'm going to talk about Professor Alessio Fasano.

Now he's a professor of pediatrics, Harvard Medical School professor of nutrition, Harvard School of Public Health, chief pediatric gastroenterology, mass General hospital, Harvard director of mucosal immunology.

That's the lining of the lungs, the lining of the gut, the lining of the brain, the lining of your reproductive system. He's the director at Harvard. He's the director of the Celiac Research Center.

Harvard. I mean, five titles that any one of these titles is a lifelong goal for people at the top of their field. He has five. We think he's going to win the Nobel Prize.

We truly do. We hope so, because he and his team are the ones that identified the protein that causes what we now refer to as leaky gut. In 1997, they identified the proteins online and how this whole, leaky gut thing, the technical term is pathogenic intestinal permeability.

But how all of this works and he's been writing hundreds of papers now, he and his team since then. Now, look at the title of this paper. This guy, five titles of chief or director at Harvard does not exaggerate.

All disease begins in the leaky gut. The role of the proteins on the Lin in creating chronic inflammatory diseases. All disease begins in the gut. Well, what about thyroid?

All disease begins in the gut. What about spondylolisthesis? All disease begins in the gut. What about psoriatic arthritis? All disease begins in the gut.

Do you get the message now? And this is what they're teaching at Harvard Medical School right now. This is what they're being taught much more detail, much more sophisticated into the minutia of understanding the physiology.

All this. But this is the big picture. Professor Fasano identifies the five factors that create the perfect storm for chronic inflammatory diseases. And if you understand this, this goes so far in getting a big picture on how to help your patients.

So the five factors that you know, I love this picture because here you got a guy whose hands are in his pocket, his left knee is bent foots on the wall behind him, just standing there whistling away probably, you know, just as comfortable as possible with all the chaos around him.

I mean, look at the chaos and look at how comfortable his body language is because he's protected. When you understand the five features of The Perfect storm, you understand how to get started with people.

Doesn't matter how sick they are, this is how you start with them. So first of the five factors is genetics. You can't do anything about genetics. That's the deck of cards you were dealt.

And doctors often say, well, we're going to turn off those genes. You cannot turn off James, James, don't turn on and off genes operate on a dimmer switch, and you can dim the genes down so they don't express themselves very much.

Or you can turn the genes up so they're fully expressive. And the goal is to dim down the genes of inflammation and turn up the genes of anti inflammation.

That's the goal. But that's your genes. Now your genes also determine the weak link in your chain. What does that mean. If you pull it a chain it always breaks at the weakest link.

It's at one end the middle the other end. Your heart, your brain, your liver, your kidney, wherever your genetic weak link is it actually two things that determine which link breaks.

One is your genes and the other is the antecedents. How you lived your life, right? If you eat tuna fish sandwiches three days a week, you got mercury poisoning and that and that set you up right?

So you just you just have to look at the incidence. That's why the living matrix as a questionnaire becomes so helpful. That's number one. Number two the environmental triggers.

It's the environmental triggers that have their fingers on the knob of the dimmer switches. How much your genes express themselves. Turn them up. Turn them down.

That's the environmental triggers. Now that means everything you eat, drink, breathe and what's already inside your body. Stress hormones, toxic chemicals.

There are three that need to be, addressed internal. They're called endotoxins, but it's environmental triggers that turn your genes up, turn your genes down.

You have complete control over time as you learn to change your lifestyle and the environmental triggers. Number three, the oh, by the way, the most common environmental triggers.

What's on the end of your fork? What you put in your mouth is the most common source of inflammation in your body. And that's why number three of the five pillars in the development of chronic inflammatory diseases is when you alter the microbiome by what you eat and drink.

So you develop too many bad guys, not enough good guys. And that's called dysbiosis. That creates an inflammatory environment inside your gut. Whether you have gut symptoms or not, it doesn't matter.

It's an inflammatory condition inside your gut number. And that leads to number four. Mrs. patient. Your digestive system is a tube. It starts at the mouth.

It goes to the other end about 2020 five feet long lines around in the center there. And then if you think of a donut, if you could stretch a donut out one big long donut and look down the hole, the center of the donut, that's your digestive tract.

So when you swallow food, it's not in the body yet. It's in the tube and it's got to be digested, broken down, really small, to get into the bloodstream.

Well, the inside the tube is lined with cheesecloth. So only really small molecules can get out of the gut into the bloodstream. So these bigger molecules of prime rib, for example, it takes a long time to break down prime rib compared to a banana.

Right. So these larger molecules until they've been digested smaller and smaller by your pancreatic enzymes, your gallbladder enzymes, the digestive enzymes of your, your bacteria in your gut, until they've been digested down small enough, they can't get through the cheesecloth and they have to go further and further down the track, being digested, digested.

Snip snip snip snip snip until they're small enough to go through the cheesecloth. That's normal physiology. But when you've got number three, an altered microbiome, meaning you have an inflammatory microbiome, you tear the cheesecloth.

Now larger molecules called macromolecules get through the tares in the cheesecloth into the bloodstream before they're supposed to. Now you've got a macro molecule of raspberry that got into the bloodstream, or of chicken that got into the bloodstream, or of spinach that got into the bloodstream.

And your immune system says trying to protect you. What's that in the bloodstream? That's not something I could use to make new bone cells or brain cells, that big molecule.

I better fight that. Now you make antibodies to spinach, and now you've got antibodies in your bloodstream looking for spinach. That's number four. The leaky gut tears.

And the cheesecloth allows the molecules to get through the macromolecules into the bloodstream, activating your immune system to protect you. That's number five.

Systemic immune response. Now these antibodies are going through the bloodstream looking for spinach and the way they identify spinach. Because your bloodstream is just a highway of traffic.

Everything's going the same direction. But there's no lanes of traffic. Everything's bumping like bumper cars at the circus bumping into each other, you know.

So how did the antibodies know what to attack? The antibodies know what to attack because they've been trained to look for a protein signature. That molecule, that macro molecule, I call it an orange vest.

So the antibodies are looking for orange vests, and it's a protein signature. I'll say ABCd for the amino acid protein signature. Well, the antibodies are looking for ABCd everywhere in the bloodstream.

And as the blood's going past the brain and the central nervous system, it sees. Look over there, ABCd hiding out, and they fire their chemical bullets at that orange vest, that amino acid signature, which happens to be a part of the protein of myelin.

So the antibodies for spinach. Looking for orange vests. See the orange vest over there. So they fire their chemical bullets. But that's myelin basic protein the saran wrap around your nerves.

But now you attack myelin.

Why Gluten Matters and How It Triggers Immune Reactions

This is called molecular mimicry that the antibodies to the food or the antibodies to bacteria will attack the human tissue. Because the protein signatures look very similar.

Now you're attacking myelin every time you eat spinach and you feel good when you eat spinach, good for you is, you know, it's supposed to be like Popeye. It's good for you.

But and you don't feel sick when you eat it, but you're making antibodies to it, and the antibodies to the spinach are attacking myelin. If that's your genetic vulnerability.

And now and that's the mechanism that causes Ms.. So that is a very common mechanism. I'm going to stop sharing screen for a minute so that you all understand the environmental triggers that we put in our mouth or that we create inside our body.

They are the triggers that ramp up the genes of inflammation that will pull on the chain. Where's the pull on the chain? Well, it's inflammation that's pulling on your chain.

Where is the chain going to break wherever your genetic weak link is, that's where the chain is going to break. It doesn't matter if it's rheumatoid or multiple sclerosis or spindle arthropod themes. It's the same mechanism.

It's always the same mechanism. So that is the five pillars in the development of chronic inflammatory diseases. Big picture concept. Please read my books or watch this again.

Go back and watch this again and again and it'll just make sense to you. I'm going to go back and share a screen right now, because we're still trying to get to gluten on this one.

So let's go back and share screen and see where it takes us. Now. So those are the three. You've got complete control over environmental triggers. The too many bad guys in your gut, not enough good guys.

And the leaky gut those you can make a change in number one. And number five, you really don't. You don't want to suppress your immune system. We need your immune system.

It's not an immune system gone crazy. It's like not like girls gone wild in Florida. You know, those videos that I grew up with and that were out there for a long time?

You know, it's your immune system is trying to protect you, right? Right. So although there are dozens of environmental triggers that have contributed to the specific, inflammatory state, what's the big kahuna?

Let's ask Professor Fasano what they're teaching at Harvard. Among the several inside the gut stimuli that make more zone and thus increase intestinal permeability, a little exposure to too much of the bad bacteria in your gut and its exhaust, which is called LPs lipopolysaccharide and gluten, are the two most powerful triggers.

This is what they're teaching at Harvard. Well, I feel fine. When are you gluten? It doesn't matter how you feel. It's got nothing to do with how you feel.

Gluten is misinterpreted by the zone and pathway as a potential harmful component of a bug, because the protein structure of the gluten proteins in wheat, right, and barley look like the outer surface protein structure of dangerous bugs.

So your immune system trying to protect you fight gluten. The activation of the Xiaolin pathway represents a defensive mechanism to flush out the bug, because when you have leaky gut and the cells open a little bit more, water comes into the lumen of the gut to wash out whatever the threat is with the poop, you get loose fouls.

And that is a protective mechanism that our ancestors had. And we have the same body as our ancestors thousands of years ago. Now, here's the paper in the Journal of the American Medical Association from Professor Maureen Leonard, very famous gastroenterologist at Harvard.

And she looked at over 60 studies on this topic of gluten and activation of inflammation in the gut. And she said previous studies have shown that gliding that's one of the gluten proteins in wheat cause immediate is within five

minutes of wheat coming out of the stomach, going into the small intestine.

Immediate and transient increase in gut permeability. This process takes place in all individuals who ingest gluten. That's you. Every piece of toast, every bagel, every crouton on a salad.

That's you. And this occurs in every human, without exception. It's a life saving mechanism of our immune system. Why does that happen? How does this occur?

Because gluten activates toll like receptor four in the proximal part of the small intestine. What's that toll like? Receptor four is the sentry standing guard inside the first part of the small intestine.

So anything that comes out of the stomach that looks like a bad bacteria toll like receptor four, it gets activated within five minutes of it coming out of the stomach, into the small intestine gets activated immediately.

And toll like receptor four does two things. It turns on more inulin production, increase leaky gut to wash out whatever the the threat is. And it turns on nf kappa B the major amplifier of inflammation.

Now here come all the inflammatory cytokines IL one beta IL six, tumor necrosis factor. They all come because they're activated by NF kappa B, which gets turned on by toll like receptor four, which gets activated by gluten.

And this occurs in all humans. There's the NF kappa B component of that. And also toll like receptor four when it gets activated the microbiota changes.

The good guys in your gut get reduced, the diversity of your gut gets reduced because you have more inflammation killing off the good guys, which allows more of the bad guys to develop because the good guys aren't there to police the area anymore.

Toll like receptor four, plays an important role in maintaining the fine balance between tolerance and inflammatory properties of the gut microbiota. By regulating innate immunity, that's really important to understand that the centuries that are standing guard inside your gut, they're there to protect you.

And they recognize gluten as the protein structure of a bug. That's a threat, a pathogenic bug. I'm going to start stop sharing my screen now, because that is why wheat is a problem for every human.

Now, I never I never say every human should avoid wheat. I never say that because I sound like a nutcase. If I do. But what I always say is that if you have a health condition that you can't get a handle on, just test accurately to see.

Is wheat a problem? Is my immune system fighting wheat because you've crossed the line of tolerance? If that's the case, and just there's only one test that's extremely thorough and that's called the wheat zoomer because you zoom in on the problem.

The lab is vibrant wellness. It's called wheat zoomer. It's head and shoulders above any other. And I travel all over the world teaching, and I look at the labs, the vendors down in the, vending area.

You know, I breaks at symposiums. I always look at their catalogs and there's no test in the world like the wheat Zoomer exam. Wow, that was so much information and so such amazing, intimate information.

And, apparently it works for our pets as well, because that makes sense. Why? The vets are saying don't feed them all these grains. And because I wanted the first ingredients, when you look at some of the pet food, we.

Oh yeah, you'll see a, you'll see a change in your animal usually long before you see a change in humans. And that's not true. If you go gluten free, so many people notice within a week to two weeks, their bowel movements are better.

Their energy's up, their sleep in a little better, their belts going a notch tighter within two weeks. You know, all these little things and they just feel better.

So it's very common to see that very common. So wheat, barley and rye. Yes those those are the bad salads. Right. So so the sense of what I got is, my parents used to say you are as healthy as your colon.

Is this kind of true? Well, you know what what Professor Fasano said in that paper, all disease begins in the gut. Yeah. If we get that paper, I mean, it's free.

Just Google all disease begins in the gut. And you, you you can download the paper. And as you read this guy, he doesn't exaggerate. He can't afford to exaggerate.

He's the director of mucosal immunology at Harvard. Right, right. And if you understand all disease begins in the gut, then if there's only one thing you're going to do to be healthier, Mrs.

Patient, if there's only one thing where you're going to spend your time and money, build a healthy microbiome that has more bang for your buck than anything else you can do.

So really, just about anything, any disease process, any, inflammatory process which which a lot of disease process is inflammation. Starts with, yes, the gut.

And that's correct. That's correct. Getting rid of the weight, and adding PMF is great to, to eliminate some of that inflammation so that those two things marry and, and so what some people just can't get rid of with completely.

I have patients in my office and my, my husband, he's got, irritable bowel syndrome. I'm vegan. He is not, he he is the prime rib kind of guy. And he eats a lot of bread.

I am the rice girl. He is the bread guy. And we're already having to to preparation every meal. It's two different complete sets. A meal for people like that.

How could they just just just limit or do they cut it out completely? You can't be a little pregnant. You can't have a little gluten. It's after you've crossed the line of tolerance.

I'm going to tell him that he cannot be a little pregnant. He's got this now. Now, now, the point is, if the wheat zoomer comes back normal, it's okay for you to eat wheat.

You've not crossed the line of tolerance. Okay, but check it every year. Check every year. Because at some point you will you will cross the line of tolerance.

But if you've crossed the line of tolerance, then Fasano said the two most powerful triggers causing leaky gut, which is the gateway in the development of every chronic inflammatory disease.

It doesn't matter if it's cancer, heart disease, diabetes. This is the gateway is leaky gut, right? And the two most powerful triggers are LPs and gluten.

Now the two most powerful traits. This is what Harvard Medical School is teaching. Who's going to argue with this? True, true I, I totally agree this is just been such an eye opener.

I something as simple as the word gluten. How? Who would have thought that we we've been talking for for over a half an hour. And I would have to tell you that I feel that this conversation can really go on for days, you know, and the the Hindus have these, religious celebration, satsang, where they talk about the Bhagavad Gita, but it goes on for nine nights.

And this gut health thing is can go on for nine, nine nights. And I think this, this I still wouldn't know every single thing that there is to know. Oh my goodness.

No. That's why I have, if I may share my screen one more time, I should show you guys this. That's why I, have a course that I put together called the Certified Gluten Practitioner and or course, and we've had over 1000 doctors that have done this, and it's online.

You do it at your own pace. But no one can ever argue with you when I give you all the science. And it's study after study after study after study. And our goal here is to get people thinking the big picture and not be caught by the joint pain.

Oh, it's my knee, doc. It's my knee is. You know, this. It's hurting me. So much. Well, you always want to treat the local area of complaint so they feel better.

But where is it coming from. Right. And you may be identifying in the early stage of a rheumatoid arthritic patient. So it's certified gluten practitioner.com.

And you can go there. You get all the information about it. But I think every practitioner needs to do this course because and if you don't like it we'll give you your money back I don't care.

Testing, Diet, and Practical Next Steps

You know because this is paradigm shifting. You change how you think when you do this. And we've got a money back guarantee, you know, fine, fine. You know, and no one's ever asked, for that back.

Everyone says, oh, my God, I had no idea. Right. And you've got three months to complete it, so take your time with it. And there's quizzes after every section.

And so you take the quiz and if you miss a question, it's now go back to slide 242 and look at that. And then answer it again and say oh that's right, that's right.

Then you go back, then you get you don't need to memorize this stuff. I just want you to be familiar with it and have the resource so you can study it.

So please, please, please, all of our practitioners out there, please consider the GP course because it changes the way you think. And if it doesn't ask for a refund, fine, I think I think I'll be signing up.

I'll be signing up because this is this is amazing. I've been a vegan for almost 40 years. I have the bad genetic tool, but at the same time I, I, I eat, healthy, meal and I do the intermittent fasting.

But yet when this premenopausal thing started happening, it this that's the belly fat that you can't get rid of the belly fat. And it may just be that little trigger that that gluten.

Well, clearly what you can say is that something has triggered an inflammatory state in my body, right? Something has accelerated the inflammatory state.

And we've known forever that when a woman goes through a change of life and the ovaries start shutting down, it's the job of the adrenals to get kicked in, to produce one tenth the estrogen that the ovaries used to produce.

But if you've lived a stressful life and you're in a state of hypo adrenal and your adrenals can't do that, then your body just starts compensating and here comes thyroid dysfunction and adrenal dysfunction and blood sugar.

I mean, the whole gamut starts. So it just depends on where the trigger is for this for you. You know, we don't get more fat cells after the age of 2 or 3.

They just get bigger or smaller. What are they getting bigger with toxins. Right. So we have to identify where is the toxic overload for a patient with symptom patterns like you're describing.

Where is it coming from. Right. And weight is always at the top of the list. Now this is a little pearl, perhaps. You said you've been a vegetarian for over 40 years.

So for me, it's really a no brainer. Is vegetarian good for you or not? All right, well, the primary concern with vegetarianism is not enough protein.

So let's do a let's do a urine amino acid test and see do you have adequate protein. Right. And if you don't I don't care how much you believe in a vegetarian diet, what you're doing isn't working.

Here's the test results. Mrs. patient. Right. You don't have enough protein, right? Right. And it makes complete, complete sense. The whole I o through our.

This has been the I think I'm going to label this as the biggest eye opener. Oh, great. I this this was this this was amazing. This is, thank you so much. So much.

I can't I can't even begin to say how privileged I feel that I was able to do this interview and talk to you. Oh, thank you, doctor Marlene. Thank you so much.

And it's, I'm really grateful for what you're doing out in the world, putting together summits like this, because, it's only by carrying this information out in every venue that we can, that we can make the difference that the world needs right now.

Absolutely, absolutely. Thank you so much, doctor Tom. It was, a privilege, like I said, and I'm going to be doing the course. So you're going to be here for me again.

Marvelous. Look forward to that day. Thank you so much. Thank you.