



The Role of Toxins and the Survival Paradox in Autoimmune Disease: How to Reset Your Alarm System

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C
Interviewing **Isaac Eliaz, MD, MS, LAc**



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Welcome back to the Reverse Autoimmune Disease Summit, everybody. This is of course, version 5.0. We're talking about healing the energy body. I am so happy to bring to you Dr. Isaac Eliaz who is an expert in the field of integrative medicine focusing on cancer, detoxification, immunity and complex conditions of all kinds. He's a respected physician, researcher, best selling author, educator and mind, body practitioner. He partners with leading research institutes including Harvard, the National Institutes of Health, Columbia and others to co-author studies on integrative therapies for cancer, heavy metal toxicity and other things. He's the founder and medical director of Amitabha Medical Clinic in Santa Rosa, California where he's pioneered the use of therapeutic apheresis as an adjunct of blood filtration treatment for chronic degenerative conditions. Welcome to the Summit Series, Dr. Eliaz.

Isaac Eliaz, MD, MS, LAc

Thank you so much for having me. I'm really excited to talk about this such an important topic.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes. Yeah. I would love to hear first how you came to this body of research. Everyone has their own, unique story, and I would love to hear yours.

Isaac Eliaz, MD, MS, LAc

Yeah. So, my journey with healing started very early. When I say very early, it's as a teenager. My father was a civil engineer. I'm a native of Israel. We were in South Korea, and I got exposed there to TaeKwonDo. I was lucky. I practiced with a Korean National Team, because they had to learn



English. And, at this time there was like one of the world champions. I learned yoga, and I got exposed to Buddhism indirectly by going to local Buddhist temples.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Hence, the Amitabha. I was like, oh, that's a Buddhist-

Isaac Eliaz, MD, MS, LAc

Oh, yeah. Yeah.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

The Buddha in the top of Tara's top knot.

Isaac Eliaz, MD, MS, LAc

Precisely.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I really wanted to hear where that came from, so that's wonderful.

Isaac Eliaz, MD, MS, LAc

Yeah, well this is not from there, but later on. So, when I went to medical school in Israel which is six years and a one year internship, I knew I'm gonna do integrative medicine. So, I got trained and became a yoga teacher. I taught a yoga teacher's course. I learned shiatsu. I learned three years acupuncture. I started teaching acupuncture with the Hebrew University to Doctors. So, as I graduate from medical school, I had this other expertise, and then I left everything and my wife did and my daughter. We came to San Francisco and did a master of science in Chinese medicine. And, this, I was meditating all my life, but at this point, I got very involved with Buddhism. And, my specialties were Chinese medicine first and to integrated medicine has been the treatment of cancer. For decades, and difficult to treat illnesses. Because, when you really look at if you are treating the person and not the illness, then everything is possible. And then, I got very unusual training in meditation with a focus on healing. So, I spent almost 20 years, I would go every year for two months to the mountains to meditate and for 10 years, I spent half a day on retreat, half a day working. And, had the privilege to treat some of the greatest



meditation masters in the Himalayas. And so, I got to learn from them one on one. And, I got to see their power of healing. Like, how they can spontaneously heal in a way that you can't really explain. And, all of this came together into this body of knowledge that is expressed in my, finally I wrote a book in my early 60's called The Survivor Paradox. And, in addition, I am an innovator and a researcher. So, I've been a very active researcher. So, the main compound that I developed, Pectasol has over like 80 published papers. I have a number of NIH grants on the research on Galectin-3 removal and sepsis. So, I've held both worlds. And, interesting from a scientific point of view got really involved with Galectin-3 early on and discovered it's role in inflammation and fibrosis. Only later on I understood it's the survival paradox protein and would drive, for example, autoimmunity as an upstream molecule. And then, through therapeutic apheresis where I treat people outside the body through filtration of the plasma. And, through the concept of meditation where you really understand that if we let go then everything is possible. And, all of this has great relevance for health in general, but specifically for autoimmunity.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Let's back up a little bit about The Survival Paradox. Can you talk a little bit about this?

Isaac Eliaz, MD, MS, LAc

Yes. I'll be happy to talk about it. So, the Survival Paradox as it sounds is a paradox, because we all want to survive. We are built to survive as people, as communities, as nations and every organ in our body, every cell in our body. So, because it's built within us, multi-generational, then it's an automated, innate quality we have. So, immediately, it happens through the autonomic nervous system, through the sympathetic system. We either fight which then drives inflammation. So, it's very important, especially in the field of autoimmunity. We know that inflammation relates to autoimmunity into arthritis into so many things. But, inflammation is not the cause, actually. Inflammation is really a result. So, what I'm offering in this concept is a new paradigm shift where we're looking at the deeper level of causality. So, we either fight, cause inflammation and then it will drive all the cytokines storm. So, and we talk about in a moment. Or, we flight. We run away we hide. And, we create fibrosis. Both are driven by our survival products. Both are driven by the survival products protein Galectin-3. So, when we understand this, we suddenly have an upstream approach that can affect inflammation, regulate it. And, one of the issues with the survival response is that we have this sympathetic response where we can just relax, take a deep breath and the system can relax. But, we have a biochemical response. And, that's where



Galectin-3 comes in. And, the biochemical response turns within minutes. And, that's a lot of my current research is supported by the NIH. I've shown that in sepsis models, the Galectin-3 will rise before interleukin-6, before the cytokine storms. And, it's well published that Galectin-3 drives all different kinds of cytokines. But, when we block Galectin-3, or we remove it, we attenuate IL-6. We attenuate kidney damage. And, the animals in the model don't die. When people walk into the ICU with sepsis. The level without preexisting conditions which means no kidney disease, no heart disease, no cancer, their level of Galectin-3 at the time of admission will determine who will die from sepsis. So, this violent inflammatory storm that is the result of an infection is very similar to what happened in autoimmunity, why? Because, autoimmunity is an inappropriate survival response. And, in this sense it is great relevance for our topic.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

So, how is galectin-3 measured?

Isaac Eliaz, MD, MS, LAc

So, galectin-3 is a very simple assay take, an ELISA assay, it's approved by every insurance. And, it's done by every lab. It's underused. And, for people who know about galectin-3, as somebody who probably has more clinical experience with it than anybody. The standards for galectin-3 were set in very early on, around 2010, 2011 when the test was manual and it was done specifically for patients with congestive heart failure. In these patients, because often their kidneys have some damage, galectin-3 is much higher. So, the standards for normal level of galectin-3 is much lower than people are aware of. If your galectin-3 is over 12, it's already a concern. And, the levels change based on our genetics, based on our MMP9s, how we break different protein. 'Cause, galectin-3 can come in a single protein molecule, or it can come in pentamers, five of them. But, both of them are counted as one by the assay.

So, you really can't rely on the number. And, galectin-3 is a survival protein. It has an important role in the embryonal stage. It helps keep normal kidney development, normal organ development mainly intranuclear. But then, when we are living our life it protects us by repairing our injuries. And, it does it through inflammation and fibrosis. And, this process is destructive in every field. So, if we look at galectin-3 research, and, just to get a sense, close to 10,000 published papers, 10,000, or we look at the MCP, modified citrus pectin which is made from the peel of the citrus and modified and is able to block galectin-3 through the about 80 papers. We look at the



benefits, we see cardiovascular disease. We see stroke, we see liver. We see lung. We see kidney. We see NASH. We see immunity with integrative care with cancer therapies, why?

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

If it's blocked?

Isaac Eliaz, MD, MS, LAc

Yes. Yes, when it's blocked you stop this damaging process of galectin as the route cause, because once it's turned on, it's like an alarm that doesn't turn off. So, this is in general and it's very, very specific when we look at it from the point of view of autoimmunity.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

And, how do you block it?

Isaac Eliaz, MD, MS, LAc

So, you block it in a few ways. In the biochemical evidence, very simple. You use something called modified citrus pectin, the one researched is called Pectasol. And, what it does, the galectin-3 has what we call is carbohydrate recognition domain. It's a sugar binding protein, or carbohydrate binding protein, not glucose, but other carbohydrate. It delivers different ligands that causes hyperviscosity inflammation, growth factors to the tissue that is injured. And, that's how it causes its damage. So, it hears that there is a damage. It drives to the tissue. It binds to the ligand and it creates a pentamer. And then, it creates a lattice formation, literally a coating. You know, the biofilm for example, that we are so aware of-

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I want to slow you down. I want to slow you down, because I want people to be able to follow this. So, for galectin-3, because it's carbohydrate binding and it uses, I'm seeing if I've got this right. It uses carbohydrate then, to create that matrix of damage, right?

Isaac Eliaz, MD, MS, LAc

Right, but not, it binds to different ligands. And then, it creates a pentamer. It can also bind to the membranes, but then this pentamer, think about it. I mean, there are five of them. Think about five of them and another five and another five, they create a coating around the cell.



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

So, sugar give it what it needs.

Isaac Eliaz, MD, MS, LAc

The sugar in the protein. The sugar in the lipids. The sugar in the lipo-saccharides. Many of them have, you know, a glycoprotein, glycolipid. There is often very common to have a carbohydrate or sugar component on proteins, on lipids and on different damaging molecules. So, when it creates this biofilm, this coating, then it creates a separation between the tissue that is being coated and the body. So, you will get what you will call a microenvironment, which is often hypoxic, where oxygen doesn't get to it. Or, it changes the metabolism. For example, if galectin-3 comes to a tissue or if the area is inflammatory in the macrophage, the immune cells that clean the tissues in the body that clean the damage in the body become inflammatory, then they will also excrete galectin-3. It will block insulin receptors on the cell. So now, the cell metabolism is no longer normal. And, without going into the biochemistry, the mitochondria will stop working. You get an acidic environment with lactic acid. You get damage to the tissue. You get destructive tissue. And, this is a mechanism for cancer.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Right.

Isaac Eliaz, MD, MS, LAc

Because, it can not use oxygen, but it's also the mechanism in autoimmunity. So, if we look specifically at autoimmunity from a philosophical point of view, and we ask, what is autoimmunity? Autoimmunity is really a part of us attacking ourselves. And, we actually don't recognize the interdependence and harmony between all the parts of our body. And, a certain part goes into a survival mode and attacks out of a survival mode. And, that's why in autoimmunity, across all autoimmunity diseases, you see very high levels of galectin-3 in the blood. It's interesting. If you look, for example, at the effect of modified citrus pectin on arthritis. Now it treats, osteo arthritis is not necessarily a survival response. Somebody can have a great lifestyle, and they jog 50 miles a week all together for 50 years. Their knees are gonna give out. You know, it's called osteo arthritis. But, if somebody has rheumatoid arthritis, then the benefits of modified citrus pectin or blocking galectin-3 in relationship with the baseline, if they didn't do



it, becomes much more dramatic. So, until now, we focused on the biochemical. The other parts of really changing it is by switching the way we live our life from a survival mode to a harmony mode. And, we are built to do this. And, this is why as you know so well, lifestyle plays such a big role in autoimmunity. Like, autoimmunity is one category where diets are so important, because you are changing the metabolisms. So, you've got your dietary changes. You've got your lifestyle changes. You've got hydration. And, the starting point is you've got to address galectin-3. And, that's why addressing galectin-3, in my opinion, is the most important supplement one can use, because it drives, if you look at the data, it drives practically every chronic disease.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

So, in outside of diet, is there anything else that increases galectin-3?

Isaac Eliaz, MD, MS, LAc

Yeah, galectin-3 will increase with stress.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah. That's what I thought.

Isaac Eliaz, MD, MS, LAc

Any stress.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yep.

Isaac Eliaz, MD, MS, LAc

For example, you look at patient for heart attack, MI, galectin-3 goes up. If you play music to them, in the ICU, their galectin-3 levels will go down. And, as a result, the damage to the tissue will go down.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

How fascinating.



Isaac Eliaz, MD, MS, LAc

Right. So, this is what the other part of what I do, what I teach is called open-heart medicine. If we can move from our head, from our concept, from our reactivity to our heart, then this is the biggest shift that can really heal us. And, not surprisingly, galectin-3 is especially damaging for fibrotic type heart failure. Because, when galectin-3 creates a lattice formation, when it creates this separation, it creates separation. You know, it creates divisiveness. Right now, we live in a society where we are so, you know, it's so easy to get self-absorbed with so much tension and so much in the speed of media and information, and political separation, and yes vaccine, no vaccine, and yes mask and no mask. We lost the ability to hear the other side. So, the heart doesn't function in this way. The heart in this sense, and if we have time, we'll talk about it a little bit in detail. The heart functions different than any organ in the body. In this sense, when one end you have a very simple supplement. On the other hand, you have really a paradigm shift in the way we live our life and we experience reality. And, both of them will end up with benefiting similar conditions.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

You know, it's interesting. I spent a couple of months in India years ago. And, I was getting my master's degree in Ayurvedic medicine. And, one of the experiments I chose to engage in was at lunch time every day, I would take my music and I had a little scholastic notebook. And, I would do my pulse diagnosis and measure where I was before I listened to a certain kind of music, during the music and after the music. And, I recorded my pulse response. And so, in Ayurvedic medicine, the pulse has many, many different layers, and it's more than just your heart rate. And, I found that the one kind of music that would instantly put me into balance. And so, that's an individual implementation. I'm curious, when you say, "play music in the ICU," it's one of the questions as a conscious dying Duala I remember talking to my parents and saying, "What kind of music would you want to listen to if you were in a coma?" And, my dad telling me he wanted to listen to jazz. So, when he died last year in the ICU, I put jazz next to his ear. But, I knew that because I had asked him. So, I'm curious what you, you know, when you say, "Play music," that's a very large, you know, spectrum there. Is there certain music that you've studied that actually decreases galectin-3?



Isaac Eliaz, MD, MS, LAc

You know, it's not only galectin. It's a great question. And, you know, I'm highly trained in Chinese medicine, so rely on past diagnosis. It's really, some, the conversation is the preparation for the pulse. So, you know, it's very individual which is very important, because we often want to impose things that are good for us on other people, right? Each one has their own thing.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

But, there's something about the rhythmic, about the pace. There's something about, you know, the kind of music. There are musics that are more based on the five elements. You know, more than five sounds, or they're more evidence for balancing. But, in general, any music that makes a person very relaxed and creates space within them. Because, our healing journey, and it's so relevant for autoimmunity, but for every disease, our healing journey is a journey of letting go. That's really what life is about. So, we come through this world, we let go. We exhale and cry. We leave this world, we take our last exhalation and we let go.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And, all our life, it's about trying to go back to the letting go. When we think about something, when we focus, when we have an opinion, we are holding to something. We are losing our recognition that everything is changeable. And, in this sense-

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Impermanent.

Isaac Eliaz, MD, MS, LAc

Exactly.



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah. Yeah.

Isaac Eliaz, MD, MS, LAc

It's like the basis, right, of the asian spiritual journeys. I'm staying more like general without permanence.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah, we're letting go, clinging, clinging, clinging.

Isaac Eliaz, MD, MS, LAc

Exactly. So, if we look at, now we look into our body and we recognize, wow, we have close to, I'm rounding up a little bit, 50 trillion cells in the body, Not million, not billion, trillion. And, each cell, and I didn't know until I looked it up has between 100s of thousands and million reactions a second. Just imagine, okay? And, we are still alive. We're still talking right now. That's totally a miracle. And, the reason is that our body recognizes that it's working as a whole. So, why every cell wants to survive? Because, every cell has a membrane, a boundary. And, every cell decides what it takes in and what it puts out, right? Just like we do. What we're gonna eat. What we're gonna breathe, you know, et cetera. But, the cell recognizes it as a relationship with its environment. When it loses this recognition, when it want to go into individualized survival response. Says, "I'm not going to die.

I'm not going to isolate myself from the environment, create my own nourishment, change my metabolism." When this happens, this is what you call a cancer cell. And, this is also what you call an autoimmune cell, that decides to be independent, becomes inflammatory and starts attacking people in a different way than cancer does, because it can quicker have a systemic affect than they have necessarily to expend itself locally, but it's a very similar approach. The only organ that functions differently, that takes all the toxins from the perspective of the cells, everything that comes to it from the past. Because, when it gets to the heart, its' already been released by the cells with our heart. And, our heart, instead of creating a membrane and deciding what comes in, connects with the universe through our lungs. And, we can see some autoimmune diseases that are lung, kidney related like good posture and other diseases. We connect with the universe. Our drama for the universe is insignificant.



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes.

Isaac Eliaz, MD, MS, LAc

It takes it in, and that's why we have to respect our universe. When the universe becomes toxic, it doesn't heal us anymore. And then, what does it do? It gives blood without discrimination, because the aorta is a stiff artery. And, it's an image that I discovered and I share with, because it's a wow for me every time, the first organ the heart nourishes is itself. From the carotid artery. The heart nourishes itself in order to nourish others and as part of nourishing others. And, that's why there's such profound healing in connecting with it, because as you said, we connect with the impermanence because the heart doesn't stop thinking. The moment the heart stops, it stops the flow that everything is changeable, we are dead.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And, in this instance we know, like in meditation and healing retreats, the autoimmune patients are the ones which will have a very dramatic response, because they move out of the survival response. So, this survival response is basic. We all fall into it. I fall into it. Everybody who's listening fall into it. It's part of our existence. So, transforming it and freeing it is the deepest, deepest healing. It is not so easy to come by. But, prior to it, we have to say, "How do we reduce the survival situation?" And, that what you mentioned, right, diet, good hydration, lifestyle. And, we have to be aware what is driving us into survival. So, one of the biggest areas is toxins and pesticides and heavy metals and mycotoxins.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

And, feelings of not feeling safe. I've noticed that in all of my autoimmune patients.

Isaac Eliaz, MD, MS, LAc

Completely, because safety allows survival to melt.



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

When we feel safe, we don't need to survive. So, for example-

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yep.

Isaac Eliaz, MD, MS, LAc

If you look at Hawaii, in Hawaii there is great harmony. It's called paradise. So, in Hawaii, the plants are very friendly. They're not aggressive plants. They don't need to. For example, I raise bees as a hobby. I used to raise many years. And, I see it as a great image of selflessness, because this specific bee is part of a bigger community. It's beautiful. It's really what we talked about. But, I had some queens who came from Hawaii, and they didn't survive in Sonoma County in California, because they were used to this very harmonious environment, you know? So, our survival, so the more we can shift to this harmonious response, the more our body will heal and become at peace. And, it's not only the diseases go away. Our quality of life improves.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And, so we see through aging for example, centurions have a lower level of galectin-3 compared to people in their 70s and 80s. Despite the fact that the 70, 80 includes some people who are going to become centurions. So, that's another example. So, yes, understanding this not only from a conceptual, but in my book of Survival Paradox, I explain it, then I go through galectin-3, then I go through what it does metabolically, inflammation, circulation, and then how the heart can change it. Which is really the survival of the heart, is to keep nourishing us without discrimination. That's why it's such a big healer in every tradition, you know?

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.



Isaac Eliaz, MD, MS, LAc

And, when we realize it and then I go through every group of diseases including autoimmunity when I explain and then what to do. So, we really need to address the issue of detoxification both on a constant level and a more periodic focus. And, Ayurveda is one of the ultimate detox system, because it's much more than a one way cookie cutter. You know, it takes into consideration constitution and environment and weather and time of the year and age, that are often not taken in straight forward now, a formulaic detoxification. And, in my book in the chapter on detoxification, which I will offer also to the summit people, this chapter, it's important to understand, the detox process is magical. And, it's happening all the time. Every time we exhale we detox. Every time we inhale we nourish.

And, our exhalation is twice as long as our inhalation. So, we detox more than we nourish. And then, the transformation happens in between. So, when we look at it from a poetic point of view or a physiological point of view, we can bring it all the way to the cellular level or to the membrane. All the way to the mitochondria, because in the mitochondria, if a cell inside feels threatened in survival, then epoxy inducing factor jumps up until one goes up. You know, pyruvate kinase, PDK gets activated, no pyruvate can get into the mitochondria. You don't produce energy through aerobic metabolism and you go into a very inefficient, disease-driving metabolism. So, there are so many layers, and if we recognize it, we each can find in our own journey, just like you said, what works for us with very simple things like we've got to address galectin-3.

And, you know, I've quietly researched it for decades and didn't spend the time explaining it. But now, after almost 30 years of research, I feel comfortable talking about it more. And also, how do we change our life? Like, can we close our eyes and feel how somebody with an opposing opinion to us feel? And, can we accept it and say look, "It comes from their set of genetics, epigenetics, belief system. And, even if I don't agree with it, and even if I don't objectively, I don't think it's supported, that's their reality. And, how do we bridge? How do we bridge?" And, once we bridge and we have a flow, then the joint space is not inflamed. And, autoimmunity just melts away.



Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I think this is a very important point that you're making, because in the field of humanity, the grid that we all belong to, when, you know, the ecosystem that has its own boundary and begins to have a life of its own like cancer, we're doing that with one another when we become polarized. So, you know, the energetic grid that we're all part of, we need to learn how to do what you just said where people can accept and learn to see differing opinions as just a balance inside of the energetic field instead of something that makes them feel unsafe. Because, I'm seeing that that's a lot of what's going on politically. People feel unsafe, you know, when someone's expressing an opinion that's different than theirs instead of, you know, saying, "Oh, that's just another thought construct." You know, it's just another thought construct. You know, when that feeling of not being safe, because other people think differently than you do, that just makes you sick. And, it makes our society sick. So, there's no positive outcome to that way of being.

Isaac Eliaz, MD, MS, LAc

Right. You know, it's so, once you've brought safety, it's a fundamental shift.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yep.

Isaac Eliaz, MD, MS, LAc

The whole body relaxes. And, one of the easiest ways to do it is to take a few deep breaths. Because, the moment we have more oxygen in our body, the cells relax. The moment we're not oxygenated well, the cells go into a crisis. And, if an organs, of course as you know well from Ayurvedic medicine, different organs will reflect in different ways and different emotions. And, not, a functional doctor is not necessarily have this understanding like pure biochemical, functional doctors. But, we are not biochemistry. Biochemistry is an expression of who we are.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes.

Isaac Eliaz, MD, MS, LAc

And, we really have a choice. You know, there's a beautiful saying in Hebrew, which I like actually to quote in Hebrew, often which says, which means, everything is predetermined. That's our



genetics. Sure that to now, we have the choice. That's our epigenetics. And, moving from survival to safety is a choice. It's a choice that sometimes is easier to do when you're in a very peaceful place. And, it's more challenging to do when difficult times. But, we internally, always have a choice. And, sometimes we are successful. Sometimes we are not. Everything is impermanent, but the good news, we can change our response in the next breath.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes.

Isaac Eliaz, MD, MS, LAc

The next thought. And, if we do it long enough, suddenly, the inflammatory markers start coming down, because their driving force is going down. Now, when I say driving force of galectin-3, if you look at my research in sepsis, you will see in the animal sepsis model that galectin-3 goes up only doubles. Interleukin-6 will go up 1000-fold, 1000-fold, because you need a very small change at the top to create a whole waterfall of cascades of cytokines. That's why trying to chase a cytokine, it's a battle, they're losing proposition. It's like putting a bucket in a waterfall and trying to make sure it doesn't get the floor wet. If you can shut it at the top, no water is gonna come down, you know? And, your term of safety is one doorway which is a big way. Part of safety is acceptance.

If we accept things we usually don't accept, we feel more safe, because we are not threatened. And, if we can change reactivity to responsiveness by understanding, like you said, where people come from. And, instead of getting upset about it, we open our love or our heart. That's like the heart nourishes. The heart gets like all of the junk. And, it doesn't, "Oh my god," no, it just nourishes and nourishes. Suddenly, we have a responsiveness of love and compassion. It transforms often. I see it in retreats in a few days. I see it in myself when I'm in the right space. It's amazing how my health with transform itself, you know?

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I can tell you, it's what helped me get through COVID quicker. I'm on day eight of COVID right now. And, in the first three days, I was pretty sick. And, just seeing the virus as an act of love that is there to teach me about impermanence and having compassion for impermanence itself and the human condition, it transformed everything rather than contracting around fear and anxiety,



and, you know, all of those things. It was just a constant bringing back to recognition that everything that I label not love is actually not true. You know, everything is love, bringing it to the heart, you know, and pulling that through with every single thought which is a choice with every breath. And, you know, letting go of any clinging to things being different. And, that, I got better pretty quickly. So, yeah. I think that that's a really powerful way of getting better. And now, I can see what was going on.

Isaac Eliaz, MD, MS, LAc

You know, it's remarkable, because what happened, when you did it, you moved away from the survival, fear of survival.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

Well, the spiking protein, the spike protein of the virus is practically identical, guess to what, to galectin-3. The virus also wants to survive. The highest density of galectin-3 receptors is in the lungs. If we look at COVID, the level of galectin-3 at time of the admission of the emergency room, regardless of the extent of the disease in the lungs or the severity of the illness will determine who will end up in the ICU and who will die. Very good, loud study from Mexico City done already in 2020. So, when you look at something that blocks galectin-3, you both have the attenuation of the cytokine storm, and you have the blockage of galectin-3. Now, what you did, you had the capacity and the training. You know, it's one thing to think like this. You know, Catch 22, I write it in my book, you know, the flow of Catch 22, we can think like this, but inside we don't feel like this. You were able to feel like this. So, your process came from the inside out.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes.

Isaac Eliaz, MD, MS, LAc

And, as it went through all your cells, you created space within your cells. You know, I told you my story about getting sick 45 minutes before teaching a seven day retreat to 150 people who are in the big hall. And, after two and a half years in Israel. And, I just let go. And, two days later, I was



antigen negative. And, I was quite sick. My gosh, because I talked the day before to a few hundred people in one day. And so, yes, it's the power of letting go. And, it's challenging because it's contradictory to our survival drive.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Mm-hmm . And, the benefit of practice, you know, this is the place where practice comes forward and you get the fruits of it.

Isaac Eliaz, MD, MS, LAc

Totally.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And then, as you know, I know, we all know, it's an ongoing process.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

It's a process. There is no end spot. You keep moving, because the moment you freeze, oh my god, look at my meditation, look at my mind and you hold to it, it's no longer flowing.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Nope.

Isaac Eliaz, MD, MS, LAc

You turned the water into ice. So, the approach, as long as we flow and we don't hold, we have the power of healing. And, one of my favorite sayings that I often use is not everybody is going to be a miracle, but anyone can be a miracle, because everything is changeable. Because, everything is changeable in its essence, you know, quantum physics knows the understanding of



reality knows that we can't hold too time. And, time comes from all directions. I don't want to get into this, but actually time can actually come from the future.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Right.

Isaac Eliaz, MD, MS, LAc

Through my healing work and I teach meditation, it's a big component. But, as long as long as we realize it, then everything is possible, and if the tissue and the trauma and the pesticides and the heavy metals. It's caused a reaction in a certain tissue in a certain they've created an immune response can be turned off. We can see a change in the autoimmunity. And, in this sense, you know, a lot of views now of IVIG, you know, in autoimmunity. I use therapeutic apheresis because I'm a disrupter in the field. It's why I have grants and a lot of inventions. I'm working on a development of a column that will remove all galectin-3 out, but right now, I'm moving more inflammatory compounds. And, what happens when you change the environment of the plasma, after the first treatment it's very interesting.

Everybody does like one treatment and like once a week or whatever. And, you do another one very close by, two days later, you would think, wow, the plasma is really clean, right? No, there is much more dumped into the waste bag because the tissue is letting go. So, if we reduce inflammation in the blood in the plasma and a little bit in the tissue. We move the body, just like you said, the tissue from survival to safety. And, certainly, for example, the liver, even if it's challenged and doesn't have 100% capacity, we clean the backup for the liver, it can finally do its daily work with a little bit of help. And, suddenly the tissue changes, and we change. So, again, therapeutic apheresis is more of an extreme treatment. It's expensive. It's specialized filter. It's similar to dialysis. It's a real specialty, but the concept is similar. The more you can move it to the safety role, the more it can create space and hold it long enough, eventually as you know, the tissue is gonna change.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

That's beautiful. I think that what we're talking about is a little antithetical in people's minds to what they're trying to achieve in terms of survival



Isaac Eliaz, MD, MS, LAc

Right.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

And, you know, and that becomes, I can see why you call it the paradox in the quantum cell of time, you know, the one that was conceived and the one that will die is all together in a cell of time, not linear, but all available right there. And, you know, the more that you can heal any places that the young one didn't feel safe, then the future one is healthier.

Isaac Eliaz, MD, MS, LAc

Completely.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Right? But, it feels, so like with COVID for me, letting go, letting go, letting go, it's like practicing dying, practicing letting go. I think that's an important practice that we don't in our culture ever land on. We have to practice.

Isaac Eliaz, MD, MS, LAc

You are getting into deep water. I mean, we are getting into deep water, because I talk a lot about it. Sometimes I-

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I know. You and I, I want to have tea with you.

Isaac Eliaz, MD, MS, LAc

You know, it's absolutely correct. And, often, you're not allowed to talk. You know, I talked in a Cancer Control Society is a very alternative conference for cancer with all the clinics for Mexico. And, I used to lecture there in the 90s. And, I talked about medicinal mushrooms which was like a new thing. And then, I took off my jacket and I told people, you know, I want to talk a little bit about death and dying.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.



Isaac Eliaz, MD, MS, LAc

And, I was pulled off the stage after three or four minutes, but dozens of people came for the little bit I spoke and said, "Thank you, so much."

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

So, the more we let go, the longer and healthier we live. Letting go, in order for something new to come, the old thing has to die.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Has to die.

Isaac Eliaz, MD, MS, LAc

Has to.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yes, has to die.

Isaac Eliaz, MD, MS, LAc

The change is medicine. Longevity is how different you are every second. Otherwise, we can live 100 years, and we had a very short life, or we can be mortal to live 30 years and had an endless life that people are still celebrating, you know? So, this is why time is so illusory, but on a practical level, we also discuss some very, practical, you know, advice.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And, of course, you know, we can go into greater detail about it in our second interview. But, it's for me, and, you know, I wasn't as aware as I got a great partner. I can't often talk about it. It's how I live my life, you know, for decades. But, you are really bringing to the forefront, and, you



know, in this more simplified language than I'm able to. So, I thank you for bringing to. This is really where ultimate healing happens.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

That's really, ultimate healing happens in the heart. And, that's why there is relative healing and there is ultimate healing. But, the more we are connected to this place, the relative healing will happen anyway, because as you said, in the quantum example, future, past, it's all the same.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

Whatever, like you said, is profound sentence that you recognize with the COVID, because it's a great letting go is that everything is love, because love is an expression of this we call it emptiness in buddhism or impermanence, or the divine within us, you know? That's the expression within our body. When we go into our thought, our ego, our struggle, we get disconnected. So many people are disconnected. I get disconnected with all my training. When we connect to the heart, the heart is always connected. The electromagnetic field of the heart is 100 time bigger than the brain. You know, it gets to every cell in our body. So, when you connected with love, every cell in your body was getting love and hug and compassion and safety. And, people around us get it. We can feel right, when somebody's-

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah, it connects to the global heart to each other.

Isaac Eliaz, MD, MS, LAc

Exactly.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.



Isaac Eliaz, MD, MS, LAc

Exactly. And, that's really the medicine for the heart for the world.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

And, often, I say, "Wow, why am I talking about it?" You know, when I was in the Himalayas and I don't go into the countries for political purposes and this great teacher said, "Look, you got to talk about it in the future in the West." I said, "What are they talking about?" I'm like this Israeli Jewish guy. But, when it's very dark, every small light really shines, you know? So, I think within this time of divisiveness, that's like the Yen and the Yang, there's always an option, but if we push the rubber band too much, it is gonna get cut, you know?

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

Yeah.

Isaac Eliaz, MD, MS, LAc

See it right there with the environment, with the inflammation in the environment, what is global warming? It's inflammation on a global scale, right? And, it's a reflection of our own inner processes. And so, these are quite some times for the world. It's worrisome on one level and exciting in the other level, because we can make such a difference, you know.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

I agree. Dr. Eliaz, it's been a very big pleasure. And, I appreciate the honor of being able to talk to you. And, we have another interview coming. And, I'm very much looking forward to it, so.

Isaac Eliaz, MD, MS, LAc

Thank you so much.

Keesha Ewers, PhD, ARNP-FNP-C, AAP, IFM-C

All right, everybody, until next time, be well.