Club Grubbery - Raw transcript of interview:

2025-03-19 – Club Grubbery – Dr Jack Kruse

Well, hi everyone and welcome to Club Grubbery. This has been recorded at 7 a. m. on Friday the 14th of March and it's an interview that we've been waiting for for quite a long time. Our guest today is Dr. Jack Cruz, who's. A prominent neurosurgeon from America who lives in El Salvador. He's been at the forefront of a lot of the medical changes that are required to happen in this world for us to actually live in a proper and functioning health system rather than a disease management system.

He has connections that go far and wide. He's well read, he's well studied and he's come up with some amazing concepts that have turned his life around and I'm sure can turn our lives around as well. We have with us today on our panel, uh, Johnny, good morning to you, mate.

Thanks, Woody. Great to be here.

Another great interview.

Another great interview. We have Dr. Paul Oosterhuis, uh, who's been prominent in the freedom movement in Australia. for some time, been fighting the medical tyranny and being very prominent in that and being outspoken and has a wonderful reputation in the medical profession. And also Professor Ian Brighthope, Professor of Integrative Medicine, who's been striving for 42 years to get the system to actually look at health rather than disease management.

Great to see you, Ian. Great to see you too, Hoody, and hi everybody. So we want to start, I really would like our doctor guest, John, to lead in the questioning because they know from their own experience what we're needing in Australia, what we're looking for, and Jack is a pool of knowledge that we can really tap into to make changes in this country.

He's been at the forefront of political change around medicine in other parts of the world, and we definitely need some kind of political change around medicine, but before we get into that, um, Dr. Jack Cruz, I, I have struggled with things like obesity, uh, I haven't been living a healthy lifestyle and already watching some of the stuff that you're talking about is really triggering me to do some, uh, different things in the way that I live.

I'm starting to recognize a whole bunch of factors. In the world that I live in that dragged me down everything from, uh, some toxic relationships all the way through to the way that we eat, our exposure to EMF, all that sort of stuff that Jack, can you just please start the journey off for us at the beginning of this program?

How you got to where you are and where you're heading with this?

Uh, yeah, it started 20 years ago. Um, when I asked myself the key question about. You know, centralized medicine and about my job. And I mean, I'll, I'll start it off for you. Um, I visited, uh, another physician who was admitted to the ICU and I looked around and I realized that the whole place was lit with blue light and things all around it, the wards were sealed tight.

There wasn't a breath of fresh air. The sun, uh, has to fight. To get inside his room, um, but the glass blocked everything around him. So he couldn't get any of the full spectrum light. There was wifi routers, medical equipment, blasting EMS 24 seven. The nurses were coming in to wake him up all hours of the night.

Every surface is completely sterilized. The air still feels dead. There's no net negative ions. There's no grounding. It's just recycled air that's heavy with chemicals. The machines beep like a never ending alarm. Uh, the walls were lifeless, gray and white. The only greenery in the room was plastic plants covered in the counter cover in the corner with dust.

Uh, oxygen is pumped through all the machines and there's still not a breath of fresh air unless myself or the nurse came in the room. The doors in the hospital are locked like nature's the enemy. And then finally you say to yourself. How in the hell is this place a healing place? And if you happen to go into this place, there's a pretty good chance you're going to be broke.

It's a Fiat hell hole that everybody is sent to. So as a neurosurgeon, I began to ask the question that Einstein posed. If you do the same thing over and over again in this type of environment, why would you ever think you're going to get health? And it led a long journey that ended in Florence, Italy, at the foot of Michelangelo statue, where I had my come to Jesus moment.

And when I looked at perfection and I looked at me, I said, okay, this is me. That's supposed to be perfection up there on the, on the pedestal. And then I looked up and I'll, when I looked at the top, there was a cornice with a little bird there and a big thing of light coming through. If you've ever been to Florence, you probably know about this area and where.

You know, Michelangelo statues kept it dawned on me right there. I said, what's different. I said, light and the biology, the circadian biology of when David was created and when I lived is radically different. And then the bird stimulated the real big come to Jesus moment was birds or theropod dinosaurs that made it through the last extinction event, just like we were, we're eutherian mammals.

So it turned out that the light event of the asteroid blocking photosynthesis. Somehow was tied to the story. And I realized immediately that story was not tied to nuclear DNA. It was tied to mitochondrial DNA. Why? Because, um, contrary to what I was taught in medical school, nuclear DNA very rarely mutates.

This is one of the big conundrums with Darwin's theory of evolution. But mitochondrial DNA mutates at a thousand fold rate, and it leads to a lot of, uh, epigenetic changes. And I thought to myself, you know, the epigenetic, uh, land, landmark of most of humans environments have changed dramatically since 1893 when Tesla came up with the AC power grid.

I said, have we filtered this in? Toward disease models has the centralized platform built by Rockefeller and deflection report that was done in the United States and has been imported at global scale everywhere, which is what you guys have doesn't have an answer for this type of new stimulus that we don't think of.

And then probably the bigger come to Jesus moment happens after I go home and put all these ideas down in something called the quilt document where I, I give 30 different ideas, levies, I named them levies because I went to medical school at LSU around New Orleans, because levies protect the city from hurricanes and floods.

And I thought about the most queer thing, Shannon's information theory. And it said for a message to be unique, it has to be unusual. So I thought, what about us in circadian biology is unusual. And then I found the answer. It was something called melanopsin. Melanopsin is a blue light detector. Blue light is the rarest light.

In nature. This is the reason why you see very few animals that are blue. Uh, and that's what makes it unique. And that's the reason why nature, God, whoever you want to believe, uh, put this in the super cosmetic nucleus and put it in our skin, our fat, our blood vessels, our brain, and I was off to the races after that.

And I realized, um, kind of how this whole process went. And after 18 months of putting this all together, I came to a different realization than some of you guys on your panel. Uh, I realized that Buckminster Fuller is correct about centralized medicine. And instead of trying to fix it from the inside, you blow it up.

Why? Because there's nothing redeeming inside of it. So if you think there's anything redeeming inside of it, you're probably talking to the wrong guy. Uh, you'll never convince me of that. I've probably had more experience than all of you combined trying to change the system. And I've done it at global scale with the biggest leaders in the world.

So, um, after all that experience, I decided to do something different. I decided to start to put my, my ideas down on the internet. Why? Cause the internet, especially when you consider medicine is very decentralized. So if you put decentralized ideas on the internet and you let them run free, then you see what happens.

Can you actually change the world with an idea? Well, uh, I think I've proved that you can. And, um, I think that's actually the hallmark of decentralized networks. There's only two that I know of one that's natural. That one is nature. And the other one is Bitcoin that's, you know, made for, for money. So this is the reason why these two networks intrigue me the most.

Why? Because they're thermodynamically efficient, they're built for efficiency. And if we use our thinking in a decentralized fashion, what does that mean that I think all the gentlemen on the panel will understand? It's pretty simple. It's first principle thinking. So we go from what we know to what we don't know, and then we draw patterns and go there and we look to nature to guide us.

Uh, and if we do that and we stay consistent, magically, we start to come up with answers that the centralized paradigms can't come up with.

Incredible. I think I need to, I need to throw to you, Ian, straight up. I'm sure you've got a million questions far away. You're on mute.

Jack, uh, what you were saying is, uh, is a sort of music to my ears because I've always believed that the, uh, centralized medicine has been bad for health. Um, and there's

no question about the data backs it up according to the institutes of medicine where the third leading cause of death for our patients that should, that should inflame everybody.

But you know, this was the problem with centralized medicine. They want to focus on the wrong

thing. I

was just going to say, I want to focus on the wrong things. We already know, at least in the United States, and I use the United States as a proxy because we've given you all your bad ideas. Um, we have spread bad ideas globally, everywhere.

So you need to realize that our return on equity, we spend more money, trillions of dollars, 3. 7 to 4. 7 trillion dollars, depending on what year you use in COVID, we have the worst return on equity. So just think about it like this. If you look at this as a business. We are losing. So that explains the chronic disease epidemics that we have.

So instead of staying within the silos that have been built, not only around central centralized medicine, but academia and really where a lot of the bad ideas in United States healthcare comes from is DARPA. Um, we need to have a new paradigm. And I really believe at least in my country, there's 360 million people of my opinion, 300 million.

Or unconscious, uh, maybe 60 million can be saved. And out of that 60 million, I truly believe that you only need about a hundred thousand to truly change the system. Why? Um, we in evolution, this is a thing that I've learned about evolution in our past, about 70 to a hundred thousand years ago, human race got down to about 70, 000 people.

And from that 70, 000 people, we now have 8 billion people on the planet. So that bottleneck tells me something. About our species that we are more than capable of coming back from our own extinction events. The problem is to come back from your extinction event. You have to remember that you have to be cognizant of truly what's causing your problem.

And if you don't understand what's causing your problem, you're likely not apt to fix it, which is why in my dealings with Bobby Kennedy, uh, and seeing how that whole thing went over the last two years. Uh, I don't believe, uh, that Maha is going to be the way. In fact, most of my tweets, you've probably seen the last two months, Maha equals, haha, it's not the way to go.

And the thing is. The things that we have to do in medicine are not, how shall we say, politically expedient or popular to centralize paradigms. And you remember what Voltaire said? It's really bad news for someone to speak up against the government when, you know, they're not in a position of power because it tends not to end well for you.

Well, that's part of the reason I live in El Salvador, but guess what? That doesn't stop me from shooting, uh, into the paradigm. And I've done a pretty good job of doing that because. Like I said, all the way up to DC, my message has been resonating and no, my mouth is in a bakery. I don't hold back no matter who you are.

If I think you're wrong, I'm going to tell you you're wrong and I'm going to back it up with some serious data.

I appreciate what you're saying, Jack, and I've come back to, uh, my background, uh, Is not dissimilar to yours, although I had a waking up when I was actually studying medicine because my background was in agricultural science and had an opportunity to think differently to the students who were junior to me when I was, when I was studying the coming out of that, I actually practiced, you know, orthodox medicine for quite a number of years, but I blended it with what I'd learned in agricultural science.

And that is how to feed the soil and feed the individual. And I've done some significant research in nutritional medicine. Uh, health of, uh, of cattle, sheep and, and so on. Um, so the paradigm for me was different right from the start. And I think you, you, you're quite right. There's a very, very small percentage of people on the planet in our populations who actually can think outside the square and can actually see, uh, different, uh, um, uh, approaches, different aspects of nature, uh, and bring that back into their, uh, understanding of our existence.

And our existence, as I said, is not in an ICU ward or a hospital, our existence is out there in nature. And if we are going to make changes, we have to make changes with those who are open to following along those lines. And that's the reason we have been working very hard here for 43 years now with, uh, with the medical profession, part of the medical profession, who understand.

What we're trying to do with the basic building blocks of life, whether it be light, water, nutrients, food, um, microbiome and whatever. So, um, I'm really aligned with your thinking and, uh, uh, I'd love to be an El Salvador myself, but because it's so frustrating here in Australia, uh, trying to make the, trying to, uh, evolve these changes.

I agree with you. It's, it's, it's impossible to do it within, but we have to work within to pull some of the people out from. Within who know and feel and understand what, um, the basic building blocks and the energy of life is. So, uh, you know, we, uh, we are kindred spirits, I guess, in that respect.

Well, I would tell you probably not as kindred as you think. I, I fully disagree with you that you should take people from inside. The paradigm. The people should come to you from the paradigm. In other words, it's very simple. There's nothing fundamental about biology or chemistry. Everything is tied to physics.

And once people begin to realize that physics is truly the foundational science, then start asking the key questions. I don't care if you're dealing with photosynthesis. Realize that photosynthesis is a quantum biologic problem that nature solved. 650 million years ago, then 50 million years later, she solved the mitochondria.

That's what we use. And these two systems, this is like a spider on a mirror. They're mirror images of each other. The exhaust gas of one is used by the other, and those two sustain. And you have to realize, prior to that event, only two domains of life lived on Earth. That's bacteria and archaea. And through a change in the environment, actually those two things fused.

To make not only a chloroplast, but also to make a mitochondria. So when you realize how light water and magnetism controlled this, everything is connected. And I'm not interested in talking to people who don't have those fundamentals down. If you don't understand the physics of life, then I look at you as the problem, not the solution.

And that's where I start because guess what? That's the first principles of life. Everything is thermodynamic and you have to think that way. And if a person doesn't, even though they're a nice guy, you can go have a beer with them, but no, I don't want to rebuild the world. With you. And I also don't believe to rebuild the world.

You need to be locked into a country. I believe, you know, much like Bitcoiners do that. We can change the world without borders. Why? Because if you had good decentralized thinkers all over the world, now that we have the internet, we can all resonate like tuning forks on the internet and you will be drawn to those people's ideas that actually are fully decentralized.

And when you point out to people that they're not totally decentralized in the way they're thinking. They have a chance to adapt. It's like the Led Zeppelin song. You have time to change the road you're on. And you have to realize that many of the things that you think to be true, you have to unlearn to relearn, you know, it's like, if you have, you know, really shitty wine from, you know, I don't know, Australia and you decide, you know, what.

I want to have some, you know, Penfolds, you know, 1951, good stuff. Well dumped eggs swell out and you've got enough room for the new stuff. And that's the way that I look at broken paradigms. I do not believe that we should waste any time or resources on doing it any other way. Why? Because when we've tried to do that in any other part.

Of either government medicine or anywhere else, we've been wholly unsuccessful. And that is the problem. And the people that understand that, you know, I thought that Bobby Kennedy was one of those guys. Thought Nicole Shanahan was one of those people in the United States. That's why I was behind it.

That's the reason I wasn't really behind Trump. I was behind Trump because he got the idea about Bitcoin, but you have to realize when you're looking at a leader to lead a flock of blind people, you're looking at to see, well, who's got the right ideas for Bobby and Nicole. I thought they were going to have the right ideas for health and Trump was going to have some good ideas about the finance.

So I thought, you know what, this could be a beautiful, you know, marriage, let's see how it goes. So we are now about 50 days into it and I have to tell you. I'm very disappointed with the health side of the equation. This is the irony. I thought the health side was the strong suit going in and it turns out it looks like Trump on the financial side is a much stronger suit in this whole decentralized pathway.

Um, I'm still holding out hope that we see a change, but right now I don't feel that, uh, we're headed down the right path.

Paul, who's to ask?

Uh, Uncle Jack, um, I'm, I was an anesthesiologist and critical care specialist for 32 years. Um, so I came from orthodox medicine. I was part of the, the, the, the church and I enjoyed, uh, I enjoyed the practice, but I got handed out in 2021 because of Facebook posts where I was just talking science.

And that's all I've ever done. Just just look, look at this paper. Let me explain what a PCR test is. Let me tell you that there's early treatment. You know, I, I was one of those heretics who believed that you could you early on that you could treat the so called COVID with, um, hydroxychloroquine and, um, vitamin D.

And, uh, I haven't followed your work for very long, but I find it Amazing. And I think we have to talk about it. That's why I was so excited to, to, to come on. And in fact, Uh, I'm such a mitochondria now that I'm got the sun

rise on my left. So I'm, I'm glowed in this morning sun, and I was, how am I gonna set up the, the podcast so that I can actually be in the sun and, uh, and talk to you?

Um, I, I was also drawn to your work on medical freedom. I think, uh, uh, I never went back to practice because, uh, our, our colleges just hound us. You know, if it's, it's like putting a target on your, on your, on, on, on your chest. Uh, I couldn't talk about any of the things that I talk about in Australia because of the level of tyranny, uh, that we have here, uh, among the regulators.

So, um, I, I think we would've had fun in the operating field that mind you, uh, if, if, if we never got there, um. So, uh, a couple of things I wanted to ask you about. Well, many things, but, um, the constitutional amendment for medical freedom that you, you did with, uh, um, . Uh, I, I'd like to have the same thing floated up here in Australia.

Uh, so, but you know, I've, I've been involved in a thing called the Lighthouse Declaration, which. isn't a scientific document. It's just getting back to basic ethics. You know, can we talk about informed consent, um, uh, bodily autonomy and, you know, getting people out of the physician patient relationship.

But, um, uh, I want to talk to you about your leptin prescription. Uh, you know, um, I wonder whether Um, with a light, uh, we're actually computers, you know, I saw something the other day about computers being based on, uh, on light and I've always made me wonder, are we computers based on light? Are our brains light based computers?

So anyway,

that's exactly what we are. We're, um, I mean, if I was to describe life to you and I, as you, as a physician, I don't know if you read this book, but it's a very interesting book. It's written in 1944 by a very famous physicist named Edwin Schrodinger, and the name of the book is What is Life? And the craziest concept that came out of that book, when you read it, it says it appears that cells are able to do something called negative entropy.

So when you hear this You scratch your head and go, wait a minute, you know, how can entropy be negative? So it turns out we don't get the answer from 1944 all the way until the 60s and 70s when the quantum thermodynamic guys come along and we find out that if you take anything and pump light into it, That means you're using E equals MC squared, where C squared is the big one, and you're able to store that energy and not thermalize it.

That's called a dissipative structure. A guy won a Nobel prize for that named Ilya Pirozhin. It turns out that you can build ultimate complexity and have energy and power to do anything that you want to do at any scale for a long period of time. The problem is. Um, engineers have had a hard time building those things, you know, in real life, unless, you know, it's absolute zero and they're pumping laser light in, it turns out that we now know because of the work of bio, um, physicists that actually a cell is a bag of sodium chloride that's designed to do exactly that.

And how do we do it? Your friend earlier was talking about plants and chlorophyll. Chlorophyll is one of the first semiconductors that came out 650 million years ago that took the light, slowed it down to suck its power away. What does that mean to an electrical engineer? It actually means that light was effectively turned into mass because we increased its electrical resistance.

How did we do that? 12 12 electrons around magnesium that's in a nitride case, and it shows, shows up that that nitride case turns out to be really important because 50 million years later, it shows up in hemoglobin, which is the second, you know, semiconductor. And then the one that was originally around even back at that time, but not well used, then it turned out to be melanin and melanin has even a more interesting atomic structure.

Since it's so distorted, it's able to absorb all light, all frequencies. And then if it's dehydrated, it becomes the most amazing, uh, wide band gap semiconductor out there. So it turned out, what did life decide to do with it? Life decided to hydrate it with water that has no deuterium in it to make a perfect insulator.

So when you read Nick Lane's book, for those of you who don't know who he is, he's a, um, a biologist at the University College London. He wrote a spectacular book. Uh, 15 years ago, 20 years ago, maybe it's called power, sex, and suicide. Everything you want to know about a mitochondria. And in that book, he makes this unusual statement.

He says the inner mitochondrial membrane as incredible as this sounds, it's only six angstrom stick, but it has a 30 million volt charge. Okay. Now, some of the, the charges in chloroplasts that are around the photo stem also have these huge charges. Why? They're built to do the same thing, to turn light into a DC electric current.

And when I read that 20 years ago, I thought to myself, you know, that's a pretty astounding fact. It's the same kind of energy that's in a bolt of lightning. So if you're telling me that on each inner mitochondrial membrane, we have a bolt of lightning, and we have on average about 3, 600 to 12, 000 mitochondria in a cell, we're talking about a shit ton of cells.

So all the things I just said to you about, Pumping light in and storing it is not crazy. When you begin to understand from first principle thinking, we already know this. Okay. So the question becomes, okay, how do we do it? And that's when I realized that nature did something pretty amazing after she made chlorophyll.

When she made the mitochondria, she put cytochrome C oxidase, a heme based protein, again, remember we're at the heme story because the hemoglobin and it makes deuterium depleted water. This is water. That's racist, hates all other forms of hydrogen except light hydrogen. So I started to ask myself, well, why would nature do this?

And then I got the answer pretty quick because water that has no solutes or no deuterium in it. Is a comperfect insulator for electric current. So it turns out that's how she keeps the electric current in the system before it gets distributed. And then another famous doctor who is probably my mentor, how I really got in this space named Robert O.

Becker writes an amazing book in 1985 about his life in science before DARPA ended it about how bone regenerates. And if you read his work in the sixties. The most amazing thing, this will blow all of you away if you're not science based or you haven't read his work, he found that there is a DC electric current in every plant and every animal on the planet, but the one that heals our bone does something truly amazing.

Takes a red blood cell with a current that's one trillionth of one ant mere, turns that red blood cell into a stem cell, that stem cell is what regenerates your bone. Bone doesn't heal, just so you know, it regenerates. When it regenerates this way, you won't see a scar on the bone, and you know, you're an anesthesiologist, you know that when they go back in after a broken leg or a broken bone, if there's no plates and screws on it, there's absolutely no scar, and Becker is the guy that figures this out in the 1960s, so I started to ask myself the question, well, if all these things are true, How the hell does it happen in us?

And then I found out that when you hydrate melanin and mammals are specialists in melanin, it dampens electric currents to one trillionth to one amp. And then I started to realize, guess what? You guys live in an island where they got slip slather slop all over the place. You guys are wearing sunglasses.

You're doing everything you possibly can do to actually guarantee that people stay unhealthy because you believe the bullshit that the dermatologist has told you. And you know what? Not one of you, not one of you in dermatology in Australia have ever read Becker's work to realize what he said. And then when you find out some more of the science that's been done in the 20th century that's been stripped out of books, that mitochondria through the, the process of.

of metabolism, create ultra weak bio photons. You want to hear the crazy part guys? Guess what frequency the light is in? UV. Okay, now all life emits UV light, but the dermatologists and ophthalmologists are going to tell you that it's bad. So when are we going to sit down with these idiots in power and say, you have to explain this to us?

Because we know this is true. This has been replicated in thousands of labs now. If you have a photomultiplier, you take any living thing, and you see the UV light coming off of it. So guess what? It does turn out that Ilya Pirozhin was right, that we do collect light, and we store it. And we emit it through the process of metabolism.

And it turns out that light signals everything in our body, what to do.

Uncle Jack, you know, I, I, I was listening to you in a podcast. I think it was take a breath recently. And you were talking about the role of latitudes, which relates to your sun exposure, um, uh, about, you told us about MS. You were telling your nurse, I'm landing in Amsterdam.

You're going to see someone with MS. And you talked about triple negative breast cancer. Am I for it? You know, I'm a member of the Mouse Army, you know, Jicky Leakes and Jessica Rose and Kevin McKeown, McKeown, I'm sorry, you know, I was part of the SV40 story release here in Australia, and we should talk about that because that's a big thing, but my point is, I, I thought, okay, Let's fact check, Uncle Jack.

And sure enough, I could find, you can find a relationship between, uh, breast cancer and latitude, and multiple sclerosis and latitude. And, and I saw that all the confounders are going oh, socioeconomic and different systems and screening and, no, Australia is It's pretty uniform. It's one country, but lots of latitudes.

So it was a good place to study that. So, um, my point is that light is important. One of your great insights, uh, apart from decentralization, which I'm completely on board, I, um, I became a Bitcoin investor Some years ago, probably still too late, 2017, uh, I eventually got there and, um, I'm very much into, uh, hard money and, and decentralized, uh, solutions.

And that's why when I heard, when I heard you were talking about decentralized medicine, I, I was, I was drawn to it because I, I. I, I've given up all hope that our politicians and our current structures are going to lead us anywhere good, I, I say, give people the tools, and I'll bring this back in, that, um, people should, uh, should understand, if they get one thing, it's about the importance of light, you know, um, that it's importance in its role in health, you know, um, I, I was into the vitamin D because I, I saw a strong relationship between, uh, mortality and vitamin D levels, Dr.

Pomerick. Um, uh, talked about that from the FLCCC and it was one of the things that they came after me for talking about vitamin D. And I think your view is that vitamin D, if anything, is most importantly, a proxy for sun exposure. Um, it is

also a proxy for the integrity of the inner mitochondrial membrane.

Like the, the number one thing that kind of ties some of your questions together with the first gentleman, like I'll give you an example of just how far Off the beaten tracks. We are, you know, in 1924, famous guy that I think you've all heard of Otto Warburg came out with this idea that cells can make this weird kind of metabolism that seems to be associated with cells with cancer.

Now here's the funny part of the story. When I first learned that. I learned it just like every other centralized doctor did, and I said, you know, that's interesting. And I learned all about it, that it's really tied to glucose metabolism, alanine, and glutamine. I said, okay, I got it. I said, do we use, I just asked a simple third grade question 20 years ago.

I said, is there any part of the human body when we're healthy use the Warburg metabolism? Why? Because I knew that if that was true, then that means it wasn't associated with cancer. It means that there was another

answer that we didn't know. And guess what I found out from Nicholas Bazan, very famous ophthalmology researcher.

The fovea on the retina uses a Warburg metabolism from the time you're born to the time you die, unless it's diseased. So when I heard that, I was like, okay, now I have to make sense of this. Okay. So I went back and read all the work, all the guys that I told you, Doug Wallace, Nick Lane, uh, Fritz pop, all the guys in biophysics, Roland VanWyck.

And I started to realize that the Warburg shift isn't tied to food. It's actually a photo bioelectric change. And I'll explain to you. So I'm going to use my fingers here. Hopefully this, this podcast will have a video. But this is cytochrome one, and this is oxygen. So this is NAD. So realize that everything between my fingers is the inner mitochondrial membrane, oxygen is electronegative.

So it pulls electrons through. So this is where the 30 million volt charges. And this is where we make ROS and RNS. So, if water is protecting this and it's a heme protein, if that goes away, the electricity gets out, do you realize that giving somebody oxygen creates electrocution inside the cell? That's effectively what happens.

So, what does the cell do to protect itself from the electronegativity of oxygen? It says, we don't want to use the TCA cycle. It goes back to the first gentleman I talked to about chlorophyll. It goes back to when nature was two domains of life, bacteria and archaea, past 650 million years ago. That's when we only use glycolysis.

So the interesting thing is, it turns out that blue light is what destroys heme based proteins. So blue light is the thing that determines when a Warburg metabolism is used. So it got me thinking, I said, Warburg figured this out in 1924. I said, That's about 35 years after everything was blue lit so it started to show up there Nobody to this day Has figured out how this happened.

So along comes, uh, a couple of guys that worked with DARPA that was tied to Alan Frye, Robert Becker, and a couple other people. And they noticed that pilots who are sitting in a cockpit in 1969 in Pensacola, when they have all this blue light, their triglycerides go through the roof, so does their cholesterol.

And so does their blood sugar. Then they study it. And then a guy finds out that, Hey, guess what? When you're in blue light environments. Your blood glucose goes up. Then one of Anthony Fauci's friends who starts to run the national institutes of drug abuse, her name is Nora Volkow. She does a very interesting study in 2011 and children who have psychiatric problems, put cell phones up to the side of their head and finds out that it raises their blood sugar and their insulin just from light.

They don't eat anything at all. So now there's multiple papers published. But actually blue light does this. Then guess what happens 18 months ago, a paper comes out that shows if you shine red light on a person, it reduces. Their blood glucose by 30%. So then do a hard stop and then ask yourself the same question I did back 20 years ago about the fovea and the Warburg metabolism.

So what is it about red light? That's unique. And then I got the answer. Our star called the sun is a G class star. 43 percent of the light in the sun is red light, infrared. Hey, so guess what happens if you live. In a world that has full spectrum sunlight, it's almost impossible to get elevated blood glucose.

Guess what happened? All the people that have got all these chronic diseases, they all have a Warburg metabolism to a different degree in different parts of their body. Why? Because the choices that we made around light Have radically changed. And see, this should fit the gentleman with the white shirt there.

Why? Because any moron knows when you go to a farm, and you put water in the ground and nutrients in the ground, you put a tarp over the orange tree, you're not gonna get oranges. But somehow We don't seem to get that message when it comes to people, when we tell them to wear sunscreen or clothes or animal skins or put artificial light in the, in the pyramids at Giza.

This is the reason why we dig up the Anubian bones on the side of the Sphinx and we find out they're perfect. And the same guys that live at the same time 5, 000 years ago, who lived inside the temples with artificial light called fire, they all have the same diseases that we have today. And how do we know that?

Cause we CT their remains in the sarcophagus. They have exactly the same diseases.

Uncle Jack, when you mention the Warburg metabolism, are you talking about, um, glycolysis? You're talking about the switching off of the, of the mitochondria. It's a

light mediated phenomenon. It's due specifically to blue light.

But that, we have guys in the United States Writing books talking about, Hey, Warburg metabolism is tied to food. No, it's not. It's a photo bioelectric switch. It's a redox shift due to light. And guess what? That is the basis of every single disease. Known to man right now. I can tell you that and am I about proving that to the people that are in power?

Oh, yes, I am knocking them dead right now with that data

It seems to be important with cancer to it. Of course, that's today's back to SV for you know,

what shows You know what proves it? This is the reason why I love Covid. Covid is the greatest thing that's ever happened to my paradigm because everybody knows in the aftermarket data, where's this turbo cancer coming from?

Because this is just like a duration effect. You're an anesthesiologist, so I think you'll appreciate this. So let's make this really simple. Put my two fingers up before and I show you NAD and oxygen. When someone has a RDS in the unit and we go up on our FI O2, right? What happens? Their liver goes, their heart goes, their bones go.

This happens acutely over 24 to 48 hours. And we all act like we don't know what's going on. It's because every, but that person in the unit is got warbler metabolism everywhere, and we're raising the oxygen up. To pull this through what comes here, that electric currents bouncing everywhere, making ROS and RNS to destroy every organ in their body.

We killed the patient because we thought they needed to have an SAO two of 92%. Biggest stupidest mistake ever. And guess what? We don't realize that when we give somebody a jab and it's in a liquid nanoparticle, guess what that does? That liquid nanoparticle goes and destroys the same cytochrome C to get rid of the water.

And that 30 million volt electric currency goes out. You get an immediate Warburg shift like this in a couple of months. And guess what happens? You walk in as a 30 year old and you get told that you have a grade four pancreatic tumor and you're going to die. And we act like. This is like shocking, guess what, the science all the way from Otto Warburg to now completely explains it.

The papers are published, you know what the problem is my friend? Nobody connects the dots. There's

the problem. You know, I, I, I often think it's, it's, it's, in some ways it's far more intuitive, um, in terms of sunlight. Exposure, you know, I was listening to a Peter Singer broadcast, and he was talking about how the Hindus on the Ganges, they, they, they come and watch the sun, you know, they treat Ganges like their mother, and they're there to wake her up in the morning and put her to bed at night, you know, I, I'm blessed to be, to live on, on the coast here.

Yes, I've got a 5G emitter, uh, 200 meters away from me, but, uh, I've got rock pools. I've got beach. I can, I can walk along the beach in the sun and, and, and grounding and get exposure that way. And before I got exposed to your ideas in 2020, I escaped New South Wales just before the lockdowns and headed north to the sun before they closed the border.

And I spent, at the time, my health wasn't very good. Um, I, I had a lot of inflammation. Uh, it was, it, it, it rested in one spot where my PSA went very high and, um, I was in a bad way. Uh, and I spent six weeks walking the beaches barefoot in, uh, in Queensland and, uh, when I came back. My blood levels have returned back to normal and they say, Oh, we thought it was cancer, but it's, it must be benign.

Um, so I,

I, I, I got more of a photo by electric signal. It's actually Becker's work that actually is an action. That's what I was going to tell you that when you physically understand the wiring diagram that nature put in us, this is where it becomes really simple. I'm, I'd be honest with you. Really having good health is not very difficult to do.

What the real big problem is, is you have to unpack all the stuff that's been put into your head for so long. And it's a really, really unfortunate thing. I'm not going to tell you that my work is going to keep you around to 120 years, but I will tell you this, you'll live to 80, 85 years old and you'll fall off the roof, replacing your roof because you won't be on any medicines.

And you won't need any doctors that I think for sure is the truth. The problem is in the different environments that people are in, it becomes much more difficult. Why? Because we don't realize that the choices that we're making in our environment, we're no longer living in a natural environment. We live in a zoo and we are now zoo animals and therefore doctors need to understand.

That what's in, you know, their book. I just did a podcast the other day because the book is right up there. My Robbins pathology book from 1986, there's a little chapter in the book that says Hashimoto's thyroiditis is the rarest, you know, thyroid disease that you can get today, it's the most common thyroid disease ever.

So what happened between 1986 and now, I can tell you it was Apple and Microsoft and Google. That's what happened. And we now know. How blue light actually causes autoimmune conditions. But, you know, when you say this to a group of physicians, you know, in another country, who's completely centralized, they look at you like, you know, you have, uh, You know, goop in your eyes and the thing is when you show them the data consistently over time, you're like, they start to go, wow, this is amazing.

And I'm like, you know, what's amazing. Look at the date on the paper. What's amazing is that you didn't know about it. Why? Because this is how medicine is. Anesthesia reads their shit. I read my shit. Neurology reads their shit and medicine reads their crap. The problem is. All of our crap side together by this basic wiring diagram that's in the mitochondria.

And the thing is, we have to do a better job teaching physicians that this is the key stuff that you need to know, understand how your patients work. And I'll be honest with you, one of the things I did. Um, and the reason I didn't get in trouble in the United States, you know, Mary Talley Bowden has faced a lot of problems in the United States because of ivermectin.

So I told her on the Danny Jones podcast, I said, look, if you would have thought about this wiser, you've mentioned the drug hydroxychloroquine, do you know what hydroxychloroquine comes from? Methylene blue. So guess what? Nobody knows about methylene blue. So what did I do three and a half years ago? I unretired as a neurosurgeon, volunteered for trauma call, and I went in into the ICU and everybody that I saw with organ failure that was intubated, I said to the, the hospitalist, I said, look, do you want me to help you out with this?

And I talked to him about Merrick's protocol. I said, now I'm going to tell you about Merrick's protocol. It's very simple. But the vitamin C acts like electrical tape for the inner mitochondrial membrane, but it's bullshit electrical tape. There's a better one. Methylene blue is better. And they were like, they didn't know too much about methylene blue, but they knew that I did know because the two, the two specialties that deal with methylene blue the most are cardiothoracic surgery.

Cause when they're off a pump, when you want to get the heart pumping or in head and neck trauma, when you want to get the brain to go back in the head so you can close the case. So the, the hospital has said, okay, I'll make a deal with you. We'll try the shot with Merrick stuff. And if we get a change, we'll, we'll, we'll go.

So he'd taken me to the sickest people, the ready, the people ready to die. And I hit him between six and 10 grams of vitamin C, give him some thiamine and then give him some steroids. And they literally see the QRS shrink. They'd start to see pulmonary function come back online. I said, okay, so the Band Aid worked.

I said, you want to see something cooler? So then we started them on a drip of methylene blue. The next day, the patient's wide awake. I remember this is a patient that was, they told the family, get the affairs in order, they're going to die. So what did I start doing? I started to go to every single patient in the ICU, but never told them what I was doing.

And it didn't matter what they had. Sometimes they weren't even neurosurgery patients. And they were like How does this work? So what did I keep the story to? I kept the story not to COVID. I kept the story to, Hey, let's talk about mitochondrial medicine. And I gave him the story of a John Deere tractor.

So your tractor friend, you're we'll like this. So I said, if a farmer has got a tractor and he wants to make some food, but he finds out the wire that comes out of the engine has all the black, uh, plastic pulled off and he doesn't have any electrical tape, what's he going to do? He's probably going to have to call the mechanic, right?

So if he has electrical tape, he puts it back on, starts the tractor, it works great. I said, what if I was to tell you that your patients are the same way? The problem is, if this is a power line jumping after a hurricane, we can't call the patient's, you know, energy company and say, hey, can you turn this off so that we can turn the power off?

Because they'll be dead. So what do you do? Turns out, vitamin C, Is it a cheap form of like masking tape? Methylene blue is electrical tape And when you begin to see it work, they kind of go, Hmm, then you'll appreciate this, the anesthesiologist. And I said, okay, now that we've kept the electricity in the system, I said, now we have to distribute it.

And they're like, what are you talking about? So, well, you know, that neurosurgeons are really good with 3 percent saline. I said, we're going to start your patient on hypertonic saline. And they look at me like, are you kidding me? I said, no, we're going to electrocute the rest of their organs. With 3 percent sailing.

And that's exactly what you did when you walked on the beach with your feet, just so you know that, except you aren't as efficient as the way I can do it in the ICU, because I know how to do this. So when they gave him the 3%, guess what they saw, everybody started waking up. And then they were like, how did you know how to do this?

And I started showing them, I said, This is Richard Wright's paper that was written eight years ago. People that are on the heart transplant list, they do better if you give them 3 percent saline. And they had no earthly idea. I said, well, guess what? Your patient is an acute heart failure. Not on the list, but gonna die.

So why can't we treat him the same way? Because guess what? The mitochondria works the same way. The difference is this person in front of you has complete mitochondrial failure everywhere in their body. So you have to begin to help them by being an electrical engineer to distribute the bioelectric tone.

This is like a triple a jump to their kidney, to the heart. Magically, the kidney disease started going away. The glomerular function got better. The BUN and creatinine ratio got better. There was even one person in the ICU. Who had tinnitus in his right ear. He wakes up, gets extubated, and he goes, I'm not hearing ringing in my ears anymore, after 20 years.

And his wife was stunned. And then I explained to them, how that happens. And I said, guys, it's not that hard, because guess what? You walked into this ICU, you're controlled of taking care of these patients. And they're all dying. So you have a duty as a doctor to think about what's in those damn books and then think about the problem in a decentralized way, and then you make a determination.

Are you going to let your patient die because the algorithm that the medical staff bylaws has, or the CEO gives you, or the head of the department, or are you going to do it the right way? And I'm going to keep showing you papers that are out there that support that crazy may work. And guess what happened after three and a half years?

It changed.

Ian Bryant, you must have a hundred questions Ian, go ahead.

Oh sorry, I was just going to say Uncle Jack, I was in critical care for 32 years, um, and I have used methylene blue. Um, and you're right, your approach when you've got a patient in front of you is you do whatever you can to save their life.

But we did it in COVID. But we did, no, but, but, but what's, what happened five years ago, which is when I withdrew from my practice, um, um, was, was, there was no longer the ability to be a doctor. There was no longer any license to, to be, um, to be outside the box, be outside the protocol. We've got a Dr. Maile Trinh here, one of my friends, who's being persecuted in a, in a tribunal for the crime of actually treating a COVID patient who refused to go to hospital, and she used ivermectin.

and steroids. I mean, how nuts is that? And I'm going to the tribunal watching her inquisition. So this is why I'm more on your side when you say, um, medicine's dead. This, this paradigm is dead. Hell, this financial system is dying. Um, I think this governance system is dying. Um, I, I think we're building a life raft here for Um, because the medicine I knew was dead and gone, in my opinion.

Uh, you're still talking about

it. It's time to put it away. It's time to put it to bed and realize there's another way to do this. And I really believe that I can teach this paradigm directly to people on the internet. As long as the internet stays distributed and you understand that right now in Europe, your country, probably Africa, different place like that, you guys are Now, censoring the internet, that is a huge problem.

So, we don't have that problem in the United States or El Salvador. And I didn't have that problem during COVID. Why? Because one of my patients was Jack Dorsey. And Jack Dorsey was not going to, you know, silence me. You know, I made sure I have friends in good places. So, if you know anything about him, he's also big into Bitcoin.

So, he had a huge problem with technology that was killing him. And I helped him, so that he got through it. And that's when I decided, look, I'm going to go back to the hospitals. I'm going to show the centralized doctors they're done in Kruger effect. I'm going to show them what they don't know. And then I'm going to have them come and ask me questions.

And then what am I going to do? I'm going to teach them different things. This was just like going back to medical school. Now what they didn't know, I was also looking for information that I could pass on to people like Kevin McKiernan. Why? Because I had clues. That something else more nefarious was going on behind this that was tied to my government, specifically department of defense and DARPA.

And it turned out my inclination was correct on that as well. So that's when I got really famous everywhere. Why? Because I was the guy that did things that nobody else could do. Why? Because I knew it was the right thing to do. Nobody was going to tell me not. And I was so stealth, I was more stealth than our stealth bombers.

They had no idea what I was doing. They thought I was there to help, but no, I was there to tear the paradigm apart.

Uh, Ian Broadhope, you must have a hundred questions, mate. Go ahead.

Yeah, I do. Uh, Jack, um, I'd like you to speak a little bit more about, uh, the ascorbic acid, vitamin C, because, uh, um, I started using it back in the early 80s for, uh, HIV AIDS patients and cancer patients.

And all my patients who I put into hospital got IV vitamin C. What I'd like also to hear from you is your thoughts about giving all patients, IV vitamin C, as well as methylene blue now, uh, as, as a

I think the thing that you have to understand, and this is really important when you ask all patients, you immediately the hairs on the back of my neck go up.

No, this isn't algorithmic medicine. Decentralized medicine is N equals one medicine, meaning you make a diagnosis. on the patient, understand what's going on, and if it's appropriate to use, it's appropriate to use. Um,

vitamin C. Can I come back to my point about the vitamin C?

Yeah, the vitamin C though, I think I answered your question.

I think it's, it's really good to use across all patients because it's so low risk, but for some of the sickest patients, It's not going to be enough. And the patients specifically that I worry about right now, those are the ones that took multiple shots of the COVID jab, if you want to protect them, especially if they're in an artificial lit environment, they actually need methylene blue much more.

With the hypertonic saline, like they can't go for a B, a C or a D. And I look at, I look at vitamin C by itself as probably a D. I think Merrick's protocol is probably a C. I think when you use Merrick's protocol with hypertonic saline, that's a B. But then when you use methylene blue with hypertonic saline, then I think you're getting to the a range and you have to be very smart as a clinician.

How to do that because. You can harm people if you don't know what you're doing.

Yeah, look, I was basically, uh, suggesting we correct the deficiencies that most humans have with regard to the redox status and that's using the, uh, the ascorbate in all patients. Because, uh, even, even in psychiatric patients, uh, they benefit from the, uh, the, uh, antioxidant effects of the vitamin C.

Um, and I'm, when I'm talking about giving a single nutrient, it's, it's not, not like that at all. I mean, my, uh, our approach is here, uh, to teach our, uh, our, uh, our healers, and I'll call them healers, physicians, uh, to use nutrients in the right balances and assess every individual patient. I mean, again, one of my, um, uh, strengths in my, uh, training was back in agricultural science.

We learned about trace elements and the trace elements are absolutely critical for, uh, for these patients. You know, copper, manganese, manganese, zinc and selenium and so on, uh, boron. Um, so it's, it's not just one size fits all. It's basically coming back to holistic medicine, holistic healthcare. Uh, and again, I mean, uh, we use, uh, hyperbaric oxygen.

We put people in, into, uh, infrared, near infrared, uh, beds, um, the, the total approach to, uh, healthcare, which is what you've been talking about, but I'd like to know. Not

really. I gotta be honest with you. The more you talk, the more I disagree with you. I'm being very honest. I, I don't think, I think your way may be holistic.

My way is decentralized. I don't believe hyperbaric oxygen. Has any place in the modern world right now except for diving injuries because it's so dangerous. I also think Uh vitamin c is useful But not as useful as you do and I think your idea about nutrients I am completely divorced from In fact, that's actually how my government has figured out, um, to use nutrients against us by putting high atomic weight, unusual nuclear spin things into our body that actually ruin the quantum coherence.

I'm going to tell you the other doctor who's the anesthesiologist, when he told you the story of him walking on the beach, when your photobiolectric current is optimized, All the nutrients in your cell will be completely ordered. You do not need to add things to it. And I will tell you, if you think about nature the way it was, millions of years ago, there was nobody there to balance the nutrients anywhere.

Okay? This is the biggest mistake that I see in medicine today. And you can argue to ad nauseum, but there was no agricultural science 500 million years ago, none. And guess what? The earth persisted until we showed up and it did quite well. And it made all the food we need. My belief is very, very different than yours.

And that's why I'm pushing back because no, I don't think we're the same. I think you are several steps behind quantum biology, quantum biology, I

have to, I have to agree to disagree with you on that. I mean, um, I'm not, I'm not, uh, I'm not disagreeing with what you're saying, but we do see serious deficiencies in our soils here in Australia.

We see serious deficiencies in our, in our patients and when we correct those deficiencies, we see, we see improvement in clinic conditions. Diabetes, for example, how many diabetics are very, very zinc deficient and respond to zinc? I can put them out on the beach and get them to walk along the beach and jump into the water and the sand and play around in the sunshine.

It won't make any iota of difference to their zinc levels.

Zinc is absolutely critical for the production

and storage of insulin.

I've treated hundreds of people with diabetes and never once given them zinc.

Well, okay. Well, I mean, I've treated very serious diabetics and got them off their insulin. So I got,

I got news for you.

I'm a neurosurgeon. I know I treated diabetic patients way more sick than you could imagine. I promise you that. And I totally disagree with you. I do not believe in nutrient medicine.

Okay. Well, I mean, uh, how can you explain somebody who's been got malabsorption syndrome, that they are gluten sensitive.

And they have very low levels of, uh, of these nutrients. Because they

have, they have a wide open gut barrier and that allows the new, the things to get into through their brain blood barrier. What causes that? What's the real cause? The bioelectric current that's missing in their gut, their vagus nerve, and in their blood brain barrier.

Do you know who did that study? Alan Fry, 1967. So guess what? I can make anybody sensitive to any nutrient if I open up their gut.

Alright, fine. Okay. What you

don't seem to know is that diabetics all are blue light toxic. We can prove that by looking in their eye. That is the real reason they get the problems you have.

And I, the one thing I do agree with you on the soil, the soil problem in the United States that I agree with you. But remember that's from centralized farming. I'm not, that is not something I'm going to argue with you about decentralized means that people did in the past. Was it like we do now? So yes, we screw that up royally, but to say that our patients need to have things added back to the mix.

No, see, the easiest part is they can go to a farmer's market and buy food that's not grown in a centralized fashion. The problem is they are mandated to take these jabs or get medicine that they shouldn't be taking. And that's the real elephant in the room. Everybody can easily avoid Fruit Loops 5, okay?

But you know what they can't avoid, at least in the United States today? We have 1 million children per month. Being injected with 55 elements in a jab. Okay. Some of those elements are the elements that you're talking about and that they have, their parents have no way of opting out of that system.

That's a problem.

So you tell me how I would treat, say, for example, a Vietnam vet, and I'll go back to some of the early work that we did. We did some spinal taps of these Vietnam vets and found that their spinal fluid was very, very low, if not deficient in vitamin B12 and zinc. Yeah. How in, how would you correct that those abnormalities in these people who are suffering from psychiatric and neurophysiological problems and, and what's

the effect of vitamin B12 in the body?

Do you know? I do. Yeah. It's a photoreceptor. Did you know that? Yeah. Tell me what the emission and absorption spectra are. A vitamin B12 since you know,

that's not my specialty. I'm sorry. It

is actually if you're a doctor, I got news for you. It is. And what does it tell you? The absorption and emission spectra tells you exactly what the deficit of is the patient.

And that's what you don't seem to understand. You know what zinc acts like in our body. It's a doping agent on the semiconductors at work. And you don't even know. That that science was done also by Robert O. Becker. So guess the real reason why zinc is important? It's because it alters the bio photon release in mitochondrial DNA.

But when you get that bioelectric current right, guess what magically happens? Everything realigns without you, being an electrical engineer, getting in the way. So what do I do? I fix the bioelectric current first. Then see what the patient does and magically guess what we can get rid of subacute combined deficiency Even when they have a b12 deficiency in their belly or in their CSF and I've done it Hundreds of times and I've done it differently than you because guess what I'm trying to explain to you and the audience Your focus is down lower.

My focus is a little bit different. I'm going to the quantum level of where the problem is. And this is, this points out a big difference between centralized and decentralized. Every single chemical that I have looked at in my career, after my eyes were opened up, the first question I ask is, tell me what the absorption spectra is?

And tell me what the emission spectra is. So I'm going to ask you, you're a doctor. Tell me what the absorption spectra is of cytochrome one in the human mitochondria, but you should, it's 340 nanometers. So guess what? It says that all carbohydrate electrons come in. At cytochrome one, guess what it is at cytochrome two, it's in the blue frequency.

So where does that, all the electrons that come from protein and fat enter there. So you have to start asking yourself a question. How does the electrons know where to go? And it turns out it's a light story. And what do we know about diabetics? Diabetics can't make their superoxide pulse at cytochrome one.

Why? Because they're all blue light toxic. Every last one of them. And you know how I can tell that? Because I can put all their, their blood, their urine, their CSF in an EPR machine. And I can see where the mistakes are and then point out to them. And then I sent them to the ophthalmologist, the ophthalmologist, to look in their eyes and say, everything's okay.

And I said, really, then I send them for an ERG and OCT. And you know what, we find out that they're not normal because guess what? The tools that the ophthalmologists are using aren't biophysical tools. They're tools that they learned about in centralized medicine. And the point that I'm trying to make to you.

Is that I'm, I'm trying to do the same thing that we did in neurosurgery a hundred years ago, we used to operate open the head without a microscope. Now we use microscopes to do what we're doing. What I'm saying to you is when you know, the absorption and emission spectra, this is like an internal medicine doctor using a microscope all the way down, seeing things that you have never seen before in a patient, and you've become way more efficient at treating the patient.

Well, and what I'm saying to you. Is that your education that you got from big pharma through the medical school, they dropped you off at a certain level. You and I suffered for the same problem. I got off of that train 20 years ago. I went to this level because I realized, I did it very simple. We only use four amino acids and they turn up, I should say four aromatic amino acids, and they turn up in all these most important chemicals in our body.

So I asked a question. What's the absorption and missing spectra each one for, for example, the biggest one talk about melatonin melatonin absorbs in the UV, but we call it the hormone of darkness. That's what that means. We don't make melatonin at night. We actually make it and resorb it in the morning.

And guess where we make 95 percent of it in the mitochondria. We don't make it where everybody else thinks we make it. So there's another story. It's the biophysical story. That's not in our books, but yet when we go to our friends in the physics lab, they have all these fancy machines that can tell us this stuff.

We can actually give them the chemicals and they'll tell us, yeah, this is what it absorbs at. This is what the emission spectra is. So then you can put it in your framework and go, okay, how does this really fit? And then you start asking yourself the question, how much do you really know about light? How much do you know about electrons and protons?

Because remember you're a doctor like I am. What's the input to mighty conduit? It's called electron chain transport. There's not proteins, carbohydrates, and fats. It's not. So you have to realize, if you don't know enough about light, biophotons, electrons, and protons, time out. Then you can't tell me we're going to use vitamin C on everybody.

Because guess what? Vitamin C operates on those places and does some very specific things. And in my opinion, you need to know how to do that. Because guess what? There's going to be patients that you use it in. That it doesn't work out so well. So then what's the next step? And my point to you is I'm just trying to show you there's another layer to this onion that you may not have been exposed to yet.

That's all I'm saying.

You know, I appreciate that, uh, Jack, uh, a couple of things, uh, your infrared light, uh, and cancer patient management. And I'd like you also to give us some ideas about those people who are actually undergoing hyperbaric oxygen therapy. And I know you don't like it, but they, they have also high dose intravenous vitamin C at the same time.

And the third thing is cancer. Patients are okay

with Vitamin D. Cancer patients. Cancer patients, I don't have a huge problem with vitamin C, but hyperbaric oxygen is a really bad idea. Why? Because they all have Warburg shifts in the tumors. And in the, in the organs that the tumor is in, if they got metastatic diseases, especially I told you the story already, if you have cytochrome here and you have oxygen here, what does hyperbarics do through the tissues without going through the lungs?

You're increasing oxygen density. So what does that do? It makes more or less. So, in my opinion, that's not the thing to do. The red light is spectacular to use, but the key with the red light. is how you use it. It has to go through the physical laws. So there's a law that determines the biphasic use of light, especially red light.

It's called the Andrew Schultz law. So that means you only need a low intensity light and you probably only need it for about for cancer patient. I'd say most 20 minutes, maybe three or four times a day. Then there's another effect that people don't know about what red light is. Okay. It's called the abscopal effect of light, where say, like, let's make it simple.

Say one of your patients has an ongoing melanoma on their toe, but you decide to put the red light on their torso. Can you still help them with photodynamic therapy to help the cancer on their toe? Yes, because light has this very unusual finding called the abscopal effect, where you can get the effect distal.

It makes no sense in centralized medicine, so it does help. So red light, in my opinion, is one of the brilliant things to use. How you use it, I think, depends. On what you make the diagnosis. So I'll give you an example. If I have somebody with a tumor who is really like you said before, say they have a malabsorption syndrome because they had some surgery done for colon cancer.

Uh, I'm going to hit that person with a very specific frequency of red light. Why? Because my red light bed in my clinic, I can dial. And I'm going to target the emission absorption spectra of cytochrome C oxidase. Why? Because I know that patient needs to make more water to block that problem in the mitochondria.

The other thing I'm going to do is I'm going to give that patient deuterium depleted water to drink. And I'm going to do it probably at 10 to 20 parts per million. If it's, say, somebody that came in, I don't know, let's say, breast cancer, three years remission, I'd probably only make them drink maybe Icelandic water or maybe Preventa that's at 100 parts per million.

I would probably only tell those people to use red light maybe once a day at 20 minutes of time, especially in the area they've been treated. If it's a patient that has, say, say, breast cancer that's been irradiated, they get peddled to the metal. Why? Because radiation destroys. Even the normal tissues ability to make a water.

So these are the people that you need to treat the most aggressively, especially with red light, especially with deuterium depleted water. Some of these patients, you cannot use vitamin C and because it actually makes them worse. Some of them, you can't use methylene blue in because it makes them worse.

Uh, but red light tends to help them tremendously, especially with the scar tissue, and can you even improve the scar tissue from radiation damage? Uh, three, four, five, six years down the pike, the answer is you can. The thing is, that's when I use different protocols. I'll, I'll use pulse red light and I pulse it at specific frequencies.

So, if you know all the targets of cytochrome C oxidase, 620, 680, 820, and uh, and 720, I target them based on what I'm seeing. On their MRIs, on their, on their CT scans, and basically on their basic labs. So I'm looking for some very specific things. Sometimes, in the cancers I treat, especially the brain tumors, I'm very interested in their arterial blood glasses.

And before I treat anybody with any type of oxygen, I think our anesthesia friend will appreciate this. Um, and you'll understand why, because I'm going to tell you something about this that's important. When you know that you have somebody with a tumor, their blood gases show that they're, say, below 92 percent.

You have to be very, very careful. You have to almost treat these people like they have COPD. Why? Because oxygen becomes a toxin for them. So, in anesthesia, how did I learn this lesson? When I was a young resident, I used to always notice when the anesthesiologist did an induction, they gave them halidane or isoflurane, whatever the hell they were using.

It was always a halogenated The patient would start to piss out a ton of fluid, and the anesthesiologist would see widening of the QRS, they'd start to have problems with the rhythm, so all the anesthesiologists learn this early, they would open up the fluids wide, and of course, me as a neurosurgeon, we'd always say to the anesthesiologist, You're trying to kill our patients with fluid.

See, he's laughing already, so he knows it's true. But the reason why this happens is because, remember, the halogenated, um, um, anesthetics are doing the same thing oxygen is. Remember, they're all in group seven. Well, oxygen's in group six. So they're very electronegative atoms. So they're pulling electrons through.

So if your patient has mitochondrial damage, you giving them oxygen could be the worst thing to do. And the only disease. That I know you guys as medicine doctors probably will understand this best as COPD patients. Why? Because you know, if you give a COPD patient oxygen, you can actually decrease their drive to breathe.

But you don't understand the reason why. It's because their inner mitochondrial membrane is destroyed. We see it, him and I, see it in the ICU when people have ARDS. It's the biggest mistake. That hospitalists make it's the biggest mistake the functional medicine guy or the holistic guys make that they think They look at the sat rate and say, Oh, you're at 92%.

We need to get you to 97 or 98. No, you don't. You need to understand breathing is an electromagnetic phenomenon. Just remember the ATPA spins. So you remember Michael Faraday from the 1850s, a wire that has a spinning head makes an induction current. So we now have machines in nursery called Meg machines.

I can measure exactly what the magnetic fluxes of the brain and the heart. 22 feet away. So it turns out I've done this in people that have low, uh, oxygen tensions, their magnetic flux in their mitochondria is down. So what has that taught me over the last 20 years? You cannot treat people that have a Warburg metabolism by using oxygen, because if you do, the other interventions that you're using on them may mask that you're actually harming them, and you may not know that.

But guess what? We do those tests on the people when we're checking them out. I want to know before I put somebody in a dive, it's going to help. So I'll give you an example. The one time in my practice that I use HBO is for osteoradione necrosis. Or for really bad infections before everybody goes in a tank.

I always put it through a Meg machine for their brain and the heart always. That's why I do it. And the reason why is sometimes before they get in, I'll hit them with methylene blue, or I'll hit them with vitamin C. Why? Because I may be able to protect them, but I don't want to tell you how many times that I have been called by other colleagues have used HBO and they've gotten into trouble.

The patients get hypoxic or they come out with horrible pains in their, in their muscles. It's almost like they've been put on acute statin toxicity and their cognition is bad and everybody's worried about it. And I keep telling them they have an oxygen allergy. And you know, we are not taught in medicine to understand that patients can get an oxygen allergy.

And it turns out the patients that get it are the people that can't utilize the TCA cycle. Turns out when you are forced to use glycolysis, oxygen is a toxin. So therefore, you need to be careful with it. And that, those are the points that I try to make to you because guess why? You need to understand this.

Oxygen has another unusual character that I don't know any of you know. Oxygen is the only gas on the periodic table that's paramagnetic. Do you know what that means? It's drawn to magnetic fields. The reason that we started to use it is because of that FO head. That's why oxygen is drawn there.

Everything about breathing, everything about mitochondrial function is quantized. The amount of bio photons made and the amount of oxygen there are quantized. And if you do something to add Some more to the mix and don't realize that the signals that come out of the mitochondria are what destroy other things down the system.

That's why you have to be careful.

Can I, uh, can I bring in a very simple question because this has been fascinating watching three medical professionals, um, going to it on this, on these issues. It's, it's a, it's amazing. A lot of our audience are going to be really tuned into that. But I want to ask you a question, Jack, because I'm about to go to the beach for a week.

Just to get a bit of peace and quiet. And I've got to ask you, every time I see you, you haven't got a shirt on. Do you ever get sunburned?

No. And just so you know, I said the reason why this is important. I'm glad this is a great question. I have to be honest with you. So realize that even the story of our skin is an electromagnetic story.

The story of the software that comes in our mitochondria is called haplotype. The guy that I told you before, Doug Wallace, he's the guy that figured all this out. So, Australia is very unusual. You guys are really unusual cats. Why? Because you came from Northern Europe, you made a pit stop someplace else, and then you came down.

So, Australians have very unusual haplotypes compared to other Northern Europeans. So what happened when you did this, you're really not adapted for Australia. Okay. This is the reason why you have light eyes and you have white skin. The people who are adapted best for Australia, the Bush people that live in the middle and you know, they look a lot different than you, but here's the interesting, so there's a famous guy.

That you probably have heard of, since we're talking about oxygen, his name is Lavoisier. He's the guy that, uh, discovered oxygen. Do you know that the people who came from Northern Europe that wound up in Australia, do you know what they used to do? They had barber surgeons when we thought that was a smart move.

When they were up in England, they would bleed the soldiers and the blood would come out darker so they knew they were doing good. You know that when they got into the tropics in the top of Australia, the same people they bled, their blood was more red and the doctors thought they hit arteries and it turned out that they didn't.

So Lavoisier was the guy that figured out that there's some type of shift that changes the color of blood with light. Then along a hundred years later comes Doug Wallace and he finds out that people that live in Africa, they have L0, L1, L2, you know that those people have a lot of melanin in their skin, just like the people in the bush.

But when they left, guess what happens? They start to lose the melanin on their exteriors and their eyes and they start to look like you and me. So you understand that I, my people come from County Cork, 59th latitude.

So

I am built not for that area, but why can I sit out now at 13 North latitude? Because I built up a solar callus.

So you remember we talked about red light earlier. This is gonna stun you. So before you go to the beach, I would tell you 20 minutes, three times a day, red light on your body. Why? I have pictures on my solar callus blog of patients that I did that shows when you take a white ass that has no melanin and you put the red light on it, you are better able to absorb UV light and you don't get red.

So then guess what else? I started to look at the absorption and emission spectra of chemicals that are in our skin. I found out if you take the exoskeletons of, say, uh, shrimp, lobster, shellfish, and you boil it down, and then you make that a water, throw out all the, the other stuff, you're leaving all those good things in there.

That's photochemicals that eventually wind up in your skin. So you become even better able to handle the sun. So there is a way for you as a white man to go in the sun. Cause I can tell you, you look at me, I have a gray tan. I have freckles. I can sit outside literally for eight to 10 hours a day in tropical sun and never get burned.

Well,

you have the ability and you, you just don't realize it. Cause it's atrophied. And I'm going to tell you how else I learned about this story. Do you remember the story of the guys that went on the North Pole back in the turn of the century? There's papers out there that show that their eyes went from brown to blue when they were up at the top of the poles.

Wow.

The colors all changed. So, what am I trying to tell you? Just like animals, you know that mammals In, uh, Australia, especially close to you guys, like Madagascar really shows up that mammals colors change through seasons, but you don't think that yours does, but it does. And I'm going to tell you, it even scales down to the lipid rafts.

Believe it or not, like LDL cholesterol in your skin is a wintertime, uh, lipid raft. Why? Because it has less electrons. HDL cholesterol has more electrons. So that's something that you use in the, in the summertime. Why? Because then light interacts with it more. So when I see somebody come in with a high LDL, they have low HDL and their vitamin D is low and the triglycerides are up, you know what it tells me right off the bat, they're headed to diabetes.

They're never in the sun and they're blue light toxic. I can tell that just from the lipid panel. And then here's the crazier part. Then you get the cardiologists that think they know what they're talking about. They talk about all the little particle sizes. Here's what you learn in physics. The more sun you're in, remember we talked earlier about pumping everything into a cell and it getting more thermally efficient?

Size and shape links to thermodynamics. Anybody who doesn't know this, they can look, there's tons of papers on mitochondria. They change their size and shape, the more thermally efficient they get. Well, the same thing is true in the blood chemistry. So you want to know why the lipid particles are a big deal?

The more energy inefficient you are, shows up in the size and shape of your lipid particles. So I'm going to explain something to you, like you're in third grade, never forget this when you were in third grade and you tripped and you got a high ankle sprain, did your ankle get bigger or smaller? Yeah, good.

So now you're an older guy and you go to the doctor. He says, look, you got heart failure. Does the chest x ray on you? Is your heart bigger or smaller? Oh, it's bigger. Yeah. Hey, you have doctors here. They'll tell you, I'm not lying to you. Okay. When the sun starts to lose its energy, does it get bigger or smaller?

Okay. So you got three things bigger. So why don't people ask you when you're a fat ass and you're getting bigger, they tell you eat too much, but it turns out it's not true, but actually your mitochondria aren't as efficient, so you get bigger. It's the same reason why elephants are bigger than mice.

They're designed to live in a different environment, just like people are. So the bigger you get. You're less efficient. So guess what? I'm trying to tell you, how do you shrink yourself by going to the beach, build your solar callous up, get your melanin in and magically you will be able to come back. Now, I don't know if you can do it for a week.

If you're going up to like Queensland, you may get French fried, but if you were to talk to me a week before you went to the beach, I would have told you 20 minutes, three times a day with the red light, you just make like a rotisserie chicken, eat a ton of seafood, you wouldn't get burned that week.

So where do you get the red light from for a light person?

Infrared sauna?

No, no. Sauna is garbage. Cause it's too underpowered. They make, uh, these commercial lights. Now, the one that most of my patients use, I think you can buy an Amazon. You could probably get it in, uh, in, um, Australia, but EMR tech and you spell it, EMR dash T E K. But I will tell you, there's plenty of red light.

Uh, people out there. And usually I would tell you get a one foot by four foot, because that way you can put it on the back of your bathroom door and hang it there. And then you just make like a rotisserie chicken. You know, you, I would tell you do 10 minutes or better. Five minutes on the front, five minutes on each side and five minutes on the back.

That's it. You do it three times a day. And will your wife love it? Yes. It'll make her skin better. She'll feel like she's younger. You'll notice it helps you. I mean, there's a story that I told on, um, another podcast that you may like my. My father in law is a crazy bastard. He's a military guy. He's now 83 years old.

So after a hurricane in new Orleans, he goes on my roof with a leaf blower and he's going to blow all the leafs out of the gutter. And I'm like, are you crazy, Dave? What are you doing? You know, but you can't tell a Marine anything from the United States. So don't you think he falls off the roof? He's got a knee replacement.

He, the knee replacement has a keel in it. Like you see in a boat splits his tibia. I looked at his eye cause he had a cataract. I thought the cataract moved. I thought he had a concussion. He was miserable. We sent him to the hospital. So he comes back orthopedic surgeon tells him, Hey, look, after your bone heels, we're going to probably have to replace your, your, uh, knee.

And, uh, you're probably going to have a problem with your eye. This and that. He calls me up two days later, he's at home in the cast screaming. He goes, Jack, they put me on Percocet. He goes, I can't take a shit from the Percocet. He goes, I'm miserable. And the pain hurts. I said, Dave. I'm going to give you the keys to my clinic.

I have this big, huge red light that we build for NFL and NHL players said you sit in front of it 20 minutes a day, three times. Okay. I said, you'll do fine, but I have these goggles cause it's very intense light. I said, I need you to put the goggles on. So of course he's a Marine. He doesn't listen to me at all.

Okay. He sits naked in front of the light. Two weeks later, he goes back to the orthopedic surgeon. They can't find the fracture in his, in his leg. He's walking without the cast because he took it off. Three, four weeks after that, he goes to the ophthalmologist to look at his eye. He was previously diagnosed with AMD.

You know, he used to have to get the shots in his eye completely gone. The guy says to him, you don't have AMD anymore. So here's where I'm going to tell you that the patient knows better than the doctor. He didn't listen to me at all. He, he sat in front of this light and you know what he told me? He goes, Jack.

It got rid of my leg pain like right away because it was better than the Percocet. And he goes, and then I could take a shit. He goes, I'm not going to listen to you. He goes, I'd rather take a shit and not have any pain. So here I am sitting there listening to this story. This happens like four years ago and he made me laugh.

So I went and started pulling the papers to see how the hell we could do this with light. And it turns out, guess what? I found Japanese papers. That this actually works and I sat him down. I said, you just taught me something. He goes, look, I don't really care. He goes, I just didn't want to walk around with this thing and anything else.

And look, he's, you have to realize 84 years old. Now they're not supposed to heal well, according to centralized medicine. Not only is this guy heal well, he gets rid of his AMD that the doctors have been injecting for eight years.

Unbelievable. Johnny, you must, we haven't had a chance to sail that much, but you must have a really good question too.

Oh, well, look, Jack, thanks for being here, mate. It's a magnificent what you've had to say. And I think, uh, I think you've already. Uh, sort of led with this, that COVID is perhaps, uh, you know, a gift to us to, to have these conversations, which, which is, which is wonderful. Um, and I'm certain that, uh, it's like a media wars hit us, that, uh, it's a reset opportunity and, and, and hopefully people will, will, will, will take advantage of this.

Um, but I, I think a lot of our, uh, audience would be really keen to know what you think. Uh, about vaccines from the childhood vaccines through to the, the, the current MRNA ones. Uh, you know, whether you think any of them are any good, uh, or, or, or what, what's your, what's your views?

I can make, I can make a case for some of them, but I would say on the whole that I can speak about my country.

I probably can't speak about yours cause I don't know exactly what your schedule is. The vaccine schedule in the United States is obscene and it's run by a criminal cabal. And I believe it is actually tied to a DARPA program. I, if you've listened to any of my podcasts, especially the ones that I did with Danny Jones, I make that case out and why it happened.

I, through my training was in a very unusual place that I knew about the cutter event, which happened with the polio jabs, what happened in New Orleans. That's the reason I knew that SV40 was going to be in these. That's the reason why I was pretty powerful with Kevin in getting that story out, because everybody needs to know that story.

But the story of the jobs isn't just the jobs you need to understand a little bit more. Like one of the big things that people don't really get is the whole idea. There's a Nobel Prize given in the early 19 hundreds that basically shows the word that we have in medicine called anaphylaxis comes from this Nobel Prize and.

This gentleman showed anytime you inject anything exogenously into the body that it has untoward effects, okay? And it turns out that that's exactly what a vaccine is and what I'm going to tell you is the centralized paradigm after Flexner realized that this was a way that they could begin to do things to control people so that they could create an army of patients.

For a really long time. Now, the problem is they've gotten really good at doing the things they do. So, what I would tell you before, and what I tried to explain a little earlier when we were speaking to the other doctor about, you know, nutrients and medicine, let me try to explain this to you. When you understand that our system, as Becker showed clearly, he got the idea in 1941 from Albert St.

George at a medical meeting. That we work by solid state physics, meaning semiconduction. In 1941, this is crazy talk. Why? Because quantum mechanics wasn't even worked out yet. But, why this hit Becker when he was a medical student, when St. George was talking? He said, look at the protein structure. It's the same criticism I gave him earlier.

He said, it looks like it's got an electronic You know, state, he goes, to me, this tells me that there's another part of biochemistry that we really don't know yet. And that hit Becker. So, here we go, 25 years later, Becker goes, he's working for DARPA in the military. But his idea is about limb regeneration because he's an orthopedic surgeon.

He's the guy that finds out we have a PNN semiconductor in bone. One is collagen, the other one's appetite. What binds the two is two copper atoms on there electrostatically by Van der Waals forces. And if you knock those two copper atoms off, that's what gives you osteoporosis. That's actually what happened in space, that's what happens to our patients here.

All the things that you learn about medicine, Wolf's Law, it's all bullshit. But it's the stuff that we've taught people. Forever and ever and ever. But here's the key part of the story. We now know that the human system is based around solid state physics. So I'm going to ask all all five of you because this is a simple question.

Do you know when AMD or Intel builds a semiconductor fab? Is the rooms clean or dirty? Very clean. Really clean, super duper clean, like atomically clean. So now I want you to think about what I just told you about jabs. We have documented proof that every jab, including the ones in China, have between 51 and 55 atoms in them that we don't have in the human system.

So if you know that you work by semiconduction, And you put those things in. Do you think that that's going to alter the semiconductor? How should we say efficiency system? Absolutely. And the point that I try to make to you is the same point I tried to make to the other gentleman before about the zinc issue.

Understand that zinc is also. A transition element that also is used as a dopant on many of our enzymes and many of our proteins. And it turns out the way the zinc works isn't the way most doctors are taught. It actually works as a dopant. So if you add a dopant And it's too much or too little. What do you do?

You're changing the biophotonic signal because you remember how this works. You know that a semiconductor and the lights in your, in your office right now, you put electricity in it, it hits silicon. And next thing you know, you get light emission. That's what an led is. Turns out we work exactly the same way.

So when you heard me before, get a little bit animated that that's how I got the idea from Becker's work in the 1960s. To start asking the question, tell me about the absorption and emission spectra of every single thing in our body. And of course, you know, I started with the brain. Why? Because I'm a brain surgeon.

I'm more interested in my organ than anything else. But then I started to go into everybody else's system. I got in everybody's beeswax and I started to figure out exactly how the whole system works. And I'm going, Hmm. So just so you know, before Becker died, and this story is near and dear to my heart.

Becker found this DC electric current that's present in plants and animals. But you know what the sad part of his research was? When DARPA canceled him in 77, it's because he went on 60 minutes to tell the world that electric power lines and cell phones, uh, were going to harm people and he was so frustrated with the military because they wouldn't let him talk about it.

He went on national TV and he was twice nominated for the Nobel prize. His lab was defunded and he was thrown out of medicine in 77. And this guy was, he was the best scientist that we had in America at that time. And because he was getting too close to how shall you say the secret sauce, that's why they silenced him.

So before he died in 20, 2006, I went to visit him and tell him before he died. Cause I knew he was getting sick. I said, Robert, I came here for one reason to tell you where your DC electric current comes from. I said, it comes from melanin. And he looked at me cause you know, he's an orthopedic surgeon. We laughed about it.

I said, see the neurosurgeon had to come and teach you this shit because you bone guys don't know anything about how, you know, melanin works. And we laughed about it. It was funny, but he's like, I can't believe it didn't dawn on me because it's cause in his work, he found out that the DC electric current was right below the nerve sheath.

In nerves, and that's exactly where the gene POMC that makes alpha MSH that makes melanin is. And then I explained to him, I said, do you remember when you did all those fancy experiments that you found in the red

blood cell that it was one trillionth of one antimere? I said, here's the crazy thing. We have condensed matter physicists now working in DARPA and in the ISS that want to put melanin sheets and replace them for our solar batteries.

Why? Because melanin, when it's dried, is the best photo panel, the best LED conductor you could ever imagine. But when you wet it, it becomes shit and it turns out that's a detriment to an electrical engineer. It turns out that's exactly what the biology, uh, inside a cell needs. Why? Because we use the smallest bioelectric currents.

And when I told him that he says, so that's the reason why they didn't want me to find this out. Because I was telling him that all the electromagnetic pollution around us was affecting something. And that's what it was affecting. It was affecting the 1 trillionth of 1 ampere. In there. And I said, now you understand why you got canceled.

So for me, I told him, you know, the last little bit of his work, because what he did, in my opinion, absolutely spectacular science, spectacular. Um, and I told him that I was going to pick up his work and finish it, but he warned me, he goes, you know what they did to me, he goes, you know what they need to Bernice Eddie, he goes, this is all tied to the same story.

He says, you better be careful. I said, trust me, I'm not going to say anything until the time is right. Well, guess what? COVID showed up and Uncle Jack showed up.

Let me ask you a question, Jack. If you were, you were appointed by Trump to do what Bobby Kennedy is doing, what are the top five things you would do the minute you got in there?

I would go in with the military and lock up 534 members of Congress and leave one behind. I would eliminate the Supreme Court and I'd send them all to Gitmo. And then I would have new elections and I would pick a new court. And then we would use the same founding documents, except we wouldn't have any of the bullshit that it's tied to, because you have to realize the reason we have the problem in medicine is the industrial military complex in the United States with its friends in Israel control, many problems for United States government.

We have to remove the military from healthcare. And we also have to make sure that science is pure again. In other words, Incentives dictate outcomes. We cannot have the system built the way it is now. It needs to be fully decentralized. So I would build the whole thing over. And do I know that what I'm saying is unrealistic?

Yes. But I do believe that the people in the United States are getting pushed further and further and further. And you guys are Aussies. So you may not appreciate this, but I'm going to say this to you. I've been saying it a lot to my American friends. I said, you realize that 250 years ago, A bunch of crazy Brits who came to the United States shot at their King.

For a 3 percent tax on tea. I said, tell me about what they're doing to us right now. Is it worse than a 3 percent tax? I said, why do you think Thomas Jefferson put that second amendment in? So I know you guys gave your guns up and you guys don't understand this, but you are part of the Commonwealth and you understand how nefarious the guys in London can be with the money.

And I'm just going to tell you that Thomas Jefferson was right, that the problem for the United States stems from money, stems from the banking system, and we took that from England, and this has morphed into our industrial military problem that happened after the Second World War, and that started With the Manhattan project.

And then it started obviously with the polio jab as the first bioweapon that the United States got involved with. That program is now morphed into so many different things, but it's actually polluted our basic research. Like just how we do cardiovascular research or how we do nutrition research. Like I'll give you an example.

If you understand 5 percent of what I told you today, that I told you that you need to know the absorption and emission spectra. Realize that not one nutrition study. Ever done in the literature has any light controls, not one. So when I was on a podcast with Andrew Uman and Rick Rubin, they asked me a question.

How much do you believe is true? They asked another neurosurgeon that's at UC university of California, Eddie Chang. He said 50%, you know what I said? 99. 9 percent I don't believe any of it because it has no light controls. If you do a study and you know that we work by semiconduction and you have no light controls, my friend, you are flying blind in a storm and you can't see out the window and none of your instruments work.

That is what centralized medicine is and patients better wake up. That's the reason why they tell you to put sunscreen on and sunglasses and slip and slap and all that bullshit because it is bullshit and it's about time people wake up. And take their own control back. You don't need to rely on experts.

I believe that I can teach you this stuff. You look, we didn't have doctors 10, 000 years ago, a million years ago, 2 million years ago, and guess what? Each one of us are here today as proof positive that the medicine and nature is pretty damn good. Even though we're the third leading cause of death, we're still sitting here, all of us able to have this conversation.

So I'm going to tell you. There is a lot. What we are built with inside is spectacular quantum engineering. Spectacular. And in fact, when you learn the stuff that I know, sometimes I sit down in my chair and I am stunned at just how magnificent we are built. But it's stunning to me that these two frontal lobes that we got.

Screw it all up. The beliefs that we have, the things that we do, the world that we've now created, instead of going outside, remember this chemical that I told you makes melanin? Has another part called beta endorphin. You know why we have beta endorphin? It's designed for a guy like you with gray hair to addict you to go to the beach.

You're supposed to be addicted to it. But guess what? All the silly talking monkeys that are in Australia now, what do they do? They've been brought inside by Google, Microsoft, and Dell. And guess what their son now is blue lit between four 35 and four 65. And that is what's destroying our, our biology.

That is the source code.

You've been, you've been describing an incredible design, haven't you? You've been, you've been describing a blueprint that is absolutely out of this world. Do you believe that's divine design?

Uh, I'm going to tell you, I did, uh, I did a webinar for my, my, uh, My members. Cause you know, this always comes up.

Everybody wants to know about my whole thing about, um, religion. So I gave them that spiel in two hours, but I'll tell you what I believe. I want you after you finished this podcast, me go open your Bible and read Genesis one, one to one 15.

Yeah.

God did. God told you the truth, but he didn't give you the recipe.

You know what he did? He put me on this planet to show you where the recipe is. So that's why I'll fight with you tooth and nail. When you tell me something that I fundamentally don't believe, because to me, those tenants break one, one to one 15. And the thing is, it is about light. It's always about light.

Everything is completely about light. But let me just tell you something. Light is the most interesting and complex thing you'll ever study. And then when you realize that light is only one part of the key design, it goes with water. Water will also blow your mind. And then we haven't even got the magnetism yet.

We did talk about it a little bit. Because all those chemicals that have unpaired electrons, that's what ROS Those magnetic chemicals are actually what shape shift our body. That's what changes the size and shapes. Like if you want to know why everybody who's Asian, 96 percent of kids below 25 years old are myopic it's because of the Samsung phones.

It's exactly the reason why, and you know why? Because it destroys dopamine and melatonin in the eye. What does that do? Takes a round globe and makes it a liptoid. Light alone does that, through melanopsin. And we know that. But are we doing anything about it? No. You know why? Because blue light also addicts us to things, and technologists want us to be addicted to their products.

And how do we know that? The guys that figured this out were the Jewish Mafia in Vegas. Mo Dalitz and Meyer Lansky. I told that story already. If you want to know how, and in the United States, it was very simple. They painted all the, the, the windows in Las Vegas. They took the clocks away and they put one arm bandits that were blue lit everywhere, and guess what they found out people stayed and spent more money.

They didn't have to hold them up and take their money. Then what did they do? Then they started to put girls with their tits hanging out and gave them, you know, liquor and they spent even more money. So what did they do? They basically figured out how to unwire the frontal circuits from the central retinal pathways through the habenular nucleus up into the frontal lobes.

This was brain surgery without a scalpel by two gangsters that didn't know shit. They were just smart and paid attention to the environment. And guess what happened? Then the CIA came and said we need to study this, and then they perfected it. That's the world you got, my friend.

Look, I for one want to keep bathing in this pool that you are, Jack Cruz.

I think, um, this has been an inspirational interview. It's been, it's been difficult to listen to parts of it, but that, you know, the good things in life are difficult. You know, serenity is real. I know my

members this. I want to tell you this. Wounds create your wisdom. Okay. Yep. Uh, embrace the sock. Why?

Because let me tell you something, the punch in the mouth you get leads to the regeneration. So I'm going to leave you with this thought is this will blow your mind. The reason why childbirth hurts is because the pain that comes out for the woman that releases light in her mighty country, that's going to regenerate her body after the baby comes out.

That lesson is even in childbirth. So let me tell you something. You got it. You have to realize. So my friend up there, that's the anesthesiologist. He's probably thinking how many times he put an epidural in a woman's back. To stay away from the pain. And then what did they do? They took that baby out through the belly.

Do you realize what I'm saying? When you do that, is that child a wild did human? No, he's already born into a world where he's a zoo animal. And I, what I'm telling you is when someone tells you an uncomfortable truth, something that fundamentally goes against what you believe to be true. Right now, you have two options.

You can tell me I'm an asshole. Or it's the mark of an educated mind to take something you fundamentally don't believe, examine it for yourself and see if I really am an asshole or that I deliver a punch in the mouth that you really needed so that I can improve you to get you to that next level.

Because I believe when we don't embrace the suck, the wound is never, it always creates the wisdom, but you know, when it doesn't, when you don't learn the lesson from the wound. That's the problem. And every time I think about epidurals, I think we're not, we're not learning the lesson here at all. Um, and I, I feel the same way about anything else, every wound, take it and look for the silver lining in it.

It may be hard for you to see it, but just like COVID is, you know, the gentleman, my top right here, he made the best point to me in the whole thing. COVID was a blessing, absolute blessing for us all. Why? Because we got to see what the removal of freedom and tyranny really is. And we have a duty to all of us.

I'm talking about, I'm an American, I'm in El Salvador, and you guys are Australians. We have a duty to do something about this for the little kids that are being subject to those COVID jobs right now. We need to stop this.

You've got our attention. You've definitely got our attention. Um, there's so look, we, we have to end it. I know we have to end this, but there's so much more. I personally want to be taught. You know, my whole life was every day going to work 36, 000 hours. I spent in the upper atmosphere going to work. I go to work with 20 ton of fuel and I'd come back home with 3 ton.

I was burning 15 ton of kerosene every day living in a, in an environment that was completely toxic. Um, you know, I, I don't know from clay. I'm going to be really honest with you. I left school when I was 13. I had a criminal record by the time I was 17. All I've known is aviation and and now I'm learning about God and all of this stuff is starting to make sense to me.

I want to learn. I'm seventy two. How much time have I got to learn?

Well, I'd be honest with you. I think Until they put you in the ground and there's daisies above you, you got time. And here's the coolest thing about it. When you learn something that you know is fundamental to life and to your biology, you have a duty to yourself as a savage to say, I need to learn this.

I mean, I will tell you that the thing that makes me passionate about this, this is the greatest story ever told. This is spectacular. This is the story of us. And when you realize. That we all come from stardust and that light organizes all this stardust to do all the amazing things that we just talked about for the last two hours.

I mean, it should hit you and go, why wouldn't I want to learn some of this stuff? You know, and I think that people who are interested, like if, if you just live your life. 80 times the same way going around the sun, which I think at least in my country, 300 million, maybe 330 million people do. Those are not the people that I'm looking to resonate with.

When I do a podcast, I always say there's one person that's going to listen to my podcast and they're going to go all in. They're going to go. I want to learn about this. I want to learn, even if I can't improve my health. I want to know about my friend down the road who has diabetic neuropathy. I want to see if I can help him fix this.

And do it in a way that doesn't cost him a fortune, so he doesn't have to go through the sausage grinder. Like, is there a different way? Like, I want to find out what Jack's idea is about ALS, cause ALS is a horrible idea. My ideas about ALS are, would blow your mind. If we had time to sit down, it's caused by one frequency of light that comes out of a mitochondria and guess what?

It's in the blue range. So even that disease is linked to this story, but there's no way you can see this. Until you understand the basic wiring diagram. And I told you that in the beginning of the podcast, it's very simple. Yeah. Soccer goal, NAD and oxygen. All the, all the shit story is in between. If you learn how to put electrical tape on that, I can teach you how to fix the rest.

It's that simple. It's just like Einstein said, if you can't explain it to a third grader, you don't know it good enough.

In 10 days time, I'll be in the States in Phoenix, Arizona, speaking on stage at a conference. Will you be made whole? I'll be with Dr. Peter McCullough and also Dr. Ben Carson.

Ben's a good guy.

Sorry. I said, Ben's a good guy. I gave him, I gave him a lot of money when he ran for president last time.

Yeah, well, that's, I'm really looking forward to that. I'll be on stage two with Charlie Kirk and a few others. It's going to be a great event. And, um, you've really opened my eyes. And I think the whole reason we're doing this podcast now, before I go over there is I'm going over there with a whole new perspective and I thank you for it.

No problem. Anytime.

Look, um, jackcruise. com is where you start. I'm starting my journey there. I'm going to have a deep dive into this pool. Uh, John, I don't know about you.

Well, look, it's an amazing story, uh, Hoody. And, and look, I think we need to, uh, to get as many people to log on there as, as we can to, to have a look.

And, you know, hopefully down the track, Jack, you know, hopefully you might be open to. To coming out to Australia and, uh, you know, enlightening people out here about, uh, about health. I think it would be such a A great opportunity for Australians to learn more.

Bob, believe it or not, I have a lot of Australian members already.

Uh, I'd echo that, uh, uh, John, um, you're more than welcome to come out here, uh, Jack, and, uh, talk, talk to, uh, all of the guys that, uh, I'm involved with as well. That'd be really appreciative, and I would be as well. We really had a, uh, a great morning this morning here, uh, listening to, uh, your, uh, enlightenment and, uh, I really take it on board and appreciate it.

Thank you very much.

No problem. Great to, uh, finally, uh, talk to you, Uncle Jack. Um, uh, I believe this is the way, uh, we have to fight this tyranny. This is the tool. I think this is the future. I've been looking for decentralized solutions that, uh, Take the power away, you know, and put it back in the hands of ordinary people, and it, it, it seems complex at first, but I, I, it's what I've been dreaming about, giving people the tool to give them their resilience and take, take back their, their, their lives.

Let me tell

y'all something. Let me tell you how simple it is. We'll end on this. If you liked a little bit of what you heard, all you have to remember is this, eat like a great white shark, protein and fat. Look to the east like the Sphinx every morning. That's all you have to do for extremities grounded.

Look to the east. That's why the ancient Egyptians put the Sphinx face the east. They were telling us something, but we've lost our way. That's all you need to do. If you can remember that you're well on the road, that's 80 percent of getting better is sunrise. Never miss another one the rest of your life.

And when you go to the market, go

naked.

Well, I don't know if I would say that. But when you go to the beach, you need to go naked.

Oh, yeah, that's I'll tell my wife. I'll tell my wife. She's part aboriginal. She doesn't get sunburned. Which explains Oh, you

know, you know that they have bathing suits. I got one on right now.

It's called the Kaniki. And they have another one from Arizona called Cool Tan. It allows the sun to go through. So technically you could be naked without being naked. So it's a possibility. I just don't know if you can get it before you go up to Queensland to the beach.

Well, I live virtually, I'm inside of the Queensland border where I live in northern New South Wales.

Anyway, I want to, I want to do what I customarily do, which is close with a prayer, so, um, Let's, uh, let's think on this. Dear Lord, Heavenly Father, in the book of Genesis, you said it all. You said how it was designed and how it started, and we've drifted away from that plan. We really have, and Lord, today you've enlightened us, and you've shown us that the designs may look simple on the outside, The complexities are enormous, but there are simple ways to navigate it, and we thank you for that.

May we bathe in the light of truth, and live a life of serenity with compassion and caring for others. We ask in Jesus name. Amen. Amen.

Amen.

Sounds good. Take care, gentlemen. Have a good day. Thank you, Jack Cruz. Johnny Lardy, you've often been heard to say. You just couldn't make this stuff up. You couldn't make this stuff up.

Stay out of the trees, everybody, which is good news for Jack, because that's get out in the sun. And that's what I'll be doing all next week. Ian Brighthope, always a pleasure, mate. And Paul Oosterhuis, great to have you on. God bless you all. And we see you. Bye for now.

Bye.