



Transcript: #363 Detox Suppositories vs Chelation Therapy with Spencer Feldman

Wendy Myers:

Hello, everyone. Welcome to the Myers Detox Podcast. My name is Wendy Myers of myersdetox.com. And on this show, we talk about everything related to heavy metal and chemical detoxification and issues that can arise, issues surrounding that topic as well. Today we have Spencer Feldman on the show to talk about using detox suppositories versus chelation, and we also talk about calcification of the tissues. A lot of people are dealing with calcification of their soft tissues. We talk about why that's happening and what you can do about it and how you can really regenerate your health, it's like an anti-aging detox to get rid of this calcium, and we'll also talk about why people have different issues with detoxification. They have detox symptoms, and why that is unnecessary and what you can do to stop that from happening or prevent that from happening.

Wendy Myers:

We'll talk about liver flushes and some of the pros and cons of that. We'll talk about coffee enemas and why some people don't feel good after coffee enemas, and we'll also talk about Spencer's line of suppositories and how they've solved a lot of these little issues that people have when they run into roadblocks with detoxification with their detox symptoms, and why this is happening, and how the suppositories can be used to circumvent any detox problems that people are having. And we'll also talk about voltage in the body, and why, when people have low voltage, they're aging... The antioxidants help to increase the voltage in the body, but why they fall short and why we actually need to focus on some of the different ways where we can add electrons to our body, and the result of that, how that raising that voltage in your cells helps your body to detox better, helps all the parasites want to leave your body and just a really interesting conversation today with Spencer, so tune in.

Wendy Myers:

I know some of you guys are really concerned about the level of heavy metals and toxins in your body, so I created a quiz that you can take at heavymetalsquiz.com that will help you to determine what your relative level of

toxins are in your body, your body burden of toxins, and then following, doing the quiz, and getting your results, you get a free video series that answers a lot of your frequently asked questions about detox. For instance, what kind of testing you should do, what kind of supplements are good to get started with, how long does it take to detox, and a lot of other questions are answered after you take the quiz at heavymetalsquiz.com.

Wendy Myers: Our guest today is Spencer Feldman. He is a multiple patent holding inventor with more than 20 years of experience formulating and manufacturing detoxification products for doctors and their patients. His trailblazing use of suppositories to deliver ingredients that would otherwise require intravenous IV therapy has changed the way many doctors do detoxification. The owner and formulator of the Remedylink brand of products, now in his 50s, lives with his partner completely off grid on his 100-acre farm where he spends his time tending his orchard and garden while continuing to design new products to help detoxify people in our ever-more-toxic world. You can learn more about Spencer Feldman and his amazing suppository supplement line for detox at remedylink.com.

Wendy Myers: Spencer, thank you so much for coming on the show.

Spencer Feldman: Thanks for having me, Wendy.

Wendy Myers: Why don't you tell us a little bit about yourself and how you became so focused and started your business around detoxification?

Spencer Feldman: Sure. I was in college, on track to become an emergency room surgeon, which is what I wanted to do. And somewhere, I think maybe in my junior year, there was I think maybe a measles outbreak or something, and so everybody dutifully lined up to get vaccinated, and I was among them. And I noticed, after the vaccine, I didn't correlate it with the vaccine, but afterwards, I couldn't eat soup because the soup would shake out of the spoon before I got the spoon to my mouth. I started getting really shaky, and I said, "There goes my ability to become a surgeon," because you can't do it with shaky hands.

Spencer Feldman: In retrospect with that... All right, so then I went to my doctor and I said, "Hey, look at my hands. They're shaking so badly. What is that?" And he goes, "Here's a drug." I'm like, "Okay, but I'm 19, I'm 20. Why are they shaking?" He goes, "It's not my job to educate you. I've got 10 more people to see. Take the drug." And I said, "Wow, okay."

Spencer Feldman: I started studying alternative medicine. I thought, I can't be a surgeon, maybe I can still be in the field in a support role. Years later, what I realized was, I had a reaction to the vaccination. Maybe I got from the bottom of the vial where there's more mercury or something. But I started studying alternative medicine, and at that time, 25 years ago, one of the things that caught my interest was chelation, which is using acids, basically, to bind to metals to make them soluble,

and at this point, let me tell you what I think detox is. That was really where I started going. I realized I was toxic, I had to get it out.

Spencer Feldman: If you have a toxin, and it's water soluble, then it comes out in the urine. But there are toxins that don't come out in the urine. These are ones that are either fat soluble or have crystallized, and so a detox is understanding how to get rid of these other two classes of toxins. Imagine a greasy dish. That's fat soluble, the fat and the grease of the dish has got toxins in it. It's chunky, it's disgusting. If you pour water over the dish or dunk it in the water, not much happens because the grease is not water soluble. But if you mix detergent in, the detergent reacts with the grease to make it water soluble, and now the grease washes clean. Detergent is the detox, is the soap for grease. We're looking for things that can be soaps for our various toxins.

Spencer Feldman: EDTA, which is the chelator I first got involved with, and chelator means to claw, to grab, is the soap for metals. And what it does is, there's lots of good metals and lots of bad metals in the body. Good metals would be things like calcium and zinc and copper and some types of chromium and potassium and magnesium. And they bind and form salts inside the body, so calcium bonds with phosphorus, and you get calcium and phosphate that makes the bones, and things will bind with sulfur and you've got connective tissue. The whole body is made out of all these different things. But the problem is, some of the metals, the toxic metals, they look like regular metals, and the body incorporates them in, and they can get jammed in the pumps inside the cells, and they can get stuck in things. They end up crystallizing, and some of the metals end up getting into the fatty tissue.

Spencer Feldman: Detox, at its most simplest, is understanding how to make soaps for the ones that are fat soluble, and how to dissolve the ones that are crystallized, because if dissolving a salt, like if you take a salt crystal and put it in water, it dissolves, it's now water soluble, and out it goes. A lot of people are filled up with crystals in their tissue, and they're filled up with toxic fats, and they don't know how to get them out. And the body has an ability to get fat soluble toxins out and crystallized salts, toxic salts out, but it's limited. And if it's in the fat, the body might think, well, it's in the fat, it's not the end of the world, I can leave it there, it's fine. But the brain's also fat, so that's not necessarily the optimum strategy.

Spencer Feldman: We have a native ability to detoxify. We have a native ability to break things down and make them soluble. But that native ability is really overwhelmed with the task that we are giving it in the 21st century, so for instance, if you were drinking water from a mountain stream or a well, there might be some arsenic in it, and your body has the capacity to get rid of that. But when your body's full of mercury fillings, that's way more than it was designed to be able to handle, and we have the ability to detoxify chemicals because the paleolithic hunter-gatherer, you're eating the occasional bad wild mushroom or you maybe get cut and bit, and there's an infection, and it's putting toxins into your body, or you eat a plant that hasn't been bred for the last 10,000 years to be sweet and

toxin free, and it's a little bitter and kind of medicinal. We have this ability to get rid of toxic chemicals too, but again, in the 21st century, where you work in an office that just got a new floor and formaldehyde's coming out, and you put on clothes that just came back from the dry cleaners, and there's 1,001 chemicals in your food that they don't have to tell you about. We just get overwhelmed.

Spencer Feldman: To me, detox is using the science that we have now in the 21st century to counter, it's like the white hats and the bad hats. The bad hats are putting all these toxins into the environment, and the white hats, the good guys, are saying, "Okay, this is how the body is designed. Let's work with it to try to get some of these chemicals out."

Wendy Myers: Yeah, I think people don't realize that there's 80 to 100,000 chemicals in our environment. There's more coming out every year, and it's laughable when you talk to medical doctors and they think, oh, detox, that's a scam. You don't need to detox, and without really thinking it through, that our bodies are dealing with so much more than it was designed to do. And then, given the fact that 80 million people or more have non-alcoholic fatty liver disease, those are the people with a diagnosis, and not to mention all of the other people that livers are under functioning. The liver's just one aspect of detox. Can you talk a little bit about that, and also how these toxins jam up all of our cellular machinery and affect our different organ systems negatively?

Spencer Feldman: Sure, but just to start off, the physicians and nurses are number one and number two in terms of the shortest lifespan by profession. It's more dangerous, you have a shorter life span as a doctor or nurse than as a veteran and going to war. And I think part of that is they have to take every vaccine that comes down the pike, and they don't believe in this. Not every doctor and nurse, a number of them don't. Yeah, I really respect physicians and nurses in the emergency room setting. I don't want to go to an alternative doctor with an herbal poultice with a gunshot wound or a broken bone or spurting artery. But I also think I don't want to go to the emergency room modality with a chronic disease. I have to understand who's good for what. It's a rare physician that really can work in both realms.

Spencer Feldman: I have an ultrasound device because I like to understand the body, and when I first got it, I would start looking inside people's bodies. It gives you x-ray vision. Oh my gosh, look how many people are walking around with plaque in their arteries and gallstones and kidney stones and fatty liver and cirrhosis, and there's just, on the one hand, I was sorry to see it. On the other hand, I was amazed at the capacity of the human body to withstand that degree of abuse and still keep functioning. And the other way, it's really quite hopeful. Our bodies are impeccably designed to handle incredible abuse and keep going, often without complaint. A lot of people won't get symptoms until they're way late stage, so I don't think it's a good idea to say, "Well, I'm not toxic because I don't feel bad." Well, your body is designed not to distract you with symptoms

until it's very late stage. And if you look inside, you'll see that lots of people who think that they're in pretty good health are walking around with lots of issues.

Spencer Feldman: Yeah, the liver is, I think somebody once said, in order to duplicate the liver would take five square blocks full of a thousand scientists working day and night to make all the chemicals it does for us. It's an amazing organ. Let's talk about the liver's role in detox. It's not a filter. A lot of people think that it's like a car filter and it mechanically catches things. What the liver does, actually, is it manufactures conjugates, and so let's back up a step and explain what happens. Detox, there's three phases to that, and thankfully, they're called phase one, phase two, and phase three for simplicity's sake. Phase one is where the body, in the liver, the tissue will upregulate the cytochrome P450 enzymes, whose job it is to take a toxin and give it a charge. And they do that by mostly oxidizing it, that's turning an electron off, but also sometimes reducing it, that's adding one on, or by unmasking. All these are fancy ways for saying they're making a toxin more reactive. That's the first stage, kind of prime it a little bit.

Spencer Feldman: Phase two is where the body then adds a conjugate to the toxin, depending on the toxin is the conjugate they add to that new charged section they've made. You're, I'm sure, familiar with glutathione, but the body can also use glucuron, glucuronic acid, methyl groups, sulfur, acetyl groups. There's lots of things that can get attached, and depending on whether it's detoxifying a pharmaceutical or solvent or a xenobiotic or an athelotoxin is what they're going to attach. That's phase two, and now this toxin has been rendered through phase one and phase two relatively water soluble. Great.

Spencer Feldman: Phase three, out it goes. Out the urine. Sometimes through the bile and out the feces. And one of the things, what's important is to understand do we need all three phases to work? Your viewers are probably familiar with something called a coffee enema, which was pioneered in World War I in a German field hospital. The nurse went to the doctor who wanted to prep an injured soldier for a surgery, and she said, "We have no more warm water to give them enemas to clean out their bowels before surgery, doctor. What do we do?" The doctor said, "Over there, use that coffee. That'll be fine."

Spencer Feldman: He washed out his bowels with coffee, and being the very observant people that the Germans are, they noticed that he healed with less pain and less complication, faster, and so the coffee enema was born, and Max Gerson of the Gerson Cancer Therapy promoted it quite heavily. What the coffee enema does is it stimulates phase one. It stimulates, among other things, the cytochrome P450 to make the toxin more reactive. Now there's something called a Herxheimer reaction, and one of the types of Herxheimer reactions, you would say, is the detox reaction. You give somebody something that stimulates phase one and they get worse. And the reason is because they're crashing on phase two or phase three. For instance, if you upregulate phase one and you start making all of these toxins that had been found, kind of settled in wherever they were in the tissue, will make them more reactive. They start to move around

and cause more problems. You might think that's a bad design, but it's fine if you have phase two, because the moment it becomes more reactive, boom, they put the conjugate on and it gets out the body.

Spencer Feldman: But if someone can't do phase two, they're stuck with this phase one, now more toxic material, and they feel terrible. And this is what happened to me. I don't know where I got my chemical sensitivity from years ago. It's gone now, but if I were driving behind a diesel truck and I breathed some of that in, I would get full of rage and really nauseous and a headache. I was a real mess for quite some time, and I had to wait, I would tell everybody around me, I would say, "Look, I'm going to be a complete jerk for the next hour. Don't talk to me, don't take anything personally. This just happens to me, I'm sorry, and I'll walk away, and if we're stuck in the car, I'm just going to be quiet for the best I can for now until this passes. Nothing I can do about it.

Spencer Feldman: Well, now I realize what was going on is my phase one was working. My phase two wasn't. And this is what happens to people who are toxic. If someone gets a very big toxic insult, whether it's chemical or metal, the body will run out, typically to phase two first. The phase one goes and the phase two crashes, and now, when they're exposed to a toxin, they make it worse internally. If you and I, let's say you and I and a third person were watching a movie, and the third person had chemical sensitivities in a movie theater, and someone sits next to her who's got a lot of cologne, all three of us are hitting phase one, knocking out that cologne, but she doesn't go to phase two and she gets sick from it.

Spencer Feldman: Or sometimes it's a phase three crash, where they can get it soluble, the body can make the soaps. Phase one to phase two is a two part soap process. They can do those, but then the kidneys aren't working really well or the gallbladder is stopping, and now they just sit around longer than it should, and these are the people that detox. They do the detox. It doesn't knock them out, but they just feel really blah for quite some time. And I called this one of the types of detox traps people can fall in, so someone takes a product that wasn't designed properly, either it stimulates phase one but not phase two, or not phase three, and they end up activating the toxins that are in them, but they can't finish it, and it makes it worse, and they talk to the manufacturer and the doctor. And they say, "Oh, that's great. You're detoxing. That's a detox sign." No, you're not. That's a detox trap. You think you're detoxing, but it's getting worse. If you are detoxing, you should be feeling better.

Spencer Feldman: Very rarely, and this is for people with enormous toxic loads, no matter how much support you give them, they still don't feel good. Yes, you will still get some people that no matter how well you detox them, they're still not going to enjoy them. The process is still uncomfortable. But that's pretty rare. That's like industrial explosion.

Spencer Feldman: Let's talk about the detox traps. The first one, as I would call it, is an incomplete detox, and it's not incomplete in the sense that, oh well, I'll get to it later.

Remember, phase one, if it crashes between phase one and phase three, that person's actually become more sick, more toxic, because it's made the toxin more reactive, more polar. There's another one. Let's say someone does a chlorella or a zeolite that isn't clean. Someone grabs zeolite, some cheap zeolite that wasn't acid washed and it's full of metals, or chlorella grown off of the coast of China and it's got Fukushima junk in it. And they take the chlorella and zeolite, and then they send their urine off to a lab, and they're like, "Wow, look at all these metals you're dumping." No, those are metals you're absorbing from what you think you're detoxing. There's another trap.

Spencer Feldman: And then what happens in these two traps is, the client will say, "Well, I'd better do more." And they get sicker, and then they think, oh my God, I'm dumping. I'd better stay with it. And they just loop and loop and loop, and they don't understand why they're spending all of this money and all of this time getting sicker and sicker and sicker, but philosophically, they think, well, it makes sense. I must be detoxing. Those are two traps that I wanted to pose to your viewers not to get caught in.

Spencer Feldman: The way out of it is whatever you're using should be clean, so what you're testing for, you know that's what's coming out of you. And you should make sure that you're doing all three detox phases at the same time. The way that I would explain phase three is, imagine you've inherited an old house, and no one's been in there for 40 years. And you open it up and just there's dust everywhere, so you grab a broom. The first thing you do is not start to sweep. If you were to start to sweep in there, you would be sending dust everywhere and breathing it in and not feeling good. The first thing you do is you open up all the windows and all the doors. Okay, now you can start to sweep, and you're sweeping mindfully. And this is what it's like if someone doesn't have phase three opened up to them. Phase three is like the doors and the windows. You go in with phase one and phase two, and you start moving all the toxins around, but there's nowhere for them to leave, or you've left one tiny crack of a window open, and they've all got to go out that crack, these are the people that are also not going to be very happy.

Spencer Feldman: The way in which we solved these three detox issues was, we have the Medicardium, that's the EDTA, that's with metals. And I made that thinking people wanted EDTA to remove calcium, because as we get older, we calcify. We get calcium in the brain and the prostate, the breasts and the muscles. All over the place. But the practitioners were telling me, "No, we're doing it with the metals," so I said, "Wow, you're using it for detox. What else can I make?" And then I started getting into the chemical detox. The next product that we came out with was Xenoplex, and what it is is organic coffee, which is phase one, and then all the conjugates I could find, which was glucuronic acid, glutathione, methyl groups, sulfur, acetyl groups. Everything that the body could possibly use to bind to a toxin so that you wouldn't phase two crash, and so we made that as a suppository. Now, you can do a coffee enema if you don't want to do a

suppository, but you cannot take glutathione orally. You can take all the other ones orally.

Spencer Feldman: The challenge is, some things don't survive digestion. When you're getting an IV from a doctor's office, the doctor doesn't want to do an IV on you. It's invasive, there's always a risk of infection, it's uncomfortable for you. The reason an IV is given is either because you have to get it in very quickly, like maybe you have to rehydrate, replace fluids or something, or because it won't survive digestion, and glutathione is one of them. Glutathione is the master detoxifier. It's the master of phase two cadence, if you have to pick one conjugator, you pick that one. But it'll get broken down into its three amino acids and then very little of it will recombine, so when you go with a suppository, which is what we make, you bypass digestion and it goes right into the liver and then most it goes to the liver. Some of it goes to the sexual organs and some of the lower abdominal organs.

Spencer Feldman: In Xeneplex, we have the coffee for stimulating phase one, and then all the conjugators for phase two at the exact same time, so we don't give somebody that phase one, phase two crash. As I'm continuing to study about detox, I'm giving the Xeneplex to people and my chemical sensitivity is fine for the first time. I said, "Wow. I don't like breathing in diesel fumes, I don't think it's good for me, and maybe I feel a little funny afterwards, but I don't have those reactions anymore." But then every once in a while, I would get someone who would still have them. Like, okay, it's not phase one, it's not phase two, so then I learned about phase three. I'm like, okay. Their kidneys and liver aren't flushing properly. It's like the windows in the old house haven't been raised. And if you look historically, the two things that are done for that are liver-gallbladder flushes and kidney flushes. And the way people typically do a liver-gallbladder flush is they'll take Epsom salts, olive oil, and lemon juice, and the olive oil will stimulate the release of bile, and the Epsom salt dilate the sphincter of Oddi, which is the little sphincter that holds the gallbladder closed, and they'll try to flush all of the stones out.

Spencer Feldman: And one of the things that you hear people saying is, "Wow, every time I do one of these liver-gallbladder flushes, I get more stones out." And then, if you actually look at the stones that are coming out of people, and you squeeze them, they're not stones. Yes, you can flush stones out with that, and it's a great idea in some cases, but it's another one of the traps, because what happens is, the olive oil you're taking in that amount actually can form little grease balls mixed with bile that you can think are gallstones, so then you have people who will do a gallbladder flush and get out what they think are stones. And then they say, "Oh, I'll maybe do it," and then they read the literature and it says, "Keep doing it until no more stones come out." But every time you take it, you're making new little fat balls, so they take it and do it again, and more little things come out, and more little things and more little things, and if you were to ultrasound these people, you'd find they don't necessarily all have gallstones.

Spencer Feldman: The other issue with the gallbladder flush, the old school one, is the body recycles bile. It's very valuable, and the downside of recycling bile is you also recycle hormones and certain drugs and chemicals. There is an enteropathic recirculation system which sometimes can backfire on us. But when you do the liver-gallbladder flush, you're forcing all the bile out, and now it's like doing an oil flush in your car and not putting oil back in. That's going to cause... Yes, it's great you got the old oil out, but you have to put more oil back in. The classic liver-gallbladder flush, you can do it once or twice, but for the people that get caught in that trap where they keep doing it because they think they're still getting stones out, they drain their liver dry of bile, and now, without enough bile, now they do get stones, because now it's completely dried up and everything's very sludgy. That's like another trap.

Spencer Feldman: What we did is we made a suppository for liver-gallbladder flush, kidney flush. Now, you can definitely do this without suppository. The ingredients that are in... There's two reasons to take the suppository. One is the ingredients will be destroyed by digestion, and the other is the location. Now, unlike the Xenoplex, which is a phase one, phase two of Medicardium, which is for metals, the things that would help the gallstones and kidney stones, you can take them orally just fine. There's all sorts of teas, Shaka, Theadra, Break Stone. There's lots of things you can take orally, acid, that'll survive just fine. However, the portal into the liver is right there, an inch in the rectum, so location is fantastic for access to the liver.

Spencer Feldman: When we make vitamin suppositories, and the person takes it, the ingredients in the suppository go straight to the liver, first pass. Goes right in. And the idea is not to have a very dramatic expulsion of stones, although we have seen that happen, but more to slowly melt them out, because when you have a very dramatic expulsion of stones, sometimes they can backfire up into the pancreatic duct when you're doing it with the gallbladder flushes. I'm told the only thing more painful than a kidney stone is a gallbladder stone, and I had kidney stones once, before I knew what I was doing, and I would never want that again. I can't even imagine what a gallstone would feel like.

Spencer Feldman: Be a little cautious with liver-gallbladder flushes. What I would say is, if you want to do that, soften the stones for a good week or two first to make sure that everything is ready and primed, and then pop it all out, and then do a lot of glycine and taurine orally to rebuild your bile. That's my advice, that's my suggestion to people who want to do that, who, for whatever reason, don't have access to our suppositories. The other is, there's a fad with low fat diets, and of course, if you don't eat fat, aside from the fact every cell membrane in the body, all the hormones and the brain's made out of fat. What happens is, there's no stimulus for the bile to secrete, so a person can get jammed up. And also, chlorine. Someone who's in a heavily chlorinated area, maybe they are swimmers in a pool or the water they bathe in is highly chlorinated, that can precipitate gallstones because it robs the body of the amino acids taurine and glycine, which are used to make bile.

Spencer Feldman: Our phase three solution, for opening the windows, per se, for getting the kidneys and gallbladder to open up so that all the things that we've made soluble with Medicardium, in terms of metals and the chemicals, in terms of the Xenoplex, have a straight shot out, and so that's like our three main detox products. We've gone on to make 15 different products, but those are our three classic ones.

Wendy Myers: Yeah, I love your suppositories that you created, and I agree with you, so many people have issues with digestion that even if they're taking supplements, they need to detox. Many times they're not absorbing them because of the things that you mentioned and people just have stress and poor absorption ability, and so I think it's very important that you can take a lot of different types of supplements and insert them rectally by a suppository and bypass that whole digestive mechanism, and bypass expensive chelation sessions at the physician's office, which end up, can be harmful to the kidneys. IV chelation can be very harmful to the kidneys, and it's very expensive and time consuming. Can you talk a little bit about that, about using suppositories versus IV chelation? Maybe any research, as far as suppository use?

Spencer Feldman: That's a great point. When people do the IVs, one of the reasons they're having kidney problems is they're doing it too fast. Chelation is better done, there's a certain speed to do it at. And if you go too quickly, yeah, the kidneys can get **hurt**. And an IV session's typically done over two hours, whereas our suppositories, if you think like five of our suppositories are about the equivalent of one IV, so we're splitting up, it takes an hour or two for it to fully make its way into your system. You can see now that we're doing in 10 hours what they do in two, and some people would say, well, you're taking longer. And I'm like, yes, we are.

Spencer Feldman: When we were doing our initial proof of safety and efficacy tests with blood work, one of the parameters I checked was BUN creatinine. I checked a lot of parameters, and every parameter I checked before and after magnesium or potassium EDTA was significantly improved, improved to the point where, when I shared these studies, the people didn't believe them. The BUN creatinine was tremendously improved, and kidneys are a very slow organ to heal, and typically if someone goes on dialysis, they don't get off until they're dead. It's not typically a thing someone recovers from. You can use CoQ10, it's certainly helpful, but chelation that's calcium free anyway is the only thing I've ever seen that really has the effect that I'm looking for, in terms of the kidneys. And I think part of it is because the kidneys are literally a filter, unlike the liver, which is making conjugates. The kidneys are actually mechanically working. And like any pump, if the pump gets calcified, it's not going to work properly. The kidneys are working against a gradient pulling minerals out of the blood and pumping and pumping and pumping, and then they get jammed full of minerals, and you can look at the tissue under ultrasound and you can see, does it have the right density, or is this trying to turn to stone? As people age, they lose kidney function because it's fully getting jammed up.

Spencer Feldman: The studies I've seen with suppository range from 70-75 percent up to 90 percent as good as an IV. I believe if they were to wait long enough, I think the difference in how much gets absorbed is how long they're waiting to see how much comes out. And I think that it's not only safer but more efficient to be slower and more gradual, and I think the fact that smaller doses by suppository seem to universally improve kidney function, whereas higher doses by IV, you have to be very careful not to hurt someone's kidneys. There's an indication that's a better way to go.

Spencer Feldman: There was a study in Switzerland where they showed that IV chelation decreased mortality of heart attacks and cancer by 86 to 90 percent. I don't remember which one was which, but it's about the same. Chelation is not just taking out the metals, but taking out the calcium. It's a phenomenal thing to do for the body. If you were to take a look at any animal and look at cross sections of its tissue as it ages, you'll see an exponential increase in the amount of calcium, so all animals become statues. They turn to stone as they age, and if you want to stretch that out, and the book "The Calcium Bomb" is a great way to learn more about this, having some kind of solution that can pull calcium out is a great idea. The study they did in rhesus monkeys, especially the little pictures of the seven and 10 degrees is, again, you saw that every day they lived, the calcium level went up and up and up, unless they raised them in some kind of chelating bath, some kind of acid bath, whether it was citric acid or EDTA, whatever acid they used.

Spencer Feldman: I know a lot of people think an alkaline diet is great, but that's not to say we don't also need acids. You need stomach acid to digest, and we need acids on our skin to protect us. And there's a lot of acids, so for instance, when a person exercises, they're making lactic acid. When they eat an apple, it's malic acid when you have apple cider vinegar. There's all these acids they can get, and the acids have this decalcifying ability to them. Historically, drinking some kind of vinegar for health has been done for thousands of years, and when you take the grapes, you make the wine, you let it sit too long, you've got vinegar, and you put it in your salad, it's a dressing. And people have been drinking apple cider vinegar for dozens of years, what they're doing is they're chelating, so what EDTA is just a smarter vinegar. We're saying, "Okay, vinegar's working by nature of the fact that's acid binding to this positive metal, this basic alkaline metal, and escorting it out. What can we make in a lab that's even stronger and better, considering just how many metals we have in us?" And some of them are more or less reactive, so EDTA has a negative four charge, that's why it's so good at grabbing onto things, because it's just that, and it's got that much of a pull that it can just grab on to all sorts of stuff.

Spencer Feldman: If you can do EDTA, fantastic. If not, take your shot glass of apple cider vinegar and mix it in a glass of water every morning and go for a little bit of a jog and build up some lactic acid. The acids are the way the body gets rid of the toxic alkaline metals.

Wendy Myers: Yeah. It's such an interesting concept to think of calcium that's technically a mineral can actually be something that can do a toxic metal. And I see lots and lots of clients that have low to extremely high calcium levels on various testing, and we know that's a big problem, especially a lot of people just taking vitamin D and megadosing vitamin D, this is a hormone that increases calcium absorption from your gut. And then we have lots of garbage calcium supplements on the market that are not a very good highly absorbable form, and lots of menopausal women are taking that to improve bone health, and then people are drinking dairy for calcium. Can we talk a little about that? Calcium's nutritional necessity versus maybe menopausal women that are concerned about increasing their bone density and how that plays into the whole detox conversation we're having?

Spencer Feldman: Right, so you have the osteoblasts and the osteoclasts constantly in the process of breaking down and rebuilding bone. And then there's all the hormones and the vitamin K and vitamin D. All of these things, it's a very complex mechanism, and like all complex mechanisms, it fails over time. What happens is, when we're young, our calcium is in our teeth, bones, and very little else. And as we get older, it gets in the kidney as kidney stones, because the muscles, there's fibromyalgia, it gets in the brain as brain, it gets in the prostate as prostate stones, the gallbladder as gallstones. It gets in the arteries, arteriosclerosis, the breasts as breast calcifications. It gets everywhere. There's no wart and tissue that it does not calcify as we age. And we have lots of names for all these diseases, but really, they're all the same thing. They're just calcium.

Spencer Feldman: We do make something more phosphor citrate in the body that's supposed to deal with this, but it goes down with age, and I have yet to find a source for this in a supplement or I would be taking it. Consider that from a standpoint of evolution, once we're about 40, we are expendable. You're 20 or 15, from an evolutionary standpoint, have a kid. You're 30, your kid has had a kid and you get to watch that kid for a little while so your kid can go out and hunt the mastodon, and by the time you're 40, you are now expendable and your kid becomes, and it moves forward like that. The human body certainly can make it out to, as we've seen, well past 100 years. But somewhere at around 40, your genes are like, all right, free time is over, and now we can survive, but if you want really good health, you have to work for it. It's not a freebie. And calcium deposition is one of those things, it starts leaving the bones and the teeth and moving into the soft tissue, and your muscles are getting tight and less flexible as you used to be, and cataracts, and all these things start to happen. This is just the body saying, "Okay, this was how much time I was designed for, and anything after this, I've got to work at."

Spencer Feldman: The calcium was a big surprise for me to realize, wow, this is acting like a toxic metal. Not by virtue of what it is, but by virtue of where it goes. The EDTA that I patented is calcium free. We're the only people out there that have a calcium free EDTA, as far as I know. And what we did is we bound a bind that we attached magnesium and potassium to the EDTA, and magnesium-potassium

have a very tenuous hold on EDTA. They're barely holding it, which is what you want. When that gets in the body, it finds something that the EDTA will bump into something that has a greater affinity for. The first thing it's going to bump into is calcium, so it grabs the calcium and releases the magnesium-potassium. Now you've got magnesium-potassium in the body, which is good for you. Lots of people are deficient, and you've got the EDTA, which is now calcium EDTA, floating around. And it floats around, and because the calcium has been removed, the blood calcium goes down. You've pulled it out of that, maybe pulled some out of the tissue, the body goes, oh, there's not a lot of calcium. I'd better take whatever I have and store it for famine. I'm in a calcium famine for whatever reason. If I see some, I'd better stick it away.

Spencer Feldman: And now the calcium EDTA is floating around, and it bumps into a bottle. There's some lead. Lets go of the calcium for something it has a greater affinity for, grabs on to the lead. Now there's the calcium, and the body's like, oh good, I really want that, because you just took it away from it. Let me go stick that someplace like some bone. It's that give and take where you pull it and then you get it back that helps trigger the body to put it into deep storage, and so that's why, if done in the right way, you can actually build bone with chelation if you know what you're doing. And knowing what you're doing means you pull the calcium out, 12 hours later, you actually give someone a little bit of calcium. And right, it's important what you find. I usually go with calcium like gluconate, just because it's inexpensive and well absorbed. Carbonates are not well absorbed. That's basically ground seashells. That's not a way to go. You can actually go to the more sophisticated glycinate if you like and have access to them. But I think gluconate works fine.

Spencer Feldman: Now, through that give and take, you can actually trigger the body, especially if you're doing some exercise and getting some sunshine, to put the calcium back where you want it to go. Now inevitably, very few people live past 120, and arguably some of the people that say they have, it turns out it was the daughters who faked the birth certificates or something. Eventually we are all going to turn to stone. The body will not last forever. But from the studies we've seen with animals, you can massively push that curve out. With the rotifers that were chelated regularly, what they looked like at their version of 80 was more like 40. You can get to the point, you should be able to, with proper chelation, get the calcium so that that's not what gets you in the end. You've got that problem dealt with, something else.

Spencer Feldman: Now the next thing might be, okay, how's the pancreas doing? How are the lungs doing? How are the kidneys doing? Each decade has its own risk factor in terms of what organ system tends to fail when. If you understand that, you can, as you're going through your life, monitoring, and saying, okay, I'm in my 50, I'm going to start thinking about heart attacks and cancer. Hey, I'm in my 70s, I need to start looking at the kidney function and lungs. Wow, I just hit 100. Congratulations. I really need to be mindful about how I'm protecting the neurons of my brain.

Wendy Myers: Yeah, that's fantastic, because I think people always want to go in and rip out the metals, get rid of the mercury and the lead and the other metals, and they're not thinking about calcium, and there's lots of people taking supplements, and they're taking forms of minerals that are not very absorbable, and can even be problematic. There's a lot of cheap supplements out there people buy based on price, typically, not looking at the forms that they're taking. You really want to be paying attention to that.

Wendy Myers: You have this great line of suppositories for detoxification, so someone goes on your website, where should they get started? What is a recommended protocol, where to begin?

Spencer Feldman: Well, if you go to Remedylink, there's a video page there. It's mostly geared, it's not there trying to sell you anything, it's just there to share things that I have come to believe about how the human body works. Places where our healing crashes and how to restart the process. Medicardium, Xenoplex, and Glytamins, metals, phase one, two, and three are classic detox protocols. There's one other thing about the calcium I wanted to talk about. Back in the Depression, there wasn't a lot of nutritious food available, so they made a media presentation to convince people to eat foods they didn't normally eat, and that's how Popeye the Sailor came about. Like, oh, he eats spinach, because people didn't really eat spinach, and spinach is very nutritious, but spinach is extremely high in oxalates, and a lot of the food... Oxalates are chemicals that plants use to transport minerals and to build their structure. And as we have become a more vegetarian society and gotten into what we think are superfoods, our level of oxalates has gone up tremendously. Sometimes kale is enormously high. Chia seeds, a lot of things that people think are really healthy for them are loaded with these oxalate crystals, and what happens is, oxalate, when it combines with calcium, for people that aren't absorbing it properly, forms calcium oxalate, and these very sharp crystals form kidney stones. They form all sorts of problems.

Spencer Feldman: I'm not sure if we have time to get into it in this topic, but another type of detox is actually an oxalate detox, where you pull the oxalates out of someone's tissue, and you do that properly, you'll see in the urine, the urine starts looking very cloudy. And you do it too fast, it'll actually get a little bit red, because the oxalates will cut the kidneys on the way out, little micro cuts that can bleed a little bit. Obviously you want to do it slow enough that you don't hurt anybody. But that's something that's just now starting to make the rounds in the alternative medical community is the consequences of all of the oxalates that we're getting in foods that we thought were really good for us and really healthy, and as these crystals form, they just do havoc.

Spencer Feldman: The other thing I wanted to really mention is, the body has... There are a lot of good salts in the body, good salts meaning metals combined with acids, so for instance, sodium phosphate is required for pH balancing. Calcium sulfate is connective tissue, and potassium sulfate is oxygen transport. But we can also make these crystals out of toxic metals, so you can get lead sulfate and mercury

phosphate, and so again, one aspect of detox that isn't talked about a lot is how these toxins can form crystals in the body, and once they form crystals, they're very difficult to dissolve.

Spencer Feldman: There's a point in the size of the crystal where, once it gets past a certain size, it becomes relatively insoluble. There's a way which we discovered where you can use electricity to help make them become more soluble. The basic detox would be something like Medicardium, Xenoplex, and Glytamins, and that's supporting the body and dealing with the metals and the chemicals, and then escorting them out, understanding what kind of soaps the body needs for the modern toxins. People want to really continue down that path, and say, "Hey, just how healthy can I get?" And then we're looking at things like, what's the role of electrons in detox? How do we detoxify scar tissue, and why would we consider that a toxin?

Spencer Feldman: If you would say a toxin is something that is in the body and is causing problems, and the body can't dissolve it, that's how we define a toxin. Scar tissue can be a toxin, right? If a woman has got an abdomen full of scar tissue, and it's pulling and yanking all her organs out of place, you could call that toxic. If someone's got calcium deposits in their joints, that's kind of toxic. There are all sorts of things in the body that accumulate due to toxicity and age and infection. For instance, if someone has a bile film infection they can't get rid of some surface of the tissue somewhere, and that bacteria, fungal, parasitic, viral community is generating toxins and immunosuppressants, some of the most toxic people in the world are toxic from infection. They have a chronic infection in their tooth, for instance. And someone has a root canal done, but they don't get the ligaments out, and they start to rot and now they have gangrene and they have a bacteria that's living on the ligament, and then that's dumping down into the tissue and crawling up the nerve endings into the brain.

Spencer Feldman: Beginning detox is, of course, metals and chemicals, and then the structural things like the gallstones and kidney stones and sludge. But then we move on to things like aflatoxins and structural scar tissue and crystallizations of various types, and I think the detox model also works for those as well.

Wendy Myers: Can we talk a little bit more about the crystallization of the oxalates and other metals? You have a device that helps run electricity through the body, and is it the same vein of a mechanism of ionic foot baths?

Spencer Feldman: Sort of. There are a lot of great electrical devices out there, but by default, electrical devices all pull electrons away from you. Okay, so you know about those giant power lines that people can live under. Those giant power lines, the scientists will say, "Look, the field on here is so far away it's not bothering them. And there's cows living underneath them, and they're not getting sick, so you're all crazy." Okay. When you run electricity through a wire, the physics of it is that it pulls electrons out of the environment like a vacuum cleaner. If you were to measure the electron density of the air around any electrical device that's on,

you'll see it goes positive. When you run high power through those giant wires overhead, that whole area is a giant vacuum cleaner of electrons. But the animals don't get sick because they have their hooves or bare paws on the ground. What happens is, all the electricity that's getting pulled out of the air and out of them is being replenished from the Earth to them. But a human being or a school child wearing rubber shoes, or living in a house, they don't have their feet on the ground, and so they're living in a negative electron vacuum, and they're positively charged.

Spencer Feldman: And we know that there's a study that said that if you remove... They took rats, and they gave them all tumors, and the rats or mice that they removed the electrons from, they had them in an environment where everywhere they walked, a carpet brushed against the back of their fur, the tumors grew 30 percent faster. I called the people who did that study and I said, "Have you tried this study where, instead of removing their electrons, you gave them electrons?" They're like, "Oh, it's a great idea." I'm like, "Let's do it." They're like, "Sure, \$50,000."

Spencer Feldman: There's a lot of people getting involved in grounding, and so I read the books on grounding and I said, "Wow, this is amazing stuff," and I tried it, and I didn't really notice that much. It was very subtle. I said, "Maybe the reason is I'm not getting enough electrons, so I built a machine that would pump electrons out of the Earth and push them into me. Now, all of these other devices like the violet ray and the ion bath, all these other things, can have amazing results and they're all stripping you of electrons because by virtue of current, anytime you move electricity through a wire, you're stripping electrons from the environment. And what we do is we don't work with current, we work with voltage. We're not moving electrons, we're pushing, how do I say this? It's like there's almost, when our machine is running, there's basically almost zero current. We're not stripping electrons, we're donating them in. And we evolved, we have our belief, or were designed to be in an electron rich environment. We were designed or evolved always with our feet on the ground or in the water or in the ocean, so every cell in our body is used to and expects all the electrons it could possibly want, any time it wants at all. As much as it wants, whenever it wants.

Spencer Feldman: But because we wear insulated shoes and synthetic clothing that strips it from us, and we're around electronics, even this cord coming up my ear is stripping electrons out of me. We are electron deficient. Now, people, one of the biggest sellers in the supplement industry is antioxidants, and antioxidants, their job is to move electrons. Now, let's say there's a city starving, and you send in 1,000 trucks, each with one loaf of bread. Well, that's not really going to be successful. The loaf of bread is the electron and the truck is the antioxidant. Once that electron is given up, once that loaf of bread is handed out, what uses the truck? But if you had half as many trucks, but an enormous pile of bread right on the outside of the city, and it could keep shuttling back and forth, you're good to go.

- Spencer Feldman:** We don't need more antioxidants. We need more electrons, because each antioxidant can move an electron a million to a billion times a second, so you need a fraction of the amount of antioxidants you think you do if you have enough electrons for the ones you have to feed them, and for them to keep recycling and moving. They're the trucks moving the bread.
- Spencer Feldman:** I built this machine to put electricity into the body, specifically electrons. And first I went out to see if anyone else had done it, and one company said they had. And I bought it and I measured it, and I'm like, "No, you're not giving electrons, you're taking it. Look at the meter. This is an RF unit. You're just doing RF heating." They're like, "Oh, sorry." If you were really sorry, change your advertising. Anyway, we went through a couple of engineering firms, and I found one I liked, and I started using it, and it was like, has a very strange feeling. I'm not going to say I was addicted to it, but you could not get me off this machine for weeks. Every moment I had, I would use it. And my partner was like, "You're going to hurt yourself." I'm like, "Maybe, but that's my job. I've got to find out," and so I took it, used it for six hours at a time at 35,000 volts. And at 35,000 volts, my teeth got a little uncomfortable, I felt something in the hip and dialed it down, down around 18, 20,000 volts. I'm like, okay, that feels good.
- Spencer Feldman:** And after two weeks, I finally was like, it was like giving water to someone who'd just been through the desert. I finally was like, okay, I think I can walk away from the machine for a little while. And that evening, I was going to bed, and as usual, I was going to put my wool socks on because I had always had cold feet. I ate too much fruit as a kid thinking it was healthy, and I ended up with peripheral neuropathy. I'm going and I'm reaching for the wool socks, and I'm like, I don't think I need them. But I keep them by the bed because I figure I'm going to wake up at three in the morning with freezing ice cube feet, and I sleep through the night, and my feet are hot. They're warm. And it was the craziest thing. And the next few nights, I'm like, my feet, they're hot because my body's recalibrating, and I haven't worn socks to bed now for a year and a half. And what I started realizing was that peripheral neuropathy was going away, and if you've never had it, it's like pins and needles in your feet, and it's uncomfortable, and you can't let your feet touch, it's painful because the nerves are all damaged.
- Spencer Feldman:** And then I'm looking in the mirror, and I'm feeling this little dry spot on my nose. And I'm looking like, what is that? And it was like a tiny little scab, and I'm pressing on it and looking at it, and the little thing pops out, which is a little hole in my nose. I'm like, okay. And then another scab forms. I'm like, there it is again. And another bit comes off, and then it heals up. And I'm like, what the heck was that? And then I remembered, there was always a little red dot on my nose, which is like a precancerous cell, like excess vascularization. It had been there for 30 years. I'm so used to looking at it and didn't think about it. It fell out. It died and fell out, and then the hole filled in.
- Spencer Feldman:** Now, most of us, when they do autopsies on the average, healthy 30 year old, they find out that most people have microtumors. You get somebody who's 30

years old and dies in a car crash, they're in good shape otherwise, just in the wrong place at the wrong time. And they'll find the average woman has two or three microtumors in her breasts, the average guy has one or two in his prostate, some in the lung. People are always walking around with these little microtumors. And in healthy people, the surveillance system of the body holds them at bay, but at some point, for any reason, it breaks out, then that's cancer. And I think that the little spot on my nose was basically one of my, was a visible microtumor, and I thought, wow, it knocked that one out that I could see. I wonder if it knocked out a bunch that I couldn't see?

Spencer Feldman: Now I'm experimenting with this stuff. I have a couple of them made, and I got one from an old friend who was going through a hard time, and two weeks into her using it, she starts sending me pictures of things coming out in the toilet. And I'm looking and I'm like, "Those are liver flukes." And she's getting cups of ones out, and the liver flukes were pretty nasty, and I'm like, electricity worms, so I did an internet search. I'm interested in worms. And what shows up on YouTube are videos of country folk who will go to the riverbank with a car battery and two little probes and will stick the probes into the riverbank, and then to the battery, and worms will crawl out of the soil. They grab the worms and they go fishing. And turns out worms don't like electricity. I think that's what's going on.

Spencer Feldman: And I suggested it to a few other people, and they're like, "Can't we just kill the worms?" And I'm like, "Well, here's the deal. If you try to kill the worm, one of a couple things will happen. You'll kill it and the body will expel it, great. You'll kill it and it will die in place and never leave, like if it's in the liver or something. Now your body's going to have to insist the thing, and when it breaks down inside the worm was the bacteria, and inside the bacteria was the virus, inside of all that was all the toxic junk it was eating. And then the third one is, you just piss it off. You're irritated and it digs deeper into the body.

Spencer Feldman: Really, the best option for parasites is to make them want to leave intact of their own volition, and that was what was happening, and it's happened now for quite a few people where it's just, they all just, out they go. Most parasites are invisible to the naked eye, but we did have, and I've got pictures after pictures of worms coming out that are wriggling in the toilet that are just leaving the area. And the way I try to reason cancer, worms, electricity, and one of the things about cancer is, if you take a healthy cell and lower its voltage, it becomes cancerous. And if you take a cancer cell and raise its voltage, it stops dividing. We know that sickness is associated with lower voltage. Now, worms and that whole class of compostors, you find them in the compost pile. That's their job in nature is to find the dead and decaying diseased matter and eat it and turn it into good soil. If we didn't have worms, our crops would be in a bad way.

Spencer Feldman: They're not bad, so I thought, okay, if our client has worms in them, why would they stay in the body? Why wouldn't they just say, this isn't a place to live? And the only thing I can think is the voltage is too low. The worm is saying, "This

seems like a compost pile, and I know it's a compost pile because the voltage is so low, and the only place I find low voltage is in dead and dying matter." The voltage is so low because we live in an environment where we walk around with rubber soled shoes and synthetic clothing that pulls electrons off of us, and we're around electronics. It's constantly draining out our electrons, and we are also constantly eating worm eggs. We're constantly eating bacteria, we're constantly eating fungus. There's no way not to get these things. We can't live in a bubble unless you only eat pressure canned food.

Spencer Feldman: These things get in and then they say, "Oh, low voltage. All right. Time to get to work." And then when the voltage, if you can give the electrons to someone with our machine or some similar matter, then the voltage goes up, they're like, "Oh, this isn't a compost pile. What am I doing here? I don't like this place at all. Let's get out." And they wiggle their way out, and you flush them down the toilet, and there you go.

Wendy Myers: And then also, EMFs will lower or cause you to have a more positive charge as well, and adding insult to injury to our already low voltage body, but let's talk about, what is the name of the machine that you developed, and can people buy it?

Spencer Feldman: Sure. The machine was something that's gone through a couple of evolutions and we still make them in small batches. And it's designed to pump, I think it goes to 18,000 volts of electrons into the body, and the way I would explain it is, okay, so let's say you have an RV, and you want to take it out in the summer. And when fall comes around and you're done, you put a trickle charger on the battery, and what that does is it just gives a little bit of electricity continually to keep the battery charged. And as long as the battery was charged when you put the trickle charger on, the battery is fine. But if the battery is dead, you can't use a trickle charger because it can't charge that.

Spencer Feldman: Then you need to, if there's a dead battery, you have to charge the battery with a battery charger. But if the battery's been dead for a while, then you need a very special kind of battery charger, one that does high voltage spikes, because what happens is the way a battery works is the chemistry, it forms crystals. You have the lead and the sulfur, and they form the crystal, lead sulfate, and the electricity's given out. And then when the electricity goes in, it goes back into the solution. But if you let the crystals of lead sulfate get big enough, it can't take a charge anymore, so you have to break those crystals down, put them back into a solution, and then the battery will work again.

Spencer Feldman: If you have a cell phone and no matter how many times you give it a full charge, it only lasts an hour, it's crystallized internally. The same thing I suspect happens in the human body. When the charge is low enough, long enough, you can't recharge it so easily because it's crystallized. And you talked about the heavy metal crystals and the oxalates in the body, it crystallizes. And not only is that uncomfortable in terms of where these crystals are forming, but it also lowers

our energy level. What the machine is designed to do is to say, when someone goes and grounds, by grounding, you put your feet on the Earth, and it surely feels nice. That's a trickle charge. And if you were born in an Amazon rainforest and either walked around barefoot or with leather sandals, you would never need a machine like I make because you would be constantly getting trickle charged from the environment, and you wouldn't be around anything that's draining off all your charge. If you leave the lights on in your car all night and you come back, your battery's dead. Being around electronics and walking around with shoes on is like leaving the lights in your car on all night. It kills the batteries, and every one of our cells, all 31 trillion of them, are little batteries.

Spencer Feldman: I said, "Okay, the ground is not working the way I thought it was, because it's a trickle charger, and it won't get rid of the crystals. What I need to do is I need to look and figure out what they do to recover batteries that have crystallized." And what they use is voltage spikes. I put a little thing on the machine that would spike, and so the machine can be used in three ways. One, you can spike it for with crystals, and then when the crystals are gone, and that can take two weeks to six months, depending on how bad the crystal's gotten, then you can back it off a little bit and use it like a battery charger, meaning, okay, you could now hold a charge, let's charge you up. And then for me, it took about a year till I got to the point where I could use it like a trickle charger. My tissue was so decrystallized and I was so able to charge up again that now I'm at the point where I can do it for five or 10 minutes once or twice a day, and if I don't do it for a couple of days, it's no big deal.

Spencer Feldman: But that's the concept, is our bodies are designed to store electricity. We generate electricity with every step we take because when bones compress, they generate an electric charge. The device was designed to operate on all three parameters. It was designed to help decrystallize the tissue, help charge the batteries, and then to trickle charge you when you're finally recovered, and I would say, from my own experience, it took me maybe a month, a month and a half to decrystallize. It took me about a year to fully charge up, and now I'm at the point where I just need a little bit of a top off now and then. And my stamina, I've got the endurance I had when I was young, which is nice.

Wendy Myers: Yeah, it sounds fascinating. And what is the name of the device?

Spencer Feldman: Oh, yeah. Electron charger.

Wendy Myers: Okay, great! Very simple. Very cut and dry and to the point.

Spencer Feldman: Yeah.

Wendy Myers: And you can get that on remedylink.com, and so tell us, so we can get all of your suppositories, your detox protocols and everything, and the electron charger on remedylink.com.

Spencer Feldman: You can. The suppositories and all the other products we make, we almost always have them in stock. We don't ship out in heat waves, because we don't put chemical stabilizers and preservatives in them. The electron charger, they're made in small batches, and if you order one, you might be waiting two to six weeks. The electron chargers are made in small batches, so we don't always have them in inventory. The worst would be a four week, six week wait, because we have them all made at an engineering firm here in the US. We don't have them mass produced in Asia.

Wendy Myers: Okay, great. That's fantastic. This is such an interesting show, and you really gave us a lot of fantastic insights on detoxification, another angle, it's why I love doing this podcast. There's so many interesting people that are doing this research and just trying to hack their own health, hack their own detoxification, so thank you so much for sharing your insights with us. Do you have any parting thoughts or anything else that maybe you want to share with the audience?

Spencer Feldman: Yeah, I'd like to share a story. I got a phone call eight years ago, seven years ago. I was still living in Hawaii at the time. A bit older woman, she was in her 80s, had a headache, and she had used the Glytamins, and she called me to thank me for making her headache go away. And I said, "I'm very glad to hear that, ma'am." And she goes, "No, thank you, really, thank you." I'm like, "Wow, it sounds like it was a bad headache." And she goes, "I've had it since I was 15."

Spencer Feldman: This woman had a headache virtually nonstop for 65 years, and now in her twilight, her final years, she gets to live without a headache. She probably had a trapped gallstone all that time, and what I would say is, a lot of people who come to detox, they're suffering. Their body doesn't work the way they want it to. Maybe they've got brain fog, pain, fatigue, something's going on. They know their body could feel better. And it can get frustrating. They could spend a lot of money and take a lot of time and go down a lot of rabbit holes trying to get better. But don't give up. That woman, it took her a while, and she didn't give up. Whatever it is that is bothering a person, there's very likely a couple of things that'll make them get better, and be patient, keep doing the research, have faith. Your body has an enormous capacity to repair itself. And usually, it's just one or two key things that you're missing, and you can figure that out. Your health is waiting for you on the other side of that.

Wendy Myers: Yeah, I love that. That's so important to mention, people try a lot of different things, a lot of different detoxes and things don't work quite right for them. And there's a lot to it. It can be very complex, and people have different challenges with their health. It's a complex puzzle that you have to keep at and keep trying to figure out. Thanks so much, Spencer, for coming on the show. You guys can visit him at remedylink.com, lots of amazing solutions there, so thanks for tuning in to the Myers Detox Podcast. My name is Wendy Myers at myersdetox.com, and thanks for tuning in every week to explore this topic of detox, because I personally think toxins are the number one primary driver of disease today. You want to be looking at detoxification if you want to live a long, healthy,

disease-free, medication-free life. Thanks for tuning in, and talk to you guys very soon.