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Introduction

"Cowardice asks the question, 'Is it safe?'
Expediency asks the question, 'Is it politic?'
And Vanity comes along and asks the question,
'Is it popular?'
But Conscience asks the question, 'Is it right?'
And there comes a time when we must take
a position that is neither safe, nor politic, nor
popular, but we must do it because Conscience
tells us it is right."

Martin Luther King, Jr.

I have written this book because over the past 25 years I have gathered information which I feel a moral obligation to share. I have written this book because I care. I have written this book as part of my mission to save the millions of lives and trillions of dollars which I can prove are being lost due to preventable illness.

As a species humans are facing our greatest threat in history. That threat is chronic illness. The Black Plague killed 30 percent of Europe. Chronic illness is now killing 80 percent of the industrial world.¹ Humans are now the sickest species on earth. We have gone from super species to sickest species in less than a century. Never in history has a species suffered with so much illness, with so much cancer, diabetes, heart disease, obesity, and other chronic illness.

The research is unequivocal; we are in the midst of a chronic illness pandemic that threatens not only our health but the very fabric of our society and the very existence of our species. We are, literally, the sickest species on the planet. We have the sickest children, the sickest teenagers, the sickest adults, and the sickest elderly in the history of our species - in the history of any species. Over half of our entire industrial population has a chronic illness and over 80 percent of our adult industrial population has chronic illness. Chronic illness is the leading cause of death and suffering; 80 percent of our population is dying and will die from chronic illness.² Despite ever increasing medical spending and medical procedures the rates of chronic illness have been steadily rising for

over 50 years. **The current system is not working. We don't need more debate about who should pay for healthcare, we need to start debating about what kind of healthcare we should pay for.**

Over 80 percent of our workforce has chronic illness. Chronic illness is responsible for 9 days of absenteeism per employee per year and up to 91 days of lost productivity per employee per year.³ Chronic illness is the leading cause of personal, corporate, and government debt and bankruptcy. By 2017 chronic illness will cost 4.3 trillion dollars per year in the U.S. alone.⁴ This represents \$12 billion per day, \$500 million per hour, and over 8 million dollars per minute – EVERY DAY. The U.S. is NOT an outlier. On a per capita basis, these figures apply to most developed nations.

Imagine what this means for large employers like the government or large corporations. Imagine that you have 1,000,000 employees and 800,000 of them have a chronic illness (55 percent of them have two or more chronic illnesses). Imagine that you not only have to pay for their medical costs but you also have to pay their wages even when they are not at work.

In fact, you not only have to pay for their wages when they are absent, you also have to pay for the wages of the people you bring in to replace them. Further, you also have to pay full wages for up to another 91 work days that are lost due to their decreased productivity because of their chronic illness. Think about this for a second. Most employees get four to six weeks paid holidays per year. In addition to this, if they have chronic illness, they also get paid for another 12 weeks of non-working days per year. This makes a total of up to 18 weeks or over 4 months of paying wages for no productivity.

Don't forget that on top of this there are the medical costs of the drugs and surgeries that are associated with the standard medical treatment of chronic illness. Does anyone honestly think this is sustainable for employers or employees? Does anyone actually believe that any business with 8 out of 10 chronically ill employees can compete with a business that has healthy employees? The scenario is even worse for small business. Imagine if you only have 10 employees and 8 of them have chronic illness. Worse, imagine you run your own business and you are your only employee and you have chronic illness. This is not a labour versus employer

issue. Chronic illness is unsustainable at all levels from individual to corporation to government to society.

Chronic illness is *lifestyle illness*. Chronic illness rates have risen exponentially since 1900 as have prescription drug use and surgery. Our genes have not undergone any significant change during this period of time. It can't be genes. During this period of exponential increase in chronic illness our genes have remained virtually unchanged but our *lifestyle has changed significantly*. The changes in our lifestyle away from what we genetically require as a species mirror the increases in chronic illness.

We are NOT simply detecting more illness and thus skewing the data regarding chronic illness incidence. Obesity and diabetes alone, which are causal factors in virtually every other chronic illness, have increased exponentially in just the last two decades. Detecting obesity and diabetes is NOT technology dependent; it requires a scale and perhaps a tool to measure body fat percentage or body mass index and a simple blood sugar test. This is NOT new technology.

We are NOT simply living longer and thus inevitably developing more chronic illness. The percentage of the population aged 65 or older did not increase at all between 1990 and 2010 so aging has nothing to do with the per capita increases in chronic illness rates or expenditures.⁵ Further, chronic illness rates and drug prescription rates are rising most rapidly in our children and in middle aged adults. Half our children are overweight and each year more have diabetes, asthma, and attention and behavior issues.⁶ Our elderly have much higher rates of illness than the elderly in non-industrial cultures. Our children have much more chronic illness than the children in non-industrial cultures. Our elderly and our children today have exponentially more chronic illness than our elderly and our children did only a generation ago. Lifespan has not significantly changed in this time.⁷

The *only* solution to the pandemic of chronic illness, and the pandemic of human suffering and financial burden that it causes, is *fewer sick people*. The only way to achieve a society with fewer sick people is to correctly answer the two most important questions regarding the health of our citizens.

These questions are: **“Why are we getting so sick?” and**

“What do we need to do to get and stay well?” I have devoted the last 25 years, virtually all my adult life, to finding answers to these two questions. Finding answers to these questions, and discovering why traditional medical researchers and clinicians have failed to correctly answer these questions, has been the sole purpose of my professional life, and a large part of my personal life. Sharing the answers to these questions is the purpose of this book. These answers can save millions of lives and trillions of dollars. These answers can save businesses and governments and societies and these answers are the **ONLY** way we will be able to create meaningful reform and save healthcare.

The answers to these questions are self-evident when you ask the right questions.

We need to stop asking what chronic illnesses we have and how to treat them (diagnosis and treatment) and start asking why we are developing chronic illnesses and how to avoid them (wellness and prevention).

We are sick because we have changed our lifestyle patterns away from what our species requires to genetically express health and toward what causes us to genetically express chronic illness. The only way we can get and stay well is to change our lifestyle patterns back to what is genetically suitable for our species. The reason traditional medical researchers and clinicians have not answered these questions correctly is not due to a lack of intelligence or a lack of caring or a lack of effort. It is due to the paradigm that guides traditional medical research and clinical intervention. It is due to the fact that the entire traditional medical system operates within a gene-centric Sickness & Treatment Paradigm that is inaccurate regarding the cause of illness and the source of health. Until this gene-centric Sickness & Treatment Paradigm is replaced with the more accurate lifestyle-centric Wellness and Prevention Paradigm the correct answers to the two most important questions will never be found and the chronic illness pandemic and the unsustainable human, economic, and societal burdens it causes will never be eradicated.

The fact is that the single greatest determinant of whether you will get sick or get and stay well **IS YOUR LIFESTYLE CHOICES**. This is an **INDISPUTABLE FACT**. Once it is understood that

how we eat, move, think and interact is the cause of chronic illness, the fact that changing these behaviors is the only viable option to prevent and/or recover from chronic illness becomes self-evident. The FACT is that the only way to create a society with fewer sick people and more healthy people is to adopt lifestyle behaviors that are genetically congruent, that promote the genetic expression of health, and prevent the genetic expression of unsustainable adaptation, fatigue, and illness.

The FACT is that no drug or surgery will EVER be the wellness and prevention solution for illnesses caused by malnutrition or overeating or the ingestion of toxins in our foods. No drug or surgery will EVER be the wellness and prevention solution for problems caused by sedentary living or poor physical fitness. No drug or surgery will EVER be the wellness and prevention solution for problems caused by lack of self esteem, lack of life satisfaction, or lack of positive attitudes, thoughts, emotions, and social relationships.

This book is about revealing the truth and exposing the falsehoods regarding why humans have become so sick. This book is about explaining why the current diagnosis and treatment approach has not worked, why it will never work, and what we need to implement in the future that has already been proven to work. The survival of our species, our way of life, our economy, our standard of living and of our planet depend on this change. This book is dedicated to eliciting this change.

Chapter 1

The Biology of Health and Sickness

"I have always felt that the only trouble with scientific medicine is that it is not scientific enough. Modern medicine will become really scientific only when physicians and their patients have learned to manage the forces of the body and the mind that operate via vis medicatrix naturae (the healing power of nature)."

Rene Dubos

*Are humans
separate from
nature?*

Let me take you on a little bit of a journey explaining how I discovered the right questions to ask regarding health and sickness. I am the son of a Ph.D biologist. I spent my childhood in the wilderness. I grew up on a hobby farm where we grew vegetables, had fruit trees, kept animals, and worked and played physically every day (more play than work for me my parents will happily tell you). Growing up on a farm and spending so much time studying and living in natural environments shaped me, it gave me a naturalist paradigm or belief system; it made me a lifelong biophilic (a lover of nature).

Let me give an example of how things are different in a naturalist paradigm. You know the ten second rule, something drops on the ground and if you pick it up quickly you can still eat it? We had about a ten day rule, there just wasn't a lot of fuss and muss about germs, a bit of dirt, or animal dung. We grew up knowing that the chemicals used to clean were far more dangerous than the natural bugs and dirt that were found in a natural environment. If we got sick (which was exceedingly rare), we didn't run for a pill, instead we tried to figure out why we got sick, we rested, ate healthy foods and drank lots of water. We were not afraid of an egg with chicken dung on it, we were horrified by bleached white eggs with pale yolks that had no flavor. It was just different. It was just natural. I grew up in that paradigm.

The thing that most significantly shaped my paradigm, the

thing that has allowed me to deliver this life changing message all over the world, is that, from a very early age, I realized that I was not outside of the ecosystem of the planet looking in. I understood that I was part of the ecosystem, not separated from it, or in control of it, or smarter than it. From as early as I remember I had a sense of awe and respect for ecosystems; they were the source and governing systems of the nature that I loved so much. Most of my holidays, in fact virtually every holiday I ever went on, were trips deep into the wilderness. My father and I regularly went fishing or on horseback trips into the mountains. We built cabins and used them year after year. I could probably fly fish before I could walk. My dad probably untangled my fishing reel a thousand times. It was only after I became a father myself that I realized how much this must have affected his “relaxing” fishing trips. I would never accuse my father of being a patient man but when I think of all those tangles I realize he turned into the biblical Job on fishing trips. Thanks Dad.

Now, there was something else that fundamentally shaped my belief systems (my paradigm) and my life. During the short time span that I was a child, from when I was three years old to the time I was a teenager, I saw the environment around me dramatically change. When I was a young child, there were rivers that I couldn't put my line in without catching a fish in minutes. The rivers were surrounded by old growth forest and the forests were full of wildlife; full of deer, and bears, and owls, and eagles and cougars and insects. By the time I was a teenager, many of these paradises had changed dramatically. There were no fish left, there was no forest left, and the animals had disappeared.

I can remember going to mountain lakes that were so beautiful and so pristine that even as a child it would take my breath away. Tragically, by the time I was a teenager they had been completely destroyed. I couldn't find a tree, only stumps and garbage left by the logging companies. I remember crying, even as a child, because I was devastated to see this, not because I couldn't catch any fish but because the animals had been so harmed and so devastated. I've always tried to imagine what it must have been like for native peoples to watch as the forests and rivers and lakes they had lived in harmony with for generation upon generation were destroyed by the European settlers. It really is so tragic. We could have done it so much better, so much more sustainably, with so much more kindness and compassion and common sense. Sigh.

Is our environment getting healthier or sicker?

Do humans need healthy ecosystems?



So when I first embarked on this journey, I was really much more of an environmentalist or a conservationist than I was a humanist. My concern when I grew up was mostly for wild animals. I loved wild animals and, to be honest, I had developed a dislike and distrust of humans, at least the domesticated, industrialized humans. I would drive anybody who would listen crazy with facts about animals, or asking them about animal facts. And I think that, unlike many conservationists who really only want to save fish and deer so they can have things to catch or hunt later, I actually wanted to save

animals for the sake of the animals and the trees for the sake of the trees. Even today when I lead my 3 day Eat Well – Move Well – Think Well Innate Lifestyle™ Implementation camps I love to gather the group around my favorite trees and rivers and trails so they can experience the same sense of awe and wonder that I do.

They do experience this, by the way, to a person, at every camp. The participants are completely moved by the experience of feeling like they are part of the ecosystem. If you are interested in attending one of these camps you can get more information at www.thewellnesspractice.com. It is truly a life changing experience for everyone involved. Even the camera crew that was filming for the upcoming documentary had life changing experiences!

I always did, and still do, have a feeling of respect and admiration for plants and animals and for nature.

I don't worship nature, I am just profoundly grateful for it and feel a deep sense that I am part of it and it is a part of me. Biologically (and metaphysically) speaking of course, this is accurate.

Chapter 2

Humans: Wild Animals in Captivity

“We habitually think or speak of ourselves as something apart from Nature, as belonging to some higher order of reality, when, in fact, we are as much a part of the total scheme of things as are the trees and the beasts of the field.”

John Burroughs

“The city is not a concrete jungle. It is a human zoo.”

Desmond Morris

Are humans governed by the same biological laws that govern every other animal species?

I believe the only way you are going to really understand the truth about health and sickness, take these truths to heart, and act upon them, is by understanding that your physiology is governed by the same biological laws as every other animal.

You must understand that humans are an animal species, a species of mammal with mammalian requirements for health.

I don't know where the false idea and belief system that humans are not an animal species or governed by the same natural laws that govern all other animal species came from. Maybe from health science, if so it was bad science. Maybe from religious teachings, if so they were they were false or misinterpreted religious teachings. I think that a fair assessment would put equal blame on both faulty science and faulty religious teachings, but I don't really care about blame. I only care about solutions.

Whatever the cause, I can tell you that it is quite clear now that we have totally lost the concept that we are part of the animal kingdom. I don't care how much or little you know about science or what your religious beliefs are because neither can change the fact that humans are an animal species and the natural laws that govern us are the same that govern all other animals species.

The source of these laws (God, Mother Nature, or both) is

irrelevant to the fact that these natural laws exist and govern us. People with all different science backgrounds, and all different religious beliefs, are dying by the millions because of how they eat, move, and think. Clearly these natural laws do not discriminate. What will happen to these poor people after they die I don't know, I won't even pretend to have any expert opinion in this area. However, the fact that they are dead and that they are dead early, too early, and that they are dead because their physiology was adversely affected by poor lifestyle choice is indisputable. I have a lot of expert opinion to share in this area.

Let's expand this idea a little further, let's start to ask questions that are based upon seeing humans as an animal species within this lifestyle-centric, naturalist paradigm. How many of you can drink the water from a stream within five miles of your house?

I live in Victoria, British Columbia, Canada. We have some of the cleanest and purest land, air, and water in North America. However, I will tell you that there are probably very few, if any, people in my area that can safely drink water from a stream within five miles of their house. What about where you live? Was this true 300 years ago? Of course not, everybody got water from a source near where they lived.

Now I'm usually lecturing in large cities like New York or Chicago or Dallas or Toronto or London or Edinburgh or Sydney or Melbourne. Imagine drinking water from a stream within five miles of any of these cities! How can we believe that we can poison our streams and not poison ourselves?

How can we think that the animals are dying in these streams, and that somehow, magically, we will remain unaffected? This view makes no sense if you understand biological ecosystems.

How many of you would like to drink the water from the runoff of the farm that grows your childrens' fruit and vegetables? Now, does it make any sense that this doesn't concern us? I travel to Australia to lecture three or four times a year. That's a 15 hour flight at about 600 miles an hour, over the Pacific Ocean. It's water the whole time, it's a big ocean. For the entire flight there's not a spot in that ocean where we can't detect PCBs or fire retardant. We only

Can you safely drink the water from the streams within a five mile radius of your house?



Is it possible to pollute the water and soil and not ourselves?

started using these chemicals a few decades ago. The solution to pollution is not dilution. We have soiled our own home – the earth.

The Orca whales living in the Strait of Juan de Fuca are now so toxic with fire retardant, PCBs, and DDT, that biologists fear for their survival. A study recently conducted in Washington State found over 200 industrial chemicals in the maternal blood of pregnant humans.¹² Many of these chemicals were known to be toxic, but most disturbingly, most have never even been tested. There are virtually no laws that require chemical companies to prove that their products are safe for the environment, for humans, or for other animals.

“Researchers at several nearby universities recently examined the genes of people who have been catching and eating fish heavily contaminated with DDT for nearly fifty years. Those who had eaten the most fish had the greatest numbers of abnormal cells and risk of breast cancer.”

Davis, Devra. *The Secret History of the War on Cancer*. 2007. Basic Books, a division of the Perseus Books Group. New York. NY.

Now the point of this book is not to get all environmental and I don't want any political opinions or economic viewpoints to get in the way of facts, so let's just

Chapter 3

Paradigm and Research: The Question is Everything

"The scientist is not a person who gives the right answers, he's the one who asks the right questions."

Claude Levi-Strauss

"Sometimes the questions are complicated and the answers are simple."

Dr. Suess

*Are the
"healthy"
subjects in
medical
research
actually
healthy?*

One of the biggest weaknesses of Sickness & Treatment Paradigm research is how they define healthy subjects. They completely ignore the very important fact that they are studying wild, human animals in captivity. The subjects in their studies are living in genetically incongruent environments, are exposed to chronic stressors, and are thus either ill, or in a stage of developing illness. For this reason, it can appear, especially if you believe that genes determine health, that humans inevitably develop illness based on their genetic makeup. Make no mistake about it, this is the underlying belief system of traditional medicine and medical science when it comes to chronic illness.

If we look at what happens now, if we look at medical research, one of the most fundamental flaws with the validity of current medical research is how they define health and sickness.

Traditional medical researchers are studying wild, human animals in captivity but they never even consider the fact that the human in front of them is an animal in a captive, genetically incongruent, unhealthy environment. Traditional medical research will report that they compared healthy subjects to sick subjects or that they studied either healthy or sick subjects. But how do they define health and sickness? Do they define a healthy subject as somebody who lives the genetically congruent lifestyle for the human species? Do they define a healthy subject as someone who eats healthy foods, who is physically fit, who has a healthy body

composition, who has a high level of self-esteem, a high level of life enjoyment, who has healthy social connections? No, they don't define health this way at all.

Traditional medical research most often defines a healthy subject as someone who has not been diagnosed with the illness or disease that is under investigation. So if the study is about heart disease anyone without a diagnosis of heart disease is defined as a healthy subject. Does being free of the diagnosis of heart disease actually mean they are healthy? Does it mean that they are not depressed? Does it mean that they can do five chin ups? Does it mean that they can jog two miles without stopping? Does it mean that they love themselves? Does it mean that they have positive self esteem? Does it mean that they eat good foods? No, it most certainly does not mean any of this.

We need to question the validity of this paradigm. We don't just need to question the methods and results, the drugs and the surgeries, the deaths and side effects, the lack of cures, the increasing incidence of illness, the escalating costs, the lack of scientific evidence. We need to question the paradigm that has created this approach and allows it to seem scientific and logical despite so much evidence to the contrary.

This is really the fundamental difference between the Sickness & Treatment Paradigm and the Wellness and Prevention Paradigm. In the Sickness & Treatment Paradigm health has stopped being defined as a state of homeostasis, and has come to be defined as the absence of a diagnosed disease. Clearly the absence of a diagnosed disease is not an accurate definition of health.

The Plant Analogy

Let me give you an analogy to show you how important paradigm is in terms of health research and health care. Let's talk about plants. The reason I use plants will become obvious in a moment. Let me ask you a question. If you had a wilting plant what is the first thing you would do? I bet your answer was that you would either give it water or check the soil to see if it needed water. Why? Why didn't you answer that you would give it prescription drugs or check to see if it had enough prescription drugs? This is almost certainly what you would have answered if I had asked you

Is the lack of being diagnosed with a disease synonymous with being in good health?

If you had a plant that started wilting what is the first thing you would think of? What about if you had a friend who was sick?



what you would do if you had a wilting or a sick human.

So why do most immediately think of a required nutrient for a plant but a drug for a human? The answer is because most view humans through a *Sickness and Treatment Paradigm* but all other living creatures through a *Wellness and Prevention Paradigm*. Their belief system is that the plant is genetically programmed to express health, that if the plant is wilting it must be toxic or deficient, probably deficient in water. Automatically when most think of nature, they presuppose that nature is programmed for survival and reproduction. That's the whole concept of Darwinian theory, that nature is programmed for success. And yet if I talk about humans, it's a completely different paradigm and belief system and thus a completely different set of questions, answers, and behaviors.

Let's get back to the plant. Imagine if you were a wilting plant in a study of many wilting plants. I'll be the researcher. The first thing I will need to do is randomly divide all of the wilting plants in the study into two groups. The gold standard in clinical research is a

Chapter 4

From Super Species to Sickest Species: Why Humans Have Become So Sick

And hark! how blithe the throstle sings!
He, too, is no mean preacher:
Come forth into the light of things,
Let Nature be your Teacher.

She has a world of ready wealth,
Our minds and hearts to bless
Spontaneous wisdom breathed by health,
Truth breathed by cheerfulness.

One impulse from a vernal wood
May teach you more of man,
Of moral evil and of good,
Than all the sages can.

Sweet is the lore which Nature brings;
Our meddling intellect
Mis-shapes the beauteous forms of things:
We murder to dissect.

Excerpt from The Tables Turned - William Wordsworth

Is there anything more important in your life than your health and the health of those that you love?

Health is Our Greatest Asset

I am very privileged to be able to speak all over the world and share my information about why humans have become so sick and what we can do to get and stay well. I regularly lecture to practitioners and to the general public in the United States, in Canada, in Australia and New Zealand, in Europe and soon, if I can find the time to accept the invitations, in South America and Africa. No matter where I go, there is one thing I find in common everywhere, especially in the industrial world: Humans as a species are losing their health at a great rate. The human species is getting sicker and sicker as time goes on, not healthier.

Ironically I have also discovered that everyone agrees that health is our greatest asset. Health is, quite simply, the most important thing determining the quality and quantity of our lives.

I would suggest, in fact I know, and I've spoken to tens and tens of thousands of people around the world who have agreed, that there is nothing that any of us would trade for our health, or for the health of those that we love. The tragedy is that I have never met anyone who feels that they or their loved ones are as healthy as they could be or want to be. In fact I have met thousands upon thousands who are sick and suffering and searching for answers.

The fact that we know, and openly admit, that health is the single most important thing in our lives, yet also admit that we are not expressing our genetic potential for health, happiness, and vitality, is an incongruity that we simply cannot ignore any longer. I would bet that most, if not all of you reading this, have engaged in some behaviors during the past week that you knew made you less healthy. You've also almost certainly failed to engage in some things that you knew would have made you more healthy. The same is probably true for those you love. This is what I call the great health paradox, or the apple and the donut paradox, which I will discuss in detail later.

I think that what you have just discovered, or at least became consciously aware of, is profound. Let's summarize. You have admitted that there is nothing more important than your health or the health of those that you love. You have admitted that both you and your loved ones knowingly engage in unhealthy behaviors and knowingly fail to engage in healthy behaviors. You have admitted that neither you nor your loved ones are as healthy as you'd like to be or have the potential to be.

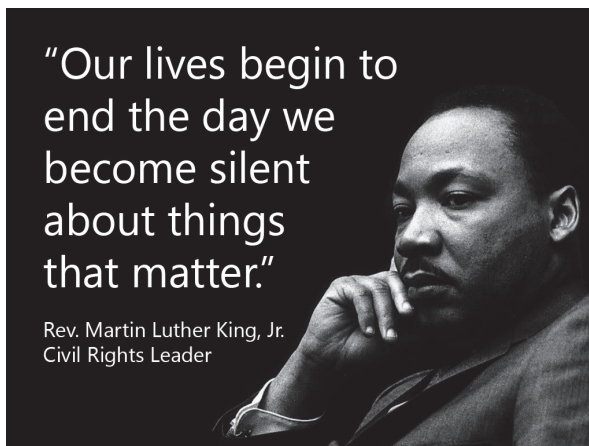
You have admitted that, although health is your most important life asset, you are not expressing your full genetic potential for health, happiness, vitality, or life satisfaction. And, most significantly, you have admitted that YOUR CHOICES are significantly involved in this health paradox.

I believe that everyone's purpose is to maximize their chance to enjoy a long and happy life and to contribute to the abilities of their family and community to do the same. If we are not experiencing this and if we are engaging in activities that we know are depriving us of this experience, we have to step back and ask ourselves why. Asking why is not always easy and it is not always popular.

As I've spent the last 25 years researching and even more so since I've spent the last 10 years traveling the world sharing that research, there has been a lot of times when it would have been more comfortable to be quiet. However, I believe with every molecule and cell in my body, as a scientist, as a clinician, and most importantly, as a father, that when you have compiled enough evidence to unequivocally support your conclusion, that it is a moral

Are you expressing your full potential for health and vitality?

If you have information that can save lives, is it your moral obligation to disseminate that information?



obligation to share that conclusion. This is especially true when that conclusion can save lives. I firmly believe that if you have valid information that can save the lives of those who hear and understand

it that if you fail to share that information it becomes an act of immorality - by omission.

As Martin Luther King said, “Our lives begin to end the day we become silent about things that matter.” Health matters to me. My health matters to me and your health matters to me. This is why I refuse to be silent about what I have learned. What matters to us is what drives our behaviors. This is a very important point that will come up again and again.

My job is to get your health and your lifestyle choices to matter to you. When this happens you will change your behavior. When you change your behavior you will change your health. When you change your health you will change your life.

Just because this matters so much to me doesn't mean that disseminating this information is easy all the time. I spend a lot of time away from home, and there is nothing more important to me than being at home with my wife and children. However, at some point, we have to make a choice about what we are going to do as parents and as citizens. I believe the greatest gift we can give our children, other than loving them unconditionally and making them feel safe and loved and important, is to be good role models and to make them proud of us. We also need to leave them and their children a healthy environment, both socially and physically. If traveling the world is necessary to do that then that is what I will do and I will never regret it and neither will my children.

Herophiles said, “When health is absent, wisdom cannot reveal

Chapter 5

The Genetic Expression of Illness: Understanding Stressors, Adaptive Physiology, and Sickness

“Note that “adaptation” refers simply to the resetting of response sensitivity to a signal (stressor). Although it may turn out badly over time, the outcome is not caused by any low level error or defect.”
“The allostasis model clearly identifies a paradox: people are dying, but their internal regulatory mechanisms are intact. So where should we intervene?”

Peter Stirling Ph.D. – Department of Neuroscience, University of Pennsylvania

Why We Get Sick - Toxicity And Deficiency

Let's now begin to look more deeply into the cause of illness, let's begin to develop an understanding of the physiology of sickness. What we have to figure out now is why our genes would genetically express illness instead of health. As you will soon learn it is all about stressors. Stressors, or genetically incongruent ingredients or environments do what? Stressors increase the rate of cell division and increase the rate of aging and increase the rate of cell damage. Any time you eat, move, think, or interact in ways that are toxic and deficient, that are genetically incongruent, you increase your rate of cell division and cell damage and you also increase the struggle of day to day life. You have a worse, shorter life when you do not choose a healthy lifestyle.

I want to remind you that it is unscientific to blame lifestyle illnesses on aging. There's only one thing that aging causes, and that's getting older. There is some degeneration with aging, of course, but most of the sicknesses that many assumed were due to aging are not due to aging at all, they are due to the bioaccumulation of the effects of stressors, of genetically incongruent lifestyle choices and environments. Remember the pond analogy for aging.

Think of all the animal species becoming endangered or going extinct. Think of the orca whales in Puget Sound and in the Juan de Fuca Strait where I live. Now, we know that, as they get older,

these beautiful marine mammals bio-accumulate more and more toxins such as PCBs and fire retardants (shockingly PCB use has been banned for decades but the PCBs do not breakdown and have infiltrated the entire ecosystem). So when the orcas become sicker as they age, should we conclude that it is because of old age, or because they have bio-accumulated poisonous toxins? Well certainly the answer is obvious to any marine biologist and to any logical layperson.

I strongly dislike and disagree with the concept of anti-aging, I find it both insulting and unnatural. A better concept would be anti-premature aging. Normal aging is a wonderful, beautiful part of life, and it's only in this ridiculous culture that we don't honor our elderly.

In part this is likely because our elderly are often very sick and can indeed become a burden. But our elderly are sick because of the way they lived in the years prior to becoming elderly, not simply because they are old. If you look at native cultures, hunter-gatherer cultures, genetically congruent cultures, the elderly weren't overweight, lying around with tubes hanging out of them. They weren't a burden to have around the teepee or the longhouse or the hut; they were a valuable asset. Do you know what their greatest asset was?

Their greatest asset was that they helped raise the children and they passed on the most significant information that we can pass on from generation to generation - how to eat, move and think and how to be a valuable, contributing member of a tribe.

We can make all the excuses we want, we can say that society is changing so fast now. We have computers and cars and television and cell phones. The truth is that when my grandmother was born she rode in a horse and buggy as a child and by the time she was a grandmother humans had landed on the moon. We can use this excuse to claim that her knowledge and skills became irrelevant in a fast changing world. That's garbage. You know what's relevant? How to eat, move and think, and how to love one another, and how to have a family raise a child. That is timeless wisdom and it is applicable to every generation. It is this generation's skill set

Can knowledge and skills regarding how to live a healthy lifestyle ever become outdated or unimportant to pass on from elders to younger generations?

*Can technology
build a healthy
human being
or a healthy
family?*

and wisdom for living that is lacking. Technology is not genetically congruent. It can't build a healthy human or a healthy family or a healthy society. Technology can certainly provide advantages but we can, and have, thrived as a species without it. We have more technology than ever before yet we are getting sicker and sicker.

What we cannot thrive as a species without is knowledge about how to live a healthy lifestyle and how to build healthy children and families and societies.

For the last few generations in industrial society we have been told health should be left to experts rather than to individuals. We have been convinced that experts in sickness and disease will miraculously be able to keep us healthy. This is like depending on experts in bankruptcy to provide information about how to build wealth; it is illogical and dangerous. As a society we have now reached the dangerous point where we are unable to pass on the wisdom of how to eat, move and think to our children. Think of breast-feeding, or basic first aid, or basic outdoor survival skills.

Most people pay more attention to which car they will buy than the resources they provide for the health of themselves and their families. It's time to change this.

It is time to figure out why we have made such bad choices and how we can start to make some good choices. Our lives and the lives of our loved ones depend on this.

Toxicity and Deficiency – The Root Causes of all Illness

There are two categories of stressor that cause cells to move away from a state of healthy function and toward a state of sick cell function (away from 10 on the scale of cell function and health). These two categories apply to all living organisms. These two categories of stressors are the explanation regarding why we have become so sick with chronic illness. The first category is toxicity; something toxic has entered into your ecosystem, into your cells. Toxins are defined as those things which force a state of adaptation. Toxins can be physical trauma, poisons, chemicals, pollutants, drugs,

Chapter 6

How Chronic Stress Becomes Chronic Illness: The Physiology of Chronic Adaptation

“Every stress leaves an indelible scar, and the organism pays for its survival after a stressful situation by becoming a little older.”

Dr. Hans Selye

Now that we have a basic understanding of the concepts of stressors, adaptive physiology and illness we can now explore the causal relationship between chronic stressors and chronic illness. We have some more important questions to ask and answer. What happens when humans live in a chronically stressful environment, when we choose to chronically eat, move, think, and interact in genetically incongruent ways? What changes in physiology and health take place when humans are under chronic stress, when we have chronic toxicity and/or deficiency? As Hans Selye taught us, the changes that take place are predictable and consistent. We enter a state of physiological adaptation, followed by a state of fatigue, and, finally, if we fail to remove the stressors from our environment, or move to a less stressful environment, we die. As we move along this path we develop chronic illness. Chronic illness is the direct result of chronic exposure to environmental or lifestyle stressors.

Remember, your state of physiology and your state of cell function are the genetic expression of your environment. Your state of health is the genetic expression of your past and present environments.

To fully understand this we need to first understand that the chronic release of stress hormones is due to chronic exposure to stressful environmental stimuli. I think we get this point by now. The next thing we need to understand is the effect of chronically

Is it possible to develop chronic illness without being chronically exposed to environmental or lifestyle stressors?

increased stress hormones; we need to understand the chronic physiological and health changes associated with chronically elevated stress hormones and chronically elevated allostatic load. There are two main categories of stress hormones that get deliberately and intelligently elevated in response to chronic stress. These two types of hormones are catecholamines (adrenaline and noradrenaline or epinephrine and norepinephrine) and cortisol.

Let's start with a broad overview of what these hormones do. The first thing that happens is that stress hormones increase heart rate, cardiac output, blood pressure, and blood flow to parts of the body and brain for flight or fight (fear and protection) and decrease blood flow to parts of the body and brain for healing, growth, and repair (relaxation and exploration). Stress hormones literally down regulate all the processes to do with anabolism or growth and up regulate all the processes to do with catabolism or body breakdown for emergency response.

Stress hormones put you into a state of alarm to maximize your survival by maximizing your chance to change your environment (fight) or move to a more suitable environment (flight).

Let's now look at some specific physiological effects of stress hormones. As you wind your way through this information always keep in mind how appropriate and intelligent these adaptations are in terms of increasing your chance of survival. Once you have finished going through all these adaptations ask yourself what the long term health effects of these adaptations would be if they were chronically sustained.

Remember, chronically sustaining these changes does NOT represent pathology, it represents necessary, appropriate, and intelligent responses to chronic stressors, to chronic rocks in your backpack.

The following summary of the physiological changes associated with the alarm or stress response and how sustaining these responses leads to states of adaptation and fatigue (allostatic load) are excerpted from two of my previous books – 'Innate Physical Fitness' and 'The Innate State of Mind'. Although there

are some physiological terms there is nothing that you will not understand. Focus on seeing the big picture and do not concern yourself with memorizing every detail. You can always reread the section or write out some flow charts at a later time if you choose to commit the material to memory. For now just seek to understand the big picture of how chronic stressful or genetically incongruent or pathological lifestyle choices elicit intelligent physiological adaptations that represent an allostatic load and can ultimately lead to fatigue, chronic illness, and death.

The first thing to occur is that your brain and nervous system detect a threat or a stressor (i.e. a tiger leaping at you or some other form of toxicity or deficiency).

Your brain and nervous system send signals to the cell bodies of the sympathetic nervous system located in the intermediolateral tract (IML) of your spinal cord where the stress response or fight or flight response is initiated. The sympathetic system directly influences visceral (organ) function via neuronal control of these organs. All fear and protection or fight or flight functions required to survive the threat are up regulated (i.e. heart rate and blood pressure, increased blood sugar etc) and all anabolic or growth and repair activities are down regulated (i.e. growth hormone, immunity, digestion, sex drive). You don't need growth and repair for survival during an attack from a tiger so this represents a very intelligent adaptation or shift in physiology to meet the environmental demand.

Stress hormones, particularly cortisol, down-regulate your cell-mediated immune system.⁴⁷ Your immune system is very metabolically expensive. This is why you get tired when you have a cold or a flu. You get tired because you have to boost up your immune system, and that takes a lot of energy, a lot of glucose, and it's very tiring. So why would your body prioritize energy toward operating your immune system if the priority is to escape from a tiger? It wouldn't. Think about it, would you like to have your white blood cells in charge of protecting you from the tiger attack? So your immune system is basically useless to you, unless or until you survive the attack and are wounded, then your immune system becomes very important.

The sympathetic system (IML) sends a message directly to your adrenal glands (uniquely, when sending a message to the adrenal

Is the immune system important during an acute threat of attack?

Chapter 7

How Do We Get and Stay Well: More Diagnosis, Drugs, and Surgery?

“Drugs never cure disease. They merely hush the voice of nature’s protest, and pull down the danger signals she erects along the pathway of transgression. Any poison taken into the system has to be reckoned with later on even though it palliates present symptoms. Pain may disappear, but the patient is left in a worse condition, though unconscious of it at the time.”

Daniel H. Kress, M.D.

At this point I feel you have enough information to accurately answer the first of the two most important questions regarding human health. That question is; why are humans so sick? I think you have seen enough evidence to conclude that humans are so sick with chronic illness because of our environment, because of our lifestyle choices. More specifically humans are so sick because we are living in ways that are genetically incompatible, we are eating, moving, thinking, and interacting in ways that are stressful and that place a chronic stress load or allostatic load on our physiology. We bio-accumulate the effects of our bad lifestyle choices and over time this catches up to us.

We are not sick because of bad genes or innately pathological cell function. We are not sick because of bad genes, bad cells, or bad luck. We are sick because of bad choices. We are sick because we have created, and choose to live in, pathologically stressful environments that force the chronic genetic expression of unsustainable adaptive physiology that inevitably leads to fatigue and early death.

We are now ready to answer the second of the two most important questions regarding human health; what is required to get and stay well? This is really the entire point of this book, to empower you to be able to answer this question. Remember, this book is not about assessing blame, this book is about taking responsibility. If you are going to develop the ability to take responsibility for your

health you need to know what is required to get and stay well. The reason we spent so much time figuring out why we get chronic illness is because the answer to this question predetermines what solutions we will pursue to get and stay well. In fact, how we answer the first question predetermines whether or not we will even consider that it is possible to get and stay well.

The fact is that the prevailing Sickness & Treatment Paradigm is a belief system that assumes chronic illness is the result of bad genes, bad cells or bad luck and that the solution is more drugs and surgeries. That's just bad science and bad logic and it has produced bad results and is bankrupting nations, corporations and individuals.

If we believe we are sick due to genetic predetermination or to innately weak or pathological cells we will inevitably conclude that wellness and prevention are impossible and thus spend all our time, energy, and resources on diagnosis and treatment. As long as we believe that we develop a chronic illness because of bad genes, bad cells or bad luck, then we feel we have no power to influence our own health destiny. Once we believe this it is easy to believe that we have no responsibility in terms of our health and sickness. Once we have adopted this belief system we have, by definition, adopted a stance of helplessness and dependence. We simply live our lives waiting to see what will happen, waiting to see if we will be one of the few lucky ones or, when it comes to chronic illness, one of the many unlucky ones.

As it stands now, if we actually believe we have no responsibility or power to determine our own health destiny, we have virtually no chance of living our lives without chronic illness. What is more frightening is that these odds are getting worse every year. Can you think of a worse belief system in terms of trying to get people to change their lifestyle habits? Can you think of a better belief system if you are trying to get people to buy drugs and surgeries or herbs and tonics? This is not to say that you may never require a drug or surgical intervention, it just means that you have the ability to exponentially reduce that chance. What I want to get across to you, and what I will get across to you, is that only when you understand the truth about why you get sick will you be empowered to make intelligent choices about how to get and stay well.

If you wanted to sell drugs and surgeries what would you want people to believe, that chronic illness is caused by bad genes, bad cells, and bad luck or that chronic illness was caused by lifestyle choice?

Is there any available evidence that prescribing more drugs and performing more surgeries has increased health or decreased the incidence or prevalence of chronic illness? Where did you read that, may I have a copy?

Just in case you somehow still believe that drugs and surgeries, or perhaps some as of yet undiscovered new and improved drugs and surgeries, are the answer to what is required to get and stay well we should look at the available data regarding this conclusion and its application in society. Perhaps you think I am being alarmist. Perhaps you may still believe that it just is not possible that so many intelligent experts have gotten it wrong. Perhaps you still think that the solution is to reform the current system of diagnosing and treating chronic illness with drugs and surgery.

At this point I must ask you to ask yourself why you still think this. What evidence do you have that the current system is working to heal or prevent chronic illness? What evidence do you have to suggest the current system will ever work to heal or prevent chronic illness? Even if the current system could successfully treat chronic illness, which it most certainly cannot, how could we afford it? If more and more people get more and more chronic illness every year and require more and more treatments which cost more and more money how can this be sustained? It can't. Let me repeat what I said in the opening chapter. The ONLY solution to the current pandemic of chronic illness and the economic and social burdens it causes is fewer sick people (more healthy people).

The fact is that until we can create a population that has less illness per person we will never spend less per person, we will never have more productivity per person, we will never have more quality of life per person and we will always spend more per person.

Treating chronic illness NEVER saves money, treating chronic illness ALWAYS costs money. In fact, the earlier we intervene and start treatment the more it costs. Unless early intervention prevents the need for further intervention, early detection simply means that people start costing money earlier (or increasing profits earlier for those in the disease treatment business). Sick people become customers sooner. Think about it. What percentage of early detection and treatment results in a person getting cured and thus not requiring any more treatment? If prescribing more drugs and performing more surgeries got people better and saved money then what we would see is that if we spent more at the start we would begin to have to spend less. What we would see is that people who got treatment would get better and then no longer need treatment.

Chapter 8

How To Get and Stay Well: Evidence-Based Lifestyle Intervention

“The doctor of the future will give no medicine, but will interest patients in the care of the human frame, in diet, and the cause and prevention of disease.”

Thomas Edison

“Nature’s biological imperative is simple: No intelligence or ability will unfold until, or unless, it is given the appropriate model environment.”

Eric Jensen (1995)
Brain-Based Learning

It is now time for the most important section of the book, the solution! It is time to substantiate that lifestyle is the only evidence-based, cost-effective solution for wellness and prevention. I want to leave you with certainty about the importance of your lifestyle choices and the amount of power and control you have regarding your own health destiny. I truly believe that, when you learn how significant your choices regarding how you eat, move, think, and interact are in terms of your health and your ability to prevent illness, that this information will create significant enough change in your belief systems to create meaningful change in your behaviors.

Let's spend some time reviewing the literature. Most of you will have some understanding regarding how certain lifestyle patterns can increase your chances of developing chronic illness but few of you will be aware of how important lifestyle choice is with regard to not only preventing illness, but to expressing your potential for health and vitality and for experiencing a better, longer, life. The research is unequivocal, lifestyle choices are the single greatest determinant of both quantity and quality of life.

Adopting a healthy lifestyle, a genetically congruent lifestyle, is the only viable solution for wellness and prevention. It is also the most evidence-based healing solution for those already suffering with chronic illness, and it SAVES LIVES, SAVES MONEY, and can SAVE HEALTHCARE.

Based on the literature, what is the most evidence-based intervention for preventing and healing from chronic illness?

In a recent article, I think the breakthrough landmark paper regarding the paradigm shift from Sickness & Treatment to Wellness & Prevention, Hyman et al. (2009) emphatically state that lifestyle needs to become the foundation of all healthcare.⁹⁰ They point out that for just the five most expensive chronic illnesses, heart disease, diabetes, metabolic syndrome, prostate cancer, and breast cancer, that addressing the lifestyle causes of these illnesses rather than treating them with drugs and surgery could not only save millions of lives but trillions of dollars.

Hyman et al. conclude that 1.9 TRILLION dollars could be saved on the treatment of these illnesses alone because adopting a healthy lifestyle PREVENTS illness and gets sick people well.⁹¹

Just imagine the human suffering that can be prevented; the money is insignificant when you compare it to the suffering.

More importantly is that these authors echo exactly what I pointed out years ago in my series of *Innate Diet*, *Physical Fitness*, and *State of Mind* books. They explain why drugs aimed at treating the effects of lifestyle-caused illnesses do not work. They articulate what I have been teaching for years, that chronic illness is lifestyle illness and simply giving drugs to alter the risk factors like blood pressure or cholesterol does not work. They make it clear to the reader that “lifestyle and environment influence the fundamental biological mechanisms leading to disease: changes in gene expression, which modulate inflammation, oxidative stress, and metabolic dysfunction.”⁹² Now I would not call it metabolic dysfunction, I would call it fatigue from chronic adaptation to a pathological environment but I can’t tell you how wonderful it is to see this paradigm shift occurring.

“Lifestyle and environment influence the fundamental biological mechanisms leading to disease: changes in gene expression, which modulate inflammation, oxidative stress, and metabolic dysfunction.”⁹²

They actually state in this paper exactly what I have stated so many times in my books, from stage, on radio, on video, and taught to thousands of chiropractors in my post-graduate wellness

lifestyle certification program. The changes in physiology associated with chronic illness are not genetic or pathological, they are epigenetic, they are the effects of environmental stressors. Remember what I taught you earlier, “your health or cell function is the genetic expression of your environment.” Hyman et al. state, “The distinction between risk factors and causes is an important one. High blood pressure, dyslipidemia (high cholesterol), and elevated C-reactive protein (chronic inflammation) or glucose

(insulin resistance) are not in and of themselves the real causes of chronic disease but simply surrogate markers that are the effects of environmental toxins, what we eat, how much we exercise, and how we respond to stress.”⁹³ I nearly fell off my airplane seat when I read this, I wasn’t sure whether to be happy that this paradigm shift is occurring or upset that I wasn’t given any acknowledgement for having written the same thing years earlier! I know it’s not about me.

These authors make some of the strongest statements I have ever seen get published in the peer-reviewed clinical literature. Even though this paper was published in an “alternative therapies” journal it is still an indication of how a paradigm shift is occurring. Hard to believe that lifestyle is considered “alternative.” These authors not only espouse the importance of lifestyle “It should be the foundation of our healthcare system;” they also discuss the reasons it is not. “There is strong evidence that this approach works and saves money. Unfortunately, insurance doesn’t usually pay for it. No one profits from lifestyle so it is not part of medical education and practice.”⁹⁴

This is exactly why we should not be relying on medical practitioners for expertise, advice, or interventions for wellness and prevention; it is simply outside their scope of education and

“There is strong evidence that this approach works and saves money. Unfortunately, insurance doesn’t usually pay for it. No one profits from lifestyle so it is not part of medical education and practice.”

Hyman et al. Lifestyle Medicine: Treating the Causes of Disease. Alternative Therapies in Health and Medicine Nov/Dec 2010

Why isn't lifestyle part of medical education or part of the medical scope of practice?

Chapter 9

Finding the Right Paradigm for the Job: Fire Departments or Contractors?

“Learning what to choose, and how to choose, may be the most important education you will ever receive.”

Shad Helmstetter

Healthcare has lost its way on so many levels. In every healthcare field whether it be medicine, chiropractic, naturopathy, homeopathy or osteopathy we have become so entrenched in the Sickness and Treatment Paradigm that ‘correct’ diagnosis and treatment has become more important than patient outcomes. As an intern in any one of the healthcare professions you can get an A+ grade even if all your patients get sicker or die. The whole system has become doctor centered and diagnosis and treatment centered instead of patient centered and outcome centered. As long as you write down what is considered the correct diagnosis and provide what is considered the correct treatment you are considered a good practitioner in this paradigm – the outcome for the patients are irrelevant with regard to evaluating the worth of the practitioner or intervention. Why? Because it is assumed that if what you do does not help then nothing will. You are not taught to question the accepted intervention even if it doesn’t work. If you believe the patient is sick due to bad genes or pathological cell function, then you just believe the reason they are sick and don’t get well is due to the inherent weakness of the patient rather than the inherent weakness of the intervention. In fact, you are highly discouraged from questioning accepted interventions or the actions of your peers.

This is not only a significant obstacle to change in terms of the interventions offered, it is a significant obstacle to improving patient outcomes. Let’s think about prognosis for a moment. What

does a medical prognosis indicate, or, more, importantly, how is it interpreted by doctor and patient? A prognosis is interpreted as the most likely outcome for the patient. How is prognosis determined? Prognosis is determined by looking at outcomes of previous patients with the same diagnosis, who received the same advice and treatment. So what this means is that the doctor and patient expect the prognosis to predict the outcome. If previous patients did not get and stay well neither doctor nor patient expect any different.

The problem is that this is all based on the a priori assumption that the treatment was evidence-based and that is was the best, or only, available treatment option. What arrogance by the practitioner and what hopelessness for the patient. The fact is that the ONLY valid information that can be derived from prognosis is that if you do exactly what the other patients do you will get the same result they did. In other words, if you have a lifestyle caused illness and choose to treat this with drugs and or surgery while never addressing the lifestyle cause, you will have the same prognosis and outcome as everyone else who applied this strategy. My advice? If you don't want the same result don't do the same thing!

Does this mean that there is no need or benefit for drugs and surgery or for the Sickness and Treatment Paradigm or the practitioners that work within it? Of course not. The fact that drugs and surgery are not viable options for wellness and prevention certainly does not determine whether or not they are viable options for those times and those patients that require such an intervention in a crisis or for palliating symptoms. However, and this is extremely important, we MUST not make the absurd assumption that if wellness and prevention interventions are not viable options for crisis intervention or instantly palliating symptoms, that they are not viable options for improving health and preventing illness.

The Fire Department Analogy

I want you to understand how it is possible for the Sickness & Treatment Paradigm, for drugs and surgery, to be able to save a life in a crisis, but not be appropriate for wellness and prevention and vice versa. I also want to elucidate the differences between these approaches so that you can determine when one, the other, or both are appropriate.

*How is
prognosis
determined?*

For this analogy your mind and body are your house, medical doctors are the fire department, and lifestyle practitioners are the contractors - the house maintenance and renovation experts. Now, imagine your house is on fire. It is an emergency. Who should you call, the fire department or the renovation and maintenance experts?



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Would it be logical to call the fire department to use their axes and fire hoses to get and keep your house well?

I hope you said the fire department. Now, what will the fire department do when they get to your burning house? Well, what they do will depend on what tools they have to work with. What tools does the fire department have? The tools that they have developed are congruent with their goal to put out fires (treat disease risk factors and symptoms). They have axes and fire hoses (drugs and surgery). What will they use these for? They will use the axes to break out all your windows, chop down your door, and chop open your walls. They will use the hoses to soak all the walls and furnishings of your home.

What is the result? If you are lucky, if they get there in time and do not make any big mistakes, they will save the life of your house. For this you should be eternally grateful. Now, what is left after they have put out the fire? A huge mess to clean up. In fact, your house is now in far worse shape than it was before the fire ever started. Think about it, what would happen if you did not have a fire but decided to use axes and fire hoses on your house? Would this not do damage to your house? Of course it would. Now, think

Chapter 10

Wellness and Prevention: 21st Century Healthcare

"To administer medicines to diseases that have already developed and to suppress revolts which have already begun is comparable to the behavior of those persons who begin to dig a well after they have become thirsty, and of those who begin to cast weapons after they have already engaged in battle. Would these actions not be too late?"

The Yellow Emperor's Classic of Internal Medicine, 200 BC

We need a completely new system based on a completely new paradigm. We need a healthcare system that is based on determining why we get sick and how we can get and stay well. We need a system that addresses the cause of illness and provides the required resources to get and stay well. We don't need to reform a system based on an incorrect paradigm. We can't get a solution by reforming how we ask and answer the wrong questions. We need a new paradigm, we need the Wellness & Prevention Paradigm and the lifestyle-centric research and clinical interventions that arise from it.

There can be no debate regarding the fact that lifestyle intervention must become the foundation of healthcare reform.

We don't need a more efficient system of treating the effects of poor lifestyle with drugs and surgery. Offering drugs and surgery as the solution for chronic illness prevention or cure is illogical, unscientific, and hopeless. The only solution with any hope, that is evidence-based, and that is at all logical, is lifestyle intervention.

What this means, just so there is no confusion, is that your hope, your future, and your health destiny, are your responsibility. It is YOUR choices that will make the greatest difference. Lifestyle centric practitioners operating within the Wellness & Prevention Paradigm can help you discover which choices you should make

If healthy lifestyle behaviors are the solution to get and stay well, what variables determine effectiveness of care?

and the best ones will even offer advice and programs to empower you to make these choices. However, in the end, regardless of any practitioner or intervention you utilize, it will be your knowledge, your beliefs, and your actions that will determine your health, vitality and longevity more than anything else.

What we need now are Wellness and Prevention Paradigm practitioners who have the knowledge and skills to teach, inspire, empower, coach, and role model healthy lifestyle change.

We need an entirely new breed of healthcare professionals, we need an entirely new healthcare field. We need lifestyle practitioners practicing within the field of wellness and prevention. We need to think outside the current sickness and treatment box and start thinking within the Wellness & Prevention Paradigm. We need to stop categorizing practitioners by profession and start categorizing practitioners by their knowledge and by their ability to elicit lifestyle change.

Who cares what letters a practitioner has after her or his name if she or he cannot increase the health of patients? If we admit that the only solution is lifestyle change then we must also admit that the only valid way to measure the effectiveness of a lifestyle intervention, or of a lifestyle practitioner, is by the actual patient lifestyle changes and subsequent health changes that are elicited. Patient behavior choice is the key to wellness and prevention and thus empowering patients to make healthy choices is the foundation of wellness and prevention practice.

This changes EVERYTHING. The entire Sickness & Treatment Paradigm is based on specific diagnosis to determine a specific drug or surgical treatment. Diagnosis of disease is not relevant when it comes to determining which lifestyle behaviors are required for wellness and prevention. If you can diagnose it you cannot, by definition, prevent it because it is already present. Lifestyle patterns - lifestyle choices and living environments - are the outcome goals and the variables that must be measured and documented. Because both stressors and the genetically required ingredients or raw materials for the expression of health are SPECIES WIDE, each member of the species, each patient, requires the same eating, moving, thinking, and social interaction patterns to

be well.

Think about it. Does it matter what diagnosis you have or should every human, regardless of diagnosis, eat healthy foods, exercise, and think and interact positively? Of course they should. Would every human, regardless of diagnosis, benefit from eating healthier foods, more healthy exercise (within their abilities of course), and more healthy thought and social interaction patterns? Of course they would. This is very obvious in the lifestyle literature. Even when the people providing the intervention have no information regarding the disease status of the subjects the interventions still improve the health of the subjects.

In fact, what is very interesting, is that you can put a group of people with a huge variety of different diagnoses, risk factors and symptoms into an exercise class, onto a healthier diet, or into a program of relaxation and stress reduction and they ALL get better! Lifestyle is a true panacea, not for treating disease, but for improving health.

You will begin to understand that there are panaceas. Panaceas are simply those things that we genetically require and are missing or are deficient in. If everyone is suffering from a deficiency of vitamin C then vitamin C is a panacea for improving cell function in this population. Now imagine if, like me, you spent your life studying what the human species requires in terms of raw materials from the environment with respect to eating, moving, thinking, and interacting. Imagine if your mission was to create a healthcare system that trained doctors to determine whether or not patients were sufficient in what they genetically require or if they were toxic with things that were genetically incongruent and then teach them how to address these causal issues? This is exactly what I have taught to over 5000 doctors in my Wellness Lifestyle Certification Program. The results have been extraordinary.

How great it will be when the Wellness & Prevention Paradigm is the foundation of healthcare and so much of the tragic suffering and death are prevented. This is not a pipe dream. This is an evidence-based goal and it is an achievable goal.

Is a disease diagnosis required to determine if someone requires lifestyle intervention?

*Can a human
being be
healthy without
a healthy,
properly
moving and
aligned spine?*

Chiropractic is important for health for many of the same reasons exercise is so important for overall health. Movement feeds the brain, the movement nutrients are afferent nerve signals called proprioception that travel from properly moving joints to the brain. There are well documented movement-learning and movement-pleasure pathways that involve the spinal joints and surrounding tissues sending proprioceptive signals to the brain.^{105, 106, 107} Proper range of motion is required for this to occur. Chiropractic can help restore motion and thus the delivery of motion-derived nutrients (proprioception) to the brain. Of course you still need to exercise. Chiropractic can help restore range of motion, it cannot provide sufficient motion.

When your spinal joints are not moving properly they start to degenerate and get inflamed and they send stress signals (nociception) to the brain that can lead to the brain releasing the stress hormones involved in chronic stress physiology (cortisol and catecholamines). This can also, but does not always, lead to pain.¹⁰⁸ Restoring motion decreases these stress signals, decreases the stress hormone release they elicit, and thus decreases allostatic load. If the nociception is caused solely by the lack of motion and proprioception, pain will almost certainly subside when motion and proprioception are restored and nociception is reduced. However, if there are other sources of nociception, if there are other unaddressed rocks in the backpack, the pain may not subside. The restoration of motion is required, and beneficial, whether the pain subsides or not. Remember the plant analogy? The plant can still be wilting even after receiving water and improving function – it may also need nutrients or sunlight or the removal of toxins. The same is true for back pain or any other symptom.

There are very few health issues that are caused by one stressor or rock in the backpack and even fewer that are solved by the removal of one stressor or rock in the backpack. This is precisely why a holistic approach that includes lifestyle is so important.

Whether this improvement in spinal motion and the restoration of the afferent neurological pathways involved with restored proprioception and reduced nociception can treat or cure any chronic disease is not the relevant or important question if the goal is improving health and function. The only things that

are relevant are whether or not a lack of proper motion is a stress load and detracts from health and whether or not restoring this motion removes that stress load and improves or restores the health and function that was lost due to the lack of motion. The science is clear, lack of motion degenerates joints and causes decreased proprioception and increased nociception.^{109, 110} The science is also clear that these changes can lead to significant increases in stress load and stress hormone release. There is also peer-reviewed research to show that chiropractic spinal adjustments result in restored motion (proprioception) and reduced nociception and stress hormone levels.^{111, 112, 113, 114}

Now, if anyone ever tries to tell you that there is no evidence to support chiropractic they are either deliberately lying, simply ignorant of the literature, or expressing a falsehood which is based on either misinformation or dogmatic bias. Again, let me be very clear. This does not mean chiropractic is a valid or logical treatment for chronic illness. Does this mean that patients under chiropractic care never see improvements in chronic illness symptom or risk factor status? Certainly not. There are a great many chiropractic patients with documented improvements in things like immune function, asthma, allergies, colic, blood pressure, cholesterol levels, depression, anxiety and many other things. The same is true for people who have received any intervention that reduces stress load or allostatic load. The same is true for people who start to exercise (or remove the stress of sedentary living), for people who reduce emotional stress with meditation and imagery, for people who improve their diets etc.

In terms of the cause of chronic illness and the requirements for chronic health is it logical to assume a single cause or single solution?

Any intervention that removes toxicity and/or deficiency and/or restores purity and sufficiency moves us toward health and away from adaptive physiology. Whether such interventions alone will “cure” a disease is not what determines their worth.

What determines their worth is whether or not they reduce allostatic load and improve states of health and function.

Without doubt, there will certainly always be other stressors or allostatic loads or rocks in the backpack that need to be addressed. Suggesting there is one cause (bad genes) and one cure or treatment (drugs) for chronic illness is just not a logical or scientifically sound approach.

If an intervention removes a stressor from your internal or external environment, does this intervention, by definition, result in greater health and function?

How is an improvement in overall health status possible from improving spinal motion? It is not magic. Reducing a stress load, removing a rock from the backpack, reduces the release of stress hormones and pushes you up the scale of health and function away from stress physiology and toward homeostatic physiology. This can, but does not always, result in a change in seemingly unrelated (but actually very related) physiology and symptoms.

Let me help you understand. There is a lot of misinformation and confusion about chiropractic, some of it deliberately spread, some just a product of a lack of understanding by both chiropractors and other health professionals. Once you understand the effects of elevated stress hormones you can begin to understand that anything that elevates them represents a stress load or allostatic load or rock in the backpack. Understanding this requires viewing things through the Wellness & Prevention Paradigm. The question must change from whether a lack of spinal motion is the singular cause of any specific symptom or chronic disease to whether or not lack of spinal motion represents a stress load and thus a contributing causal factor in loss of function and health.

The question must change from whether chiropractic care alone represents a treatment for symptoms or chronic disease to whether restoring joint motion represents a removal or reduction of stress load (allostatic load) and thus a move toward better health and function.

Let me share with you what can be substantiated with valid scientific evidence. Lack of proper spinal motion causes spinal joints to degenerate and become inflamed and this causes an increase in body stress signals (nociception) to be sent to the brain. Increased nociceptive signals cause the brain to increase the release of stress hormones such as cortisol and catecholamines. Increased release of stress hormones drives the physiology of the body toward a state of alarm and adaptation, and, if these levels remain elevated, fatigue, illness, and early death (a summary of the effects of these hormones was provided in an earlier chapter).

I have not said that a lack of spinal motion by itself can cause a large enough increase in stress hormones to cause chronic illness or early death; there is no evidence to either substantiate or deny

Chapter 11 New Paradigm – New Practitioners: Will the Reform Meet Resistance?

The medical monopoly or medical trust is not merely the meanest monopoly ever organized, but the most arrogant, dangerous and despotic ... Any and all methods of healing the sick by means of safe, simple and natural remedies are assailed and denounced as fakes and frauds.

J.W. Hodge M.D.

The hard truth is that once we accept the fact that lifestyle intervention is the most evidence-based, most effective, and most cost-effective solution regarding wellness and prevention, this immediately makes the vast majority of drug and surgical procedures, and any ‘natural treatments for disease, and the practitioners that offer them, ineffective at best and harmful at worst. This is a tough pill (or natural herb) to swallow.

Too bad, I could care less about how hard it is or whose feelings might get hurt or whose ego might get bruised or who might lose money or power or influence or social status.

People are dying by the millions, our children are overweight and sick, our elderly are infirm and our middle aged are so sick that 80 percent of our workforce is riddled with chronic illness. Nothing else matters. The only thing that matters is getting and keeping people well.

What letters we have after our name, what schools we went to, what profession we belong to are all MEANINGLESS when it comes to saving lives. The only thing that matters is whether or not what we offer is effective in getting and keeping people well. We need to stop assessing treatments by whether they can change a disease risk factor or a symptom and start assessing interventions by whether or not they can restore health or prevent illness. This

What is your opinion of non-medical practitioners? Is this opinion based on evidence or dogma? Is it based on opinions of medical practitioners or on evidence?

is 21st Century healthcare. It's not a matter of if, it is a matter of how long, how many more lives and how many more dollars will be wasted, before when.

There will probably be turf wars. Medical associations and the pharmaceutical companies spent years and billions of dollars lobbying to take control of healthcare.

Their strategy was to pass the drugless practitioner act which divided all practitioners into two categories; those with the legal right to prescribe drugs and perform surgery and 'the rest'. They spent billions of dollars on marketing and lobbying to make everyone believe that only those practitioners that could prescribe drugs were 'real doctors' and scientific and that everyone else was an unscientific 'quack'. Ask yourself what your opinion of non-medical practitioners is. Ask yourself what your medical doctor's opinion of non-medical practitioners is. Are these opinions based on facts, on evidence, on research, or on a long-standing deliberate campaign to create this dogmatic belief system?

Let me give you a quick history lesson. Despite organized medicine's efforts to create a strong bias against non-medical practitioners, a growing number of dissatisfied patients began seeking out such practitioners. To combat this loss of power and revenue organized medicine and the pharmaceutical companies who depended on them, and ultimately came to strongly influence them, simply increased their efforts - often illegally.

In 1963 the AMA authorized the formation of the Committee on Quackery whose primary goal was to "contain and eliminate chiropractic." The committee conducted nationwide conferences on chiropractic, prepared and distributed anti-chiropractic propaganda calling chiropractic an unscientific cult, regularly communicated with medical boards and associations warning that professional association between medical physicians and chiropractors was unethical, and actively discouraged colleges, universities, and faculty members from cooperating with chiropractic schools and/or research efforts.¹¹⁷

Keeping chiropractors out of hospitals was one of the primary goals of the AMA. When, based on evidence of effectiveness

and safety, chiropractic was included under medicare in 1973, the AMA became especially concerned that this would open the way for chiropractors into hospitals. The AMA actually threatened hospitals with loss of accreditation if they allowed chiropractors to come into the hospitals and help patients.¹¹⁸

Did you know that in 1987 a Federal U.S. appellate court found the American Medical Association guilty of an illegal, deliberate, disinformation campaign and an organized conspiracy to destroy chiropractic that was based on eliminating competition? Did you know that the AMA repeatedly tried to appeal this decision and that the decision was upheld in the U.S. Court of Appeals in 1990 and that the AMA petitioned the U.S. Supreme Court three separate times for an appeal and each time were denied? Did you know that the judge ordered an injunction that included orders that the AMA cease and desist its efforts to restrict the professional association of chiropractors and AMA members and further, to personally notify all 275,000 of its members of this injunction? Did you know that the American Hospital Association sent out 440,000 separate notices to inform hospitals across the United States that they had no objection to allowing chiropractic care in hospitals? Did you know that during the trial it was conclusively shown that the AMA deliberately and willfully undermined chiropractic education and schools, undercut insurance programs for chiropractic patients, and concealed evidence of the effectiveness of chiropractic care?¹¹⁹ Did you know that by the time this occurred that the AMA's efforts to undermine the reputation of chiropractic within the medical and public domains had been so successful that this bias still exists and still adversely affects many doctors and patients?

Let me give you another history lesson. In 1993 the Ministry of Health in Ontario, Canada commissioned an independent report on the effectiveness and cost-effectiveness of chiropractic management of low back pain. This was an independent report; none of the authors were chiropractors. The head researcher Pran Manga, Ph.D., Professor and Director, Masters in Health Administration Program, University of Ottawa and his co-authors did an exhaustive review of the available literature.¹²⁰

Let me quote directly from this commissioned report regarding the published findings.

Have the attacks on non-medical practitioners been motivated by evidence of ineffectiveness or harm, by evidence of superiority of medical interventions, or by protection of a monopoly?

What is your opinion of chiropractic? Is it possible you have the opinion that it is either unscientific or unsafe? Where did this opinion come from? Is it from reading the literature or from dogmatic opinion?

“On the evidence, particularly the most scientifically valid clinical studies, spinal manipulation applied by chiropractors is shown to be more effective than alternative treatments for low back pain. Many medical therapies are of questionable validity or are clearly inadequate.” “Our reading of the literature suggests that chiropractic manipulation is safer than medical management of low back pain.” “What the literature revealed to us is the much greater need for clinical evidence of the validity of medical management of low back pain.”¹²¹

“Indeed, several existing medical therapies for low back pain are generally contraindicated on the basis of existing trials. There is also some evidence in the literature to suggest that spinal manipulations are less safe and less effective when performed by non-chiropractic professionals.” “There is an overwhelming body of evidence indicating that chiropractic management of low-back pain is more cost-effective than medical management. The lack of any convincing argument or evidence to the contrary must be noted and is significant to us in forming our conclusions and recommendations. The evidence includes studies showing lower chiropractic costs for the same diagnosis and episodic need for care.”

“There would be highly significant cost savings if more management of low back pain was transferred from physicians to chiropractors. Evidence from Canada and other countries suggests potential savings of hundreds of millions annually.”¹²²

“Despite official medical disapproval and economic disincentive to patients (higher private out-of-pocket cost), the use of chiropractic has grown steadily over the years.”

“In our view, the constellation of the evidence of:

1. The effectiveness and cost-effectiveness of chiropractic management of low back pain
2. The untested, questionable or harmful nature of many current medical therapies
3. The economic efficiency of chiropractic care for low back pain compared with medical care

4. The safety of chiropractic care
5. The higher satisfaction levels expressed by patients of chiropractors. Together this evidence offers an overwhelming case in favour of much greater use of chiropractic services in the management of low back pain.”

Based on these findings, the recommendations of the Manga Report were as follows:

1. “There should be a shift in policy to encourage and prefer chiropractic services for most patients with low back pain.”
2. “Chiropractic services should be fully insured under the Ontario Health Insurance Plan, removing the economic disincentive for patients and referring health providers.”
3. “Because of the high incidence and cost of low back pain, hospitals, managed health care groups (community health centers, comprehensive health organizations, and health service organizations) and long-term care facilities should employ chiropractors on a full-time and/or part-time basis.”
4. “Chiropractors should be employed by tertiary hospitals in Ontario. The opportunity for consultation, second opinion and wider treatment options are significant advantages we foresee from this initiative which has been employed with success in a clinical research setting at the University Hospital, Saskatoon.”
5. “Hospital privileges should be extended to all chiropractors for the purposes of treatment of their own patients who have been hospitalized for other reasons, and for access to diagnostic facilities relevant to their scope of practice and patients’ needs.”
6. “Chiropractors should have access to all pertinent patient records and tests from hospitals, physicians, and other health care professionals upon the consent of their patients. Access should be given upon the request of chiropractors or their patients.”

If you compared and contrasted the EVIDENCE regarding safety, cost-effectiveness, effectiveness, and patient satisfaction for all available spinal care interventions which would be valued the highest?

Why would an independently commissioned report, whose recommendations could save billions of dollars, be ignored?

7. “Since low back pain is of such significant concern to workers’ compensation, chiropractors should be engaged at a senior level by Workers’ Compensation Board to assess policy, procedures, and treatment of workers with back injuries.” “A very good case can be made for making chiropractors the gatekeepers for management of low back pain in the workers’ compensation system in Ontario.”
8. “Chiropractic education in Ontario should be in the multidisciplinary atmosphere of a university with appropriate funding. Chiropractic is the only regulated health profession in Ontario without public funding for education at present, and it works against the best interests of the health care system for chiropractors to be educated in relative isolation from other health science students.”
9. “Finally, the government should take all reasonable steps to actively encourage cooperation between providers, particularly the chiropractic, medical, and physiotherapy professions. Lack of cooperation has been a major factor in the current inefficient management of low back pain.”

This report was one of the main reasons, other than paradigm, that I chose to enter the chiropractic profession. This report made me realize that my own previous bias, and the bias of so many I discussed my consideration of becoming a chiropractor with, including my own Ph.D father and some of the Ph.D professors at the university where I was completing my Master of Science degree, was based on unscientific, dogmatic, unethical opinion and not scientifically valid information. Ironically and most hypocritically, it is often these same people that accuse chiropractic of being unscientific and dogmatic.

Can you guess how many of these recommendations were implemented? None. You can imagine how this report was received by those whose living and social status were, and remain, dependent upon perpetuation of the drug and surgery centered system. The lobbyists from the medical and pharmaceutical industries put more resources into blocking these recommendations than could be competed with.

This is neither evidence that all medical doctors are unethical

Chapter 12

Creating a Working Model: The Innate Lifestyle™ Program

“Things may come to those who wait, but only things left by those who hustle.”

Abraham Lincoln

In the end I think a big part of creating the paradigm shift will be having a working model that provides incontrovertible evidence that lifestyle intervention is a pragmatic approach in daily clinical practice. As more and more evidence is published the debate can no longer be about whether or not lifestyle is the cause of chronic illness or that lifestyle change is the only logical solution. The only debate moving forward is whether or not patients will actually make such changes. This is the mantra of the drug companies, drug prescribing physicians, and surgeons who choose to do everything possible to resist change. They make ridiculous statements about patients being unwilling to change and claim that because of this continuing to prescribe drugs to palliate the symptoms of lifestyle caused chronic illness or continuing to perform heart bypass or gastric bypass surgeries are the only real practical clinical approaches.

This is ABSURD. First of all, they make these statements based on the fact that their patients, few if any of whom have ever been educated about the importance of lifestyle, few if any of whom have ever been empowered with the knowledge and skills regarding how to change, few if any of whom have ever been offered a program to help them change, and most if not all of whom have been prescribed medication, seem unwilling to change their lifestyle habits. Are you kidding me? Why would we ever consider that physicians with no training in wellness and prevention, little to no knowledge of the relationships between lifestyle and illness or lifestyle and wellness and prevention, no skill set or programs to

Are the wellness and prevention benefits associated with healthy lifestyle change seen if the lifestyle behavior changes are not sustained?

offer to empower patients to change, no compensation for spending time on lifestyle, and a belief system that wellness and prevention is useless or impossible, are good judges of whether or not lifestyle intervention is clinically practical? No more.

No more allowing experts in sickness and treatment to offer uneducated, biased opinions about wellness and prevention. This just has to stop, it is costing lives.

I, along with my team of two other doctors and a full-time computer programmer, have spent the last three years developing a working lifestyle intervention model. We have created the Eat Well – Move Well – Think Well™ Innate Lifestyle™ Program for clinicians to educate, inspire, coach, and empower patients regarding healthy lifestyle change. The program is a 12 month applied education program that includes monthly workshops on eating well, moving well, and thinking (and interacting) well. The program includes measurements and ratings of health and vitality, lifestyle allostatic load, and lifestyle wellness and prevention. There are biometric, physical function, and questionnaire data gathered from, and reported to, every participant at 0, 3, 6, 9, and 12 months. The participants each have on-line success journals where they both record, and receive positive feedback for, implementation of the lifestyle behaviors assigned at the workshops. We record all the data and we monitor participation for both the success journal and the workshops via email messages to both participants and practitioners.

This program is revolutionary for several reasons. First, it is a 12 month program that records actual lifestyle behavior change. The truth is that all the data on preventing chronic illness and saving money with lifestyle programs is only valid if the lifestyle changes are sustained. Putting patients through a short program of a few months and reporting the risk factor, physical function, or biometric improvements is misleading.

If the lifestyle behavior changes are not sustained these improvements are not translated into actual reductions in chronic illness, actual prevention of chronic illness, or actual cost savings. In fact, if you spend money on a lifestyle or wellness program that does not result in long term sustained change you have actually increased costs.

All you have done is spent money to get a short term improvement that has no long term effect. You have just added the cost of an ineffective wellness and prevention program to the costs of drugs and surgery. We created a program to elicit, measure, and track sustained lifestyle behavior change.

This also allows the program to be gradual. If you want change to be sustained it has to meet some very strict criteria. The change has to be meaningful to the person; this means you have to educate about why we get sick, how to get and stay well, and what choices represent genetically congruent eating, moving, and thinking. The change has to be easy, gradual, and comfortable; this means you have to implement easy, gradual, comfortable lifestyle changes that build confidence and momentum with repetition and practice (build healthy habits). The change has to be shown to increase desired outcomes and decrease undesired outcomes; this means that daily, positive feedback regarding the attainment of personal goals has to be included. If you want the program to be clinically practical it has to be easily delivered in a clinical setting. It has to be affordable for participants, represent an excellent return on investment for employers or insurance companies, and be ethically and fairly profitable for the practitioner. We have designed the Innate Lifestyle™ Program to meet all of these criteria.

We just launched the program last year and we now have over 40 centers.

We have centers in the United States, in Canada, in the United Kingdom, and in Australia. I am excited to announce that Life University in Atlanta has just chosen to include the Innate Lifestyle™ Program as an option for their chiropractic interns in their outpatient teaching clinic.

This represents the first practitioners in any healthcare field in

What is more likely to be sustained, easy, comfortable, gradual change, or difficult, uncomfortable, sudden change?

Chapter 13

Concluding Thoughts and Healthy Lifestyle Action Steps

"I have walked that long road to freedom. I have tried not to falter; I have made missteps along the way. But I have discovered the secret that after climbing a great hill, one only finds that there are many more hills to climb. I have taken a moment here to rest, to steal a view of the glorious vista that surrounds me, to look back on the distance I have come. But I can only rest for a moment, for with freedom come responsibilities, and I dare not linger, for my long walk is not ended."

Nelson Mandela

We have now answered the two most important questions facing our species. We have discovered that the reason humans are so sick with chronic illness, the reason humans are now the sickest species on the planet, is because we are making lifestyle choices, and creating and living in physical and social environments, that are genetically incongruent, that are chronically stressful. This chronic exposure to stressors causes the chronic genetic expression of alarm, stress, and adaptive physiology that is unsustainable and leads to fatigue, chronic illness, and early death. We are not sick due to pathological genes or pathological cell function, we are sick because we are living pathological lifestyles and living in pathological environments.

The research is unequivocal, chronic illness rates have increased exponentially over a few decades. This rapid increase in per capita chronic illness rates cannot be attributed to gene change as the human genome has remained virtually constant during this period. The rapid increase in per capita chronic illness rates cannot be attributed to aging because the rate of population aging is exponentially less than the rate of increase in chronic illness rates and, further, the most rapid rises in chronic illness rates are occurring among our children and middle aged populations. The rapid increase in per capita chronic illness rates cannot be attributed to increased diagnostic ability because the diagnostic tests for chronic illnesses like obesity and diabetes were available before the rapid per capita rises in these illnesses. Further, research shows that as

Have humans become the sickest species on earth because of bad genes, bad cells, bad luck, or bad lifestyle choices?

non-industrial citizens adopt our lifestyle patterns they also rapidly develop the same chronic illnesses. We are not sick because of bad genes, bad cells, or bad luck; we are sick because of bad lifestyle choices.

This knowledge has allowed us to accurately answer the other most important question facing our species. We have learned that, as chronic illness is a lifestyle caused problem, the only viable solution to the chronic illness pandemic is changing lifestyle habits toward what is genetically congruent for our species.

In order to get and stay well, humans, like every other species, must eat, move, think, and interact in ways that our genome requires to express health and vitality.

Inside our genes is an innately intelligent and extraordinarily reliable recipe or blueprint for health and vitality. If we supply the right ingredients for this recipe or the right raw materials for this blueprint, the natural, inevitable result is the expression of health. Virtually every human being has the genetic potential for a long, happy life, whether we reach this potential is a product of our lifestyle choices. Even the vast minority of humans that do have genetically caused health issues have significantly greater health, and significantly greater quality of life, if they choose healthy vs unhealthy lifestyle choices.

No drug or surgery will ever be the solution for illness caused by deficient and/or toxic nutrition, deficient exercise or toxic postures, deficient and/or toxic thoughts and social interactions, or environmental toxins.

Both basic physiological, biochemical, and genetic science, as well as historical data, indicate that using drugs and surgery to change physiology and biochemistry has not been, and will never be, successful at restoring health or ever be a viable solution for wellness and prevention.

The only possible way to solve the chronic illness pandemic and the unsustainable economic and social burdens it is causing is to decrease the number of people developing chronic illness and

to increase the number of people healing from chronic illness. In other words the only possible solution is fewer sick people or more healthy people. The only viable option for wellness and prevention is lifestyle change. Lifestyle intervention is the most evidence-based, most effective, and most cost-effective intervention.

This book has really been about answering WHY lifestyle is so important. I know that unless you know WHY changing your lifestyle is important you very likely will not make the effort to do so. If the reason for change or the reason for any particular choice does not matter to you then you just won't expend the effort and energy to do it. This is one of the great threats of the bad genes, bad cells, bad luck belief system. As I have mentioned repeatedly, if you don't believe lifestyle is the most significant factor determining why you are sick or whether you will get and stay well then lifestyle just won't matter to you.

I sincerely hope I have accomplished my goal of making lifestyle matter to you. My goal was to do just that. My goal was to make you understand and believe, beyond any reasonable doubt, that your lifestyle choices are the single most important factor determining your quality and quantity of life. I want you to understand that chronic illness is avoidable and that good health is attainable and that it is your responsibility to make the choices that determine your health destiny.

Now that you know WHY lifestyle choice is so important it is time to introduce information about WHAT lifestyle choices are required and HOW to empower yourself to make these choices. The book I am working on as you read this will contain great detail about what lifestyle choices are genetically congruent for the human species. The book will provide you with fascinating, in-depth and easily understood information regarding the eating, moving, thinking, and social interacting choices that you require to express your genetic potential for health and vitality. The book will also go into great detail about how to get yourself, and how to empower your loved ones, to make these choices – gradually, easily, comfortably, and sustainably.

Although I don't have the space for this detail in this book I do want to leave you with some information that you can immediately implement to improve your health and the health of your loved

What is the single greatest determinant of human quality and quantity of life?

