

## Garry Gordon, MD, DO, MD(H): Today's Toxic World and the Multifactorial FIGHT Required to Restore Our Health

Interview by Karen Burnett • Photography by Craig Gustafson

*Garry Gordon, MD, DO, MD(H) received his doctor of osteopathy degree in 1958 from the Chicago College of Osteopathy in Illinois. He received his honorary medical degree from the University of California Irvine in 1962 and completed his radiology residency at Mt Zion in San Francisco, California, in 1964. For many years, he was the medical director of Mineral Lab in Hayward, California, a leading laboratory for trace mineral analysis worldwide.*

*Dr Gordon is on the Board of Homeopathic Medical Examiners for Arizona and is cofounder of the American College for Advancement in Medicine. He is founder/president of the International College of Advanced Longevity and a board member of International Oxidative Medicine Association.*

*With Morton Walker, DPM, Dr Gordon coauthored The Chelation Answer. He is advisor to the American Board of Chelation Therapy and past instructor and examiner for all chelation physicians. He is responsible for peer review for chelation therapy in the state of Arizona.*

*As an internationally recognized expert on chelation therapy, Dr Gordon is now attempting to establish standards for the proper use of oral and intravenous chelation therapy as an adjunct therapy for all diseases. He lectures extensively on "The End Of Bypass Surgery Is In Sight."*

*Currently, Dr Gordon is a consultant for various supplement companies. He is responsible for the design of many supplements that are widely used by alternative health practitioners around the world.*

**Alternative Therapies in Health and Medicine (ATHM):** I understand you come from a family of physicians. Could you please describe your journey into the field of environmental medicine?

**Dr Gordon:** Yes. My father was what we call a "ten-fingered" osteopath in Madison, Wisconsin. He got people who came from the Mayo Clinic in Rochester [after unsuccessful treatment] well because he worked magic with his hands. My two uncles were both osteopaths. One of them later became an MD as I did, and my brother became an osteopathic physician. Everybody in my family seemed to be doctors.

When I was 6 or 7 years of age, there was no question in my mind that I was going to be a doctor. That was what I was destined to be. By the time I got into medical school, I was still pretty young. In 1954, I entered osteopathic college for the 4-year training. I was

only 19 years of age, and I had what we would call narcolepsy today. I had recurrent torticollis; I would walk around with my head on my shoulder. I also had such a weak heart that if the class I was to attend was up a flight of steps, it was all I could do to go up the flight of steps.

My father, being an unusual healer, was treating me as extensively as he could with the knowledge base that we had. We had no idea that I would have something like total achlorhydria and that I was totally unable to absorb the things like magnesium. Of course with magnesium deficiency, muscle spasms would be expected but in addition to that, as a kid, I ran very high fevers and I stuttered. I had many health issues.

The high fevers led to most of my teeth having big holes in them, so the dentist filled them with mercury. The next dentist said the first one had done it wrong, and he took out all the mercury and put it all back in again. The net result was that I had such high levels of mercury that it's not surprising that I developed narcolepsy while in medical school. I sat next to a football player, and when I nodded off, he would bruise my chest wall with his elbow sufficiently that I would stay awake.

Additionally, I had a sensitive stomach. Even in later life, when I met Linus Pauling and I wanted to see if high-dose vitamin C would help me, I was intolerant to most forms of vitamin C. I couldn't handle more than a gram without being in the toilet with abdominal pain and such. And I was nearsighted. Nobody knew it for the first 6 years. I thought you had to guess what was on the blackboard. I spent many years not functioning very well.

It has been an interesting journey, one that has caused me to spend millions of dollars. Every cent that I earn, I spend going to conferences somewhere in the world. Whether it's Kunming, China; or Moscow; or Germany; or London, I'm in the front row seeing what I can learn. Our country is a little bit behind times if you live in the big world as I do.

Now that I'm 76 years of age, I am getting younger by the month. I cannot believe how good I feel. I just want to share with everyone that I have found, from my journey, an approach that has significantly restored my health to levels that I never had.

For example, I was born with a first-degree AV (atrioventricular) heart block, which is one of the reasons that, even when I went to



**Garry Gordon, MD, DO, MD(H)** in Las Vegas, Nevada, where he attended a December medical conference, promotes the concept that empowering the body to rid itself of illness is a multifactorial “FIGHT.” Practitioners must consider each aspect in the FIGHT (food, infection, genes, heavy metals and hormones, and toxins) in any effective protocol for either treating illness or optimizing wellness in order to potentiate a person’s “maximum intended useful lifespan.”

the University of Chicago at the age of 16, I couldn't take part in physical education.

Now, I ride my bicycle up and down mountains here in Fountain Hills, next to the Mayo Clinic in Scottsdale. It's astonishing that at age 76, I seem to be getting younger. I have not undergone any stem-cell procedures. I believe I have found a way to empower us to turn on our own stem cells by combining physics and biochemistry. In my efforts to help my fellow man, I have put together my program because our problem is that everybody has a little knowledge, and it makes us dangerous. If you're a doctor and chelation got you well, then that's all you're going to talk about. You ignore food allergies. You never think about genetics.

We doctors are very mortal. Whatever makes us well is what we tell our patients has got to be the answer for them. The problem is that everything is multifactorial. You go to a doctor, and he says, "Oh, if I get the mercury out of your kid, maybe he'll start talking." No, it's not that simple. There is always going to be a food allergy and infection involved. There are always going to be some genetic issues. You can't live on this planet today without having toxins.

People such as Randy Jirtle at Duke, through a special on Nova called "Ghost in Your Genes," have documented that when you are exposed to bisphenol A along with thalates from the plastic bottle you drink water out of, you can see an overnight change—as we did with mice—wherein the offspring become yellow and obese and diabetic, which is quite interesting as none of them had those conditions before the exposure to bisphenol A.

Three thousand health professionals belong to my free School of Advanced Medicine. Our challenge is that the average patient is being sold a bill of goods—that they should live on statins, they need to be on the latest drugs even though [the drugs] aren't solving anything—they're merely masking symptoms. How can we get our fellow physicians—and their patients—to understand that when you start dealing with causes, you're at the only kind of effective medicine that will allow you to reach your maximum intended useful lifespan?

We're all designed to live, easily, for 100 years. I'm convinced that I will be younger at 86 than I am at 76 because I've now found ways to make that possible. But it's kind of expensive, to put it mildly. And, certainly, the government is not going to subsidize any medicine that approaches causes because, after all, the government is complicit in the fact that there are so many toxins in the environment in the first place. They know that when we burn coal to turn on our electricity, we are dumping into the air lead, mercury, cadmium, arsenic, etc.

**ATHM:** Speaking of toxins in the environment, we now know that environmental pollutants, toxins, and excessive use of antibiotics have caused a host of illness for us. Do you consider some frequently prescribed drugs, such as Coumadin, dangerous toxins as well?

**Dr Gordon:** I go way beyond blaming Coumadin. I take everybody off Coumadin because I have a safe alternative that has not failed me. I haven't had a patient on my program die of a heart attack in more than 30 years. Working with Dr Lester Morrison, the head of the Arteriosclerosis Research Institute, we created the program in 1960. Dr Morrison published 3 books documenting that, with his approach alone, there was a 91% reduction in fatal heart attacks, even in patients known to have advanced coronary disease.

It was all based on the blood-clotting issue, not the cholesterol issue, because it turns out that Coumadin, Plavix, and aspirin are at least addressing a real problem. When the patient dies, in the majority of cases, you will find a blood clot. The clot can cause a stroke, which can cause a heart attack.

Coumadin, in my opinion, is rat poison. I take everyone off of it because its so-called benefit of blood thinning, which is an anticoagulant and an antiplatelet effect, is achievable entirely with either my oral chelation program that we spent \$10 million developing or by using things like boluoke, also known as lumbrokinase. It comes from the Chinese earthworm, and it takes about a ton of worms to get a kilogram of it—so it is expensive—but it is a safe, effective alternative to using Coumadin.

It's not just Coumadin I'm upset about. The American Medical

Association's own journal, *JAMA*, admitted years ago that the fourth leading cause of death in the United States is drugs that are legally and correctly prescribed by a doctor. In other words, if doctors stopped prescribing drugs, the fourth leading cause of death would go away.

There is a software program called RxWise available on the Internet, where people can enter their medical history and names of all of the medications they're taking and RxWise tells them of potential drug interactions and adverse effects. According to RxWise, if someone is on 5 or more drugs, there is probably malpractice going on. In other words, in most cases, there probably are not 5 drugs that a person could be taking that wouldn't have interactions that will directly contribute to his or her death. Many of this country's elderly citizens take at least 5 prescription medications, and the government is paying for or subsidizing a lot of them. The RxWise program can make people aware of the possibility that these drugs are going to directly contribute to their death.

I am hoping to wake people up to the fact that there is a very safe and effective alternative to virtually any medication that you're tak-

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ing for virtually any condition. I've spent millions of dollars sitting in the front row of conferences on every continent, so I am very capable of outlining what those choices are. The problem is that none of it will be covered by insurance because none of what I do is usual, reasonable, or customary.

**ATHM:** Do you see any solution to the financial obstacles to more natural treatments?

**Dr Gordon:** It would have been nice if the government had allowed people to have their health savings plans. Then people could have chosen to take tax-deductible dollars and decided whether they wanted acupuncture, oxidative therapy, hyperbaric therapy, chelation therapy, or to be on my orthomolecular nutrient approach. But patients right now are spending so much to have sufficient coverage in case they get hit by a car—and it is clear that if you get hit by a car, you could spend a million dollars recovering, so there's a need for that. There's also a need for that sickness insurance, but the cost of the sickness insurance has become so high that most people are not able to take the remaining expendable dollars and go to a health-food store.

We need to start educating those who can afford it. And how do you educate somebody? They come to you with a symptom. It could be they're stuttering. It could be that they're losing their memory. It could be depression. It could be chest pain. It could be a tumor developing. How do you take them from their focus on the tumor or the chest pain to approaching how to restore health to their whole body?

In my estimation, that's not possible to do unless you help them address at least a little bit of everything that I've outlined in what I call my *FIGHT program*: food, infections, genetics, heavy metals and hormones, and toxins.

If you're going to tell somebody, "I want to get the toxins out of you," it would really be nice if you first measure the toxins in them, so they know that you're not from Mars and dreaming this up—that you have facts to back you up when you say that a person can't live on the planet today without having a high level of carcinogens, neurotoxins, and endocrine disruptors in him.

How do we know that? Well, to start with, go to the Environmental Working Group (<http://www.EWG.org>), and look at the study called "Ten Americans." In that study, we took the cord blood from 10 babies at random. We wanted to test for more than 300 toxins, so we didn't do just the \$4900 test that they do at Mt Sinai School of Medicine, which has one of the leading laboratories measuring toxins but tests for only about 220 of them. We spent about \$13 000 to have toxins measured in each of these 10 randomly selected children.

The cases came back proving beyond question that you can't live anywhere on the planet without being exposed to things like flame-retardant polybrominated diphenyl ethers. Initially, all we wanted to do was keep our babies from burning up if the house catches fire, so we treated their pajamas with polybrominated diphenyl. Then we decided to treat their mattresses. It gradually got out of control. Now it's used on airplanes. You can't go anywhere without being exposed to these toxins.

Each toxin individually has its own adverse effects, and if you combine these adverse effects with the drugs that people are taking

and the nutritionally depleted foods that we eat and the unfortunate excessive use today of genetically modified foods, it is a significant toxic load. Additionally, we're vaccinating a lot of people who may not be healthy enough to benefit as well as we hope because of the toxins in their systems.

**ATHM:** What do you consider to be the best way to test for contamination by toxins in the body? Or do you believe that we should not need to test at this point?

**Dr Gordon:** We have to test because if we don't test, patients won't spend the kind of money I spend to achieve the incredible health that I now am enjoying. People are going to be hardpressed to swallow as many pills as I take with the zeolite and do the far-infrared saunas and the high-dose [vitamin] C and my green drink and my fiber drink, etc. It's expensive and inconvenient to take all this unless you have some way of knowing that it's helping. You need to know where you're starting on a scale of 0 to 100—how bad off you were when you started doing all this stuff.

Every test has some imperfection. You see, as a world expert on trace minerals, having directed the largest mineral-testing laboratory in the history of the world with offices in Tokyo, Amsterdam, Boston, and San Francisco, I really know my selenium, my magnesium, my lead, my mercury. I know these cold because I've done several hundred thousand people's tests.

The challenge is this: Are you going to measure it in the hair or the blood or the urine or the bone? Or are you going to measure it inside of a heart muscle cell that's not doing well? Well, the best answer would be the last. If you want to look for magnesium deficiency, you want to look inside of cells.

I developed something called *Exa Test*. First, I take a single cell, which I obtain by using a tongue depressor and wiping the bottom of your tongue and putting it on a slide. Then, with the use of an x-ray fluorescent detector and an electron microscope, I can look inside that cell and tell you instantly whether or not inside your cells, where it counts the most, you have the magnesium you need to be healthy. About 98% of all people today have suboptimal magnesium levels.

Let's go back to the toxins because, you see, they're interrelated. The air you breathe every day is carrying lead and mercury from the burning of coal. If you have enough of the nutrients your body needs, you'll be tougher and the bad things you can't avoid will have less of a bad effect. How do we know how bad off you are? If you live in Boston, you can go to the Harvard School of Public Health, where they have a very advanced detector that enables them to tell you how much lead is in your bone without taking a piece of your bone.

Debra Schaumberg of the Harvard School of Public Health published an article in *JAMA* showing that the level of lead in your bone determines how soon you will go blind. Later [research was published] showing that the level of lead in your bone determines how soon you will have a fatal heart attack. I cofounded the American College for Advancement in Medicine (ACAM) 35 years ago and I've single-handedly trained most of the fathers of chelation because it had changed my life so dramatically.

There have been a couple of wake-up calls in my life. One was after the eighth chelation. As I told you, I couldn't go up a flight of

steps when I was in my medical training and was never able to participate in sports. After the eighth chelation, I could run right up the side of a mountain and wear out a 2-year-old Irish setter. So, it woke me up to the fact that maybe, if you get toxins out. . . And, of course, 35 years ago, if you'd said to anybody that lead is more important than cholesterol, they would have looked [at you] like Semmelweis and said [you were] insane. You know, he's the guy who said, "Wash your hands."

So, in order to avoid getting locked up, I back up everything with mainstream, published literature right out of things like the *New England Journal* and *Lancet*. And yet, it's only because my interest in environmental [factors] and pollution and heavy metals and these things that I see, these articles are in their journals, but others don't notice it, and it just passes them by.

But, when you put it all together, if you want to convince somebody that they're toxic, then the cheapest way—I saved on my website—what Sanjay Gupta with CNN made them do. Two 1-hour special exposés of how dangerous it is to live in America today. They're called CNN/Toxic America. It's on my website because they'll have no advertisers if they ever play that again. There isn't anybody who's not part of the problem that's contributing to the toxins in your baby.

But the study that we did with the 10 Americans, we've now gone back and repeated that study in the pregnant mothers. And they, of course, are where the toxins came from. So we wind up teaching pregnant mothers how to get the toxins out before they even impregnate. We need to even get the fathers to lower their level of lead. In other words, if you start to put the whole story together, we really have to detox the planet. And fortunately, people in Asia whom I'm working with are aware that chelation is one way of doing it.

There's 507 published papers on my website proving that you can't run a lead battery factory without [giving] the workers tablets of EDTA because otherwise the blood lead gets so high they don't know who they are. So you don't get a worker unless you keep them on oral detoxification. But [oral detoxification] became unpopular with my own colleagues because they noted that [intravenous chelation has] 100% absorption and when you use it orally, it's only 5% to 13% absorbed. So if it's not fully absorbed, they sit there and make fun of it.

But the point is that it's cheap. It's not much more expensive than vitamin C, and it is tied to the research that we did that showed EDTA would probably extend the lifespan of multiple-celled organisms called rotifers by at least 50% by just dipping them in the EDTA. Now, why would it make a multicellular organism live 50% longer than it had ever lived before?

**ATHM:** Would you tell us about your FIGHT for Your Health protocol and how it works, what the philosophy is behind it?

**Dr Gordon:** I have been seeing more and more patients with mysterious illnesses that wind up on very expensive drugs for autoimmune disease. And, somehow, I had heard of a book called *The Autoimmune Epidemic* by Donna Jackson Nakazawa. Donna Jackson twice went into total-body paralysis called Guillain-Barre, and she happened to be treated at Johns Hopkins. She had a lot of time on her hands, being totally bed-bound for long periods of time. So she wound up writing the book.

What was powerful about *The Autoimmune Epidemic* [was] that she was able to find stories of a doctor who was near death and had never been told that he just had a food allergy. Or a doctor that was near death because nobody had ever diagnosed an infection. Or a person that was near death because nobody ever told them they had an inborn error of methylation and needed to have the right kind of folic acid, the 5-prime methyltetrahydrofolate, and probably support their methylation with things like methylsulfonylmethane, trimethyl glycine, and methyl B-12.

Anyway, she wrote the book. And when I got to the end of the book, it was clear that I needed to help people who wouldn't buy her book and take the time to read it because these were all great stories and stories help us understand. The patients [in Jackson's book] often were doctors in leading medical institutions who were near death because nobody had identified their toxin. Or nobody had told them they had all that mercury coming from their fillings. Or they were eating so much fish. It was just a very powerful book.

So I tried to synopsise that into something that could empower the average doctor and patient. Because patients come to you—or me—they've seen 8 or 9 or 10 doctors, so they've kind of given up. They've seen everybody, but no one ever puts it all together. They never identify for them the food that they're sensitive to, which is kind of basic.

With the genetically modified foods today and with the fact that we have so many antibiotics in our food, obviously, we don't have healthy intestinal flora, so death truly does start in the gut. And so what we have to do is have every patient on acidophilus every day of their lives, and then buy acidophilus food. What would that food be? [It's] a fiber that actually lets them grow. I found that in stabilized rice bran, but it didn't give me everything I needed, so I added artichoke.

I wanted to get the intestines so healthy that [your food is] not poisoning you every time you eat. No matter what you eat, if you don't have the right intestinal flora, the day will come that [you become sensitive to some] food—it could be carrots. We have a documented case of a lady [whose] health was wrecked for years because she ate carrots every day and nobody dreamed that you could be sensitive to carrots.

So, that's part of why I put together a full hour webinar on each of the 2 Fs [in the FIGHT protocol]. The second one is focus because if the patient has a really bad focus—if they're not focused on getting well—then it's going to be harder. The *I* is for infection. According to Harvard Medical School, something like cytomegalic virus, candida, chlamydia, XMRV, or some infection [is present] in everybody, but the average doctor isn't going to pick it up because (a) there's not an easy test to prove who's got Lyme and who doesn't have Lyme. And (b) if they diagnose [the infection], then that could get covered by insurance, [but most doctors don't] know how to get patients well without [the patients] living on IV antibiotics.

Patients don't need IV antibiotics. They simply need my FIGHT program. Say you had a flat tire. It's like you put air back in all 4 tires. Instead of just fixing the flat tire, you have to do everything. And then you have to make sure there's fuel in the car, and you have to be sure the radiator's there and the battery's charging. That's what I do with the FIGHT program.

My FIGHT program is [designed] to remind people [they need

to] do a little something to lower your total-body burden of toxins, which as I said, everybody has dioxins and PCBs and polybrominated diphenyl ethers. No one can pass the test. It's been done on thousands of people, even published by the government under the HANES Study (Health Assessment Nutrition Education Study) and it has been done privately at places like Mt Sinai School of Medicine where we do it for anybody who's got 20 tubes of blood to give and a check for \$4900. No one will pass the test, whether you're Bill Moyers on television or Jim Lerner with *Commonweal*. No matter if you live 100% organic, you are not clean because the air and the water and the bathing and the showering and everything we do, you're going to have toxins.

So the question becomes what is the best way to keep people motivated. For me, at this age of 76, I've been doing everything for years. I don't go off my oral chelation—for 30 years. I'm on high-dose C. I'm on zeolite every day. I'm on fiber. I do the acidophilous. I do all these things, but I am amazed that now that I've added physics to the overall equation, I am able to do things that were not possible before.

What physics am I talking about? Well, you've got things like hyperbaric oxygen, hyperthermia, and microelectric current therapies that are actually getting quadriplegics walking again. And now, we have pulsed electromagnetic field therapy (PEMF). I've studied a lot in Germany. I knew the guy that owned the largest company in Germany, and the government paid for his device because you didn't have to replace the person's hip; it made the bone regrow—that was proven.

It's been old news, but we know the North Pole is unsteady and has moved 60 miles—and they think the North Pole might again be ready to become the South Pole within the next 1000 years. The point being that the earth's magnetic field is letting us look more and more like Mars. Mars is a dead planet because without a magnetic field, there is no life, and we're down to 1% of what the magnetic field was simply at the time of the dinosaurs. This is all published by NASA. It is the real reason we don't have an ozone layer to protect us because it takes a magnetic earth to hold the ozone in place. The earth's core is cooling, so there are changes going on.

Now, how do you tie all that together with what's happening? Finally, I'm now talking to people about mitochondria and cell membranes and the energy of individual cells, which is measurable in a couple of ways. Adenosine triphosphate (ATP) is the currency of energy when you talk biochemistry, but the millivolt charge on the membrane—which is now actually measurable—averages about 120 millivolts. We also know that cancer cells are very low in their charge and that heart cells have the highest charge in your body.

Why is that interesting? Well, folks, how many people do you know that ever get cancer of the heart? It doesn't happen. Why? Because if you have a fully charged cell, amazing things happen. What happens when you're fully charged? The full charge means that you will be able to take in the potassium and pump out the sodium. You'll maintain that charge, and you'll have high levels of ATP.

You will have a cell that is alkaline, and when that cell is alkaline, the oxygen that is in the hemoglobin will be released at your toe. You won't have a toe turning black. When the cell is acidic, there's virtually no oxygen released from hemoglobin. It's called the hemoglobin disassociation charge. It is a magnitude of order [providing] at least 10 to 100 times more effective release of oxygen when you



restore these things.

So when I treat myself today, I'm doing all the nutrition that doctors in alternative medicine know and teach each other—and we love. My mentors include people like Linus Pauling, Abram Hoffer, and John Miller. I mean, I knew the people that actually put together the whole orthomolecular concept, and they trained me. I have stopped the voices bothering people with schizophrenia using orthomolecular. I really know this approach.

But even that approach can't work if you can't take up these expensive nutrients we buy at the health-food store. If the cell doesn't have the energy to pull, take them in, that's the problem. We have to do a multifactorial approach. On top of my FIGHT program, which is now on my website is a whole special site on PEMF because we are using this technology now with FDA blessing at places like Yale and Stanford and UCLA to even treat depression.

And how come PEMF will treat depression? It's able to make a bone heal that was fractured 5 years ago and had never healed. How could it do that unless it raises the potential of those cells, unless they release the growth factors and bring in stem cells from your own body. So, it is my belief that [PEMF is better] than chasing stem cells—which are going to help us all immensely when they've finally perfected where they're going, but today [the technology] is too hit-or-miss and too expensive.

My approach is still expensive, but when I combine PEMF with my detoxification and the unique form of oral vitamin C delivery that I found—because we all know that, when you have a tumor, we basically treat patients with intravenous vitamin C. We don't claim that we can do as much with oral [therapy] unless you learn about how to add vitamin K<sub>2</sub> and other things that we've now learned and then do PEMF. Now, you have cells that can take up all of these nutrients and, most importantly, have the energy to push out the toxins.

We know this to be a fact because if I treat somebody with a PEMF device, of which there are many, you can actually have patients get almost a Herxheimer-like reaction and break out with a rash after you've done nothing but raise their bodies' magnetic energy, which is restoring to each cell its energy.

So I'm in the business of recharging cells individually. It's all done, frankly, by what you might call an exercise device. Instead of just [exercising muscles], like there's several devices for, we believe that we're exercising individual cells [through PEMF]. We [treated] an autistic child at age 18, who was told he would have to be institutionalized because had never put together a single sentence, and we've got that child in 6 weeks giving a lecture on neurotransmitters after they wanted to put him in an institution. And the only thing

we added was PEMF.

We have people getting out of wheelchairs and stopping shaking [from] Parkinson's. So it looks as though we [can] really start to put together the biochemistry that a lot of us in alternative medicine love with the homeopathy and the acupuncture and the prayer and the meditation and hyperbaric and all the things that I've studied but put them now with cells that have the charge to be able to respond to these expensive nutrients.

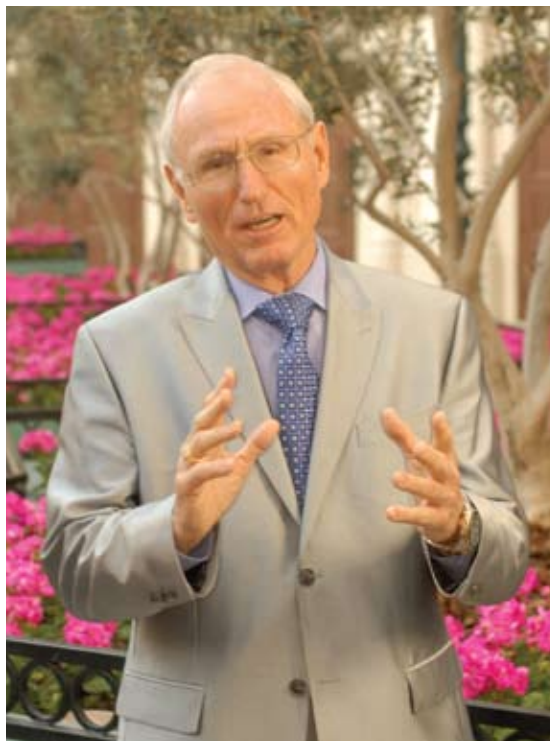
I'm seeing things in my own body—I, who was born with a heart block and a heart that would beat 2 or 3 beats and skip a beat. Now that I've put all of this together, I have no skipped beats. To change something that's been a problem for my entire life tells me that I am on to something that we can all do. It's possible for all of us to get the toxins out and put the nutrients in. The question becomes, which is the more important?

*ATHM:* Oral garlic, malic acid and ethylenediaminetetraacetic acid (EDTA) are components in one of your basic chelation therapy treatments. How do these supplements fight toxic metals in our bodies?

**Dr Gordon:** It turns out that garlic is a chelator. It's a sulfhydryl SH group. And EDTA is a chelator. It's a carboxylic acid group, and they do attract different metals. The garlic is actually a little more effective on mercury, and the EDTA is a little more effective on lead. So when I put these together working with Lester Morrison, what we found is that the EDTA actually allows heparin to work by mouth. I mentioned that I don't want people on Coumadin, but we all tend to die of blood clots;

that's the major cause of stroke and heart attack. If you talk to knowledgeable experts in coagulation, they will tell you that's why [drug companies] sell billions of dollars of Plavix and things like that.

My point is that I've found a way around that, but the first thing is to get the bad stuff out. Think of it this way: At Caltech, Clair Patterson published the papers proving that the bones of everybody on the planet today average at least 1000 times more lead than pre-historic [times]. So, if you were born with a 1000 times too much lead in your bone—and that's the average according to Patterson—and we now have Harvard Medical School proving that the level of lead in your bone is at equilibrium with your eye and your brain and your total body and your heart and your kidney, then to me, it's very simple: If I'm going to live to my maximum intended useful lifespan, I have to chelate every single day of my life. I can't afford to be in a doctor's office doing it intravenously, even though the intravenous is stronger, and I like it. The intravenous is like getting a simonize for your car; it's a deep cleansing. It's great. Do it.



But you've got to do something every day of your life because you can't breathe anywhere on the planet that doesn't carry the lead, mercury, and cadmium from the burning of coal. It's documented on the front page of *The New York Times*. Everybody knows that you can't burn coal without putting the bad stuff up, and what goes up has to come down. That's why we polluted the ocean. That's why all the fish have mercury. I mean, we do know what we've done; we have poisoned our nest. And so these substances—the garlic, malic acid, EDTA—are oral chelators.

I've now gone beyond [these, adding] zeolite and fiber and my green drink, and I have a power drink because I've had to go to start to deal with the dioxins and the PCBs and the polybrominated diphenyl ethers and bisphenol A. I've had to deal with the genetic change called epigenetics. Overnight, you can change people's genes by being exposed to certain toxins as Randy Jirtle at Duke University proved on *Nova*.

So putting all this together, if you have changed your genes, you need more methylation support. Then you can only survive your maximum intended useful lifespan when you get things like 5-prime methyltetrahydrofolate, trimethyl glycine, methyl sulfonmethane, and methyl B-12. These are things that I have my patients on.

You can spend the money to prove all these things, but how much money are you going to spend for tests? To really analyze somebody, you could easily spend \$5000, and in fact, in an excellent book by David Ewing Duncan called *Experimental Man*, we went beyond it. We spent half a million dollars doing tests on him.

Was that a waste of time? Well, he doesn't think so. He's a professor at the University of California San Francisco, and he's had the standard workup done by standard doctors at the medical school where he works, and they said, "You're gonna live forever. You're in great shape." When he did the expensive tests, he found out he had serious inborn genetic issues. He could've died at any time. But nobody can afford a half million dollars worth of tests.

My problem was trying to [raise awareness]. Sanjay Gupta did a great job with the CNN special; it will wake you up. You'll know how toxic your baby is when it's born. You'll know why 1 out of 4 children going to school have to check with the school nurse because they're on a drug for their diabetes or their obsessive-compulsive [disorder] or their depression or their autism or their asthma. It's frightening; we have an epidemic. You can't have all these toxins in the mother without it concentrating in the baby.

We've done some bad things. So, yes, I have everybody on garlic and malic acid and EDTA and now zeolite and high-dose vitamin C and green. It's expensive to feel as good as I do. But at least I'm not

wasting my time taking some stupid drug that masks the symptoms. I've had all these symptoms; I've been so painful most of my life—I couldn't jog anywhere. Now, I feel like jogging because nothing hurts. It's a whole different world.

But I'm not going to do it with the silly drugs that they talk about on television; nobody in their right mind would take those drugs. "Don't take this drug if you have. . . Don't take this drug if you have. . ." I mean, people have to wake up. Your body is a wonderful machine. And all I've learned is how to maximize its ability to deal with the toxic planet that we're living on.

**ATHM:** You are recognized as an expert on antiaging and longevity. How does chelation help increase longevity?

YOU'VE GOT TO  
DO SOMETHING EVERY  
DAY OF YOUR LIFE  
BECAUSE YOU CAN'T  
BREATHE ANYWHERE  
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THAT DOESN'T  
CARRY THE LEAD,  
MERCURY, AND  
CADMIUM FROM THE  
BURNING OF COAL.

**Dr Gordon:** As I've said, when I treat multicellular organisms called rotifers by dipping them in EDTA, they live 50% longer. Now we have the AMA actually publishing in the *Archives of Internal Medicine* that all causes of morbidity and mortality are tied to how low you keep your level of lead. So it's pretty simple. Since you were born with 1000 times too much lead, I would start every child on zeolite, and I would have everybody adding higher-dose vitamin C and other things. The point being that chelation is addressing what is now widely known: There is no safe level of lead in anybody, and everybody has too much.

So across the board, it's pretty simple. But I actually as an expert in antiaging tell people, "Go to the website [I-Mhealth.com](http://I-Mhealth.com)," and you can learn how simple it is to know how old you are. We can easily have you see how

near and how far you can read, how many candles you can blow out, and how long you can stand on your right foot with your eyes closed because that's a very long nerve that has to go from the bottom of your foot to your brain and keep you from falling.

I can teach people antiaging. I know it really well, and I lecture around the world. I have total confidence that the program and the knowledge that we have today will enable anyone to easily reach 100, even if you have the serious inborn errors. After all, I wasn't very healthy, being born with total achlorhydria. I wasn't very healthy to have wound up having a heart block as a child and having to be taken out of all physical education. So for me, at age 76, to feel fantastic tells me that almost anybody is going to do better.

I can't make everybody live forever, but I can certainly do better—I don't care if it's a cancer patient. You use my programs, you will live 3 times longer than anything mainstream because we'll deal with letting your body deal with the problem rather than using drugs that will always kill your body's own efforts to let you survive. And so across the board, I just want to make it very clear that the



holistic, alternative approach to medicine is the only future we have—that drugs are always loaded with side effects.

And so we're going to have to come back to a full appreciation of how incredible a healing machine our body is and how we support it doing what it can do. We start with a simple idea: I ask a patient, "Do you think it's more important that I get your nutrition deficiency?" Because how many people don't have enough vitamin D? Probably 95% of the people aren't taking vitamin D today. How many people don't have enough selenium? Don't have magnesium? It's easy to prove that you need a nutrient.

But then add to that the picture of what toxins are in your body. I repeat: We have the HANES government study showing there is no one who can pass any of the tests that measure these toxins. If you're looking for something cheap—I mean, we would like something to motivate people—some of the companies like Doctor's Data do a good job. They will do a hair test—I'm a world expert on hair tests—if there's no mercury in the hair, it doesn't prove there's no mercury in your body. You may have a gene problem, as autistic children do, and you don't push the mercury out. So you can never use one test as the answer to everything.

But we can measure urinary D-glucaric acid, which tells you a little bit, and then mercapturic acid. These are metabolites of conjugated xenobiotics and that shows you absolutely on a urine test the capability of urine to eliminate toxins. So there are inexpensive tests, and there are expensive tests.

Everybody now knows that gluten sensitivity is an epidemic. And now we're getting off of dairy, and the list keeps going on and on. You eliminate those foods, but if you don't fix your intestine by getting on my power drink and the acidophilus, you will become sensitive to rutabagas and carrots. So I need to have the body functioning properly. In order to do that, I have to go back to basic things.

And the genetically modified food that we're eating today is...

*Genetically modified* means that we built the corn that you're eating and the soy, so that it carries a pesticide inside it. The pesticide is called BT, *Bacillus thuringiensis*. What does that pesticide do? Well, it was supposed to make the weeds not grow. So you have something in your food that's making things not grow or survive in your intestine. So without thinking about it, we've disturbed the intestinal flora of everybody. To me, that's a major contributor to why we have everybody with gluten sensitivity today. We have changed things without adding 1 and 1 and coming up with the correct answer.

**ATHM:** Let me ask you, do you find more support for holistic and alternative approaches to medicine now than you did 30 years ago?

**Dr Gordon:** Absolutely.

**ATHM:** Do you find more colleagues understand what you're saying?

**Dr Gordon:** We are so accepted today that I can't get in a cab anywhere in the United States without the cab driver immediately wanting my card. Everybody is talking this way. Obviously, if you're stuck being an MD, and they follow everything you do with

a massive computer in the sky, as a lot of my MD colleagues are, [many] want to give up medical practice. They hate what they're doing. They don't like seeing patients in 7 minutes, and they are sick themselves.

So yes, it's really fun. When I started ACAM some 38 years ago, we started with a brave band of about 30 doctors. We now have over 1500 members in ACAM, and we have the Institute for Functional Medicine flourishing and growing overnight, and we have other organizations, such as the International College for Integrative Medicine (ICIM). There's lectures and meetings going on everywhere that are picking up pieces of what I stand for.

I happen to be, I guess, a little bit compulsive, driven, and I want everybody to have the maximum benefit, so I tend to not talk about just the Candida or the Lyme. You know, one conference will just be people talking Lyme, but they have trouble even spelling polybrominated diphenyl ether and they don't understand methylation.

**ATHM:** What advice do you have for physicians who want to help their patients recover from environmental illnesses and other problems?

**Dr Gordon:** My first advice is this: Doctor, set an example yourself. Join my Forum on Antiaging and Chelation Therapy, FACT. The 3000 members receive 3 e-mails from me each day, at no charge, in which I synthesize the latest information that's going on. Doctor, if you take care of yourself, so you feel as good as I do, you won't have any problem. Patients will say, "Doctor, I want to do what you're doing." And I don't cheat; I ride my bicycle—I get in half an hour on the bicycle—I do it all. But the point is that I had no choice because I never want to go back to that little sick person I was for the first 30 years of my life.

So let's set an example. Learn what you can do with your own health. There isn't a doctor alive today who is functioning as well as they could if they lowered the level of lead in their body. So even though you've been told that chelation is controversial, what's the controversy? When you have mainstream medicine right in the AMA's own journal saying there's no safe level of lead, and you have people like the Harvard School of Public Health telling you that there's lead in your bones and you have Clair Patterson saying that level is about 1000 times what it was just a lousy 700 years ago, what's to fight about? Let's do something!

Bones turn over slowly. It takes 15 years to have new bones in adults, so I need something each day. When I'm stuck behind a bus for 10 minutes and breathing all kinds of bad stuff, I need [to be] pushing stuff out faster than it's coming in. I can't stop the fact that no matter how careful you are about whatever bottled water you drink, the shower [water] is poisoning you anyhow.

So I need everybody to know that in order for you to feel as good as you can feel, you need to be ingesting things. I don't care if you fall in love with alpha lipoic acid or carnitine or coenzyme Q or high-dose C. All of them have their place. My problem is that, as an expert on this, I haven't found any one of them [that is] able to do everything, and until I added PEMF to my FIGHT general detoxification program, [my heart] was still skipping every third beat. Now, I'm a new person. It's like coming back with a whole new body.

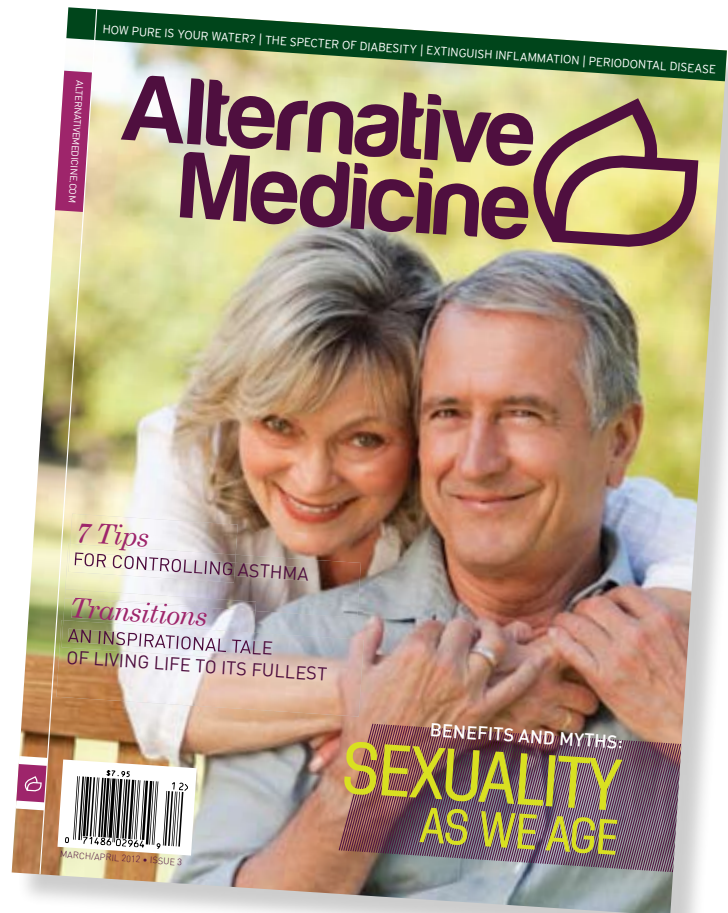
**ATHM:** And, what are your goals for the future at the Gordon Research Institute?

**Dr Gordon:** All I want is to keep America surviving. The health care that Obamacare is pushing on us will bankrupt our nation, and I want to continue to be a voice showing that there are alternatives. You see, the wealthy people like Warren Buffet, if he had any idea that with my knowledge, he could easily live another 30 years, he wouldn't have just given all those dollars away to Bill Gates and said, "Take care of them." Instead of being a billionaire, he'd have become a trillionaire because he's got the brains to support the industries that would stop the poisoning of our planet.

We would change the earth, so I just need to get the word out to everybody that if you are only 60 or 70 and you're only worth a billion, don't be nervous. I'll give you another 30 years, and you'll be a trillionaire. Government can't solve the problem. Only bright people who've amassed these fortunes can do it, and we can save the planet. We can turn it all around.

I just want to thank you so much for being willing to help try to get the word out. I'm pretty excited about what I'm doing.

For more information on the Gordon Research Institute, Dr Gordon's FIGHT protocol, his Forum on Anti-aging and Chelation Therapies, pulsed electromagnetic field therapy (PEMF), or where he will be speaking next, visit the organization's web site at <http://www.gordonresearch.com>.



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