# The Root Cause of Chronic Lyme: Reach Total-Body Health

Thomas Moorcroft, DO with Isaac Eliaz, MD, MS, LAc



#### Thomas Moorcroft, DO

Hi, everyone. Dr. Tom Moorcroft back here with you for this episode of The Healing from Lyme Disease Summit. And we're in for a real treat right now with this interview. We're talking with Dr. Isaac Eliaz, who is an M.D. and Occupy. He has a, you know, a master's degree as well. But he's a leading expert in the field of integrative medicine and really specializing in things like cancer treatment and, you know, detoxification and how the immune system functions. So that when, you know, you think about really complex medical illnesses, how are they? How can we get the immune system kind of under, you know, it gets all disrupted and out of control. How can we get the immune system to kind of work back in our favor? And, you know, as I sit here, as you know, I like to tell you a little bit about how I got to know people. And it was really interesting because I think it's so relevant that a lot of times when we're doing all these herbal treatments for Lyme and co-infections, you know, we're on these herbal tinctures and we're doing all these other things and we're just not seeing the progress and the taste is just terrible. And I was talking to a friend of mine a couple of years ago, and she's like, Why don't you just put the herbs in the soil? See, there's this really nice lyme flavored version. You kind of have a lime flavored anti lime margarita. And I started to do this, and not only did I see like improvement and compliance because it tastes a heck of a lot better. But more importantly, I was seeing changes that I wasn't seen with the herbs themselves. And when we really boiled it down, it was the pack. This all see the modified citrus pectin base that was really kind of making the huge leaps and bounds on top of our herbal protocols. I really wanted to bring Dr. Eliaz in here today to talk about what the heck is going on, what is this practice of the modified citrus pectin, and how can we really put this to use in your lives so that we can make a real big difference in your lives, your kids lives, and really start to change these outcomes in chronic Lyme. Dr. Eliaz, thank you so much for coming.

#### Isaac Eliaz, MD, MS, LAc

Thank you so much for having me. Such an important topic for me, not only for my work with patients, but with my work with all my family members who had significant Lyme and all completely healed. So that I really I became an expert by default because most of my work was in cancer. And as I became an expert, I realized, wow, Lyme is really a treatable disease and you can really heal from Lyme. I mean, I'm talking about healing, not about feeling better. And, but



you really have to take the right highway that has an unlimited healing potential. And so I just try to touch on it today, both from my clinical experience and my family experience and from my years of research and clinical work with many patients.

## Thomas Moorcroft, DO

And I'm so excited because you touched on two things that are really near and dear to my heart. And first and foremost, I love the personal stories. You know, lymes impacted so many of our families in my life, my daughter's life a bit. Thankfully, I knew what I knew from my experience so I can prevent her from having the chronic issues. But the other part, one of the things with the modified citrus pectin that you're working with is there are very few things I've ever read about that have more research done on it, and that's what I'm always trying to do. I'm trying to balance like we've got this personal side with the emotional side for people.

We want people getting better and people are suffering, so they're willing to do a lot of different things. Some of these things may not be science based, and whenever there's evidence to support what we're doing, that's the thing I want to start with. I'm not saying that the stuff that doesn't have all the evidence does it work? Because we all do that. The Art of medicine thing. But I just I'm always blown away with how much one how much research you're doing, and two, how much research this single supplement has on it. So what actually, I mean, what got you into this whole thing before we dove into what we keep talking about here?

#### Isaac Eliaz, MD, MS, LAc

Well, I started my healing journey and learning healing arts as a teenager. I was in Korea and so I was a yoga teacher. And so when I was in medical school in Israel, I was already practicing yoga, teaching yoga, learning shiatsu. So I went really parallel for decades and over, you know, and now in my early sixties, a combining my clinical experience, my knowledge, my vertical in-depth knowledge in multiple medical systems, a decades of very in-depth training in meditation. I know I spent 20 years taking 2 to 3 months a year to go to the mountains on retreat. For ten years there was one half day retreat, and I was a doctor and student of some of the greatest meditation masters in the Himalayas.

And I have a bonafide research. I can say I've got large NIH grants. I work with leaders, you know, in the most respected medical institutes. And as such, I put together all these different approaches, esoteric approach, the scientific approach into a concept, into a new paradigm called the survival paradox. And the idea is that what we have built innately to survive every cell in our body has been to survive. But our survival drive, once we are born and our organs are in place, when we are under stress where no survival is a strain, we respond in a way that actually shortens our life and gets sick. And we do it automatically with the sympathetic nervous system where it responds with fight, which equates to inflammation, which often Lyme patients are not able to do well all week by isolation, by hiding, by creating a micro environment, a biofilm, we alter our metabolism, which is a very common pathway. In Lyme patients and it leads to the



fibrotic organ dysfunction. Stuckness I can't hear possibly now bio chemically so sympathetic clear. We can relax, we can take a deep breath, we can be natural. You get a shift in the sympathetic system, but biochemically we have alarm proteins and the one I've researched for almost 30 years and I made some of the most important discoveries that blocking it will attenuate inflammation and fibrosis and also would remove heavy metals and will attenuate the immune system is all my discoveries. It's much bigger than me collecting three this proteins called Galectin three. It now has 10,000 published papers, obviously much bigger than me. The compound, the natural compound I developed, picked up soil, has 82 published papers. And you look at the papers, they are like on kidney disease, on sepsis, on oncological papers, on heart disease, or on liver disease or lung disease.

Why? Because we are addressing an upstream and very early stage signal that starts this survival is respond. That doesn't stop. And it leads to the cytokine storm that we are so familiar with now, COVID. And it leads to two really and it leads to damage to the body. So addressing it becomes key and we can address it from the point of view of lifestyle, of our mind, body, but biochemically, we have to block Galectin three. And that's why I think that finally, as I've started talking more in the last year about all this work, I think I think practice is gaining its place. I would say one of the key, if not the key supplements specifically for life. And so, of course, that it's very rewarding for me. I was very focused on it, on cancer for many years. I still am. But it's really remarkable how it can make a difference because of its mechanisms of action. And when we understand more what Galectin three does, GALECTIN three goes up within minutes.

And it's a bus driver that drives inflammatory compound, hyper viscosity combined immune disruptor compounds a angiogenesis compound, metabolic disruptors into the area of injury. So if you have, for example, in an area where Spike decided to become active whereby extremely disrupted or there is a damage to a tissue, then they collect it, we will get there, it will create a lattice formation, a paint mill that will bind many painters, literally will create a coating. And now, as the body cannot reach the problems, it's going to be a natural, sclerotic plaque, but it's very often worse viral type. And then we are in a moment of stress. What happened in stress or crisis lyme gets activated because we don't have access to this area.

And so if we look at why Galectin three specifically is relevant in lyme, we can break it down specifically for light into a few categories. First, it changes the environment, the extracellular environment, and it's fascinating our cell function based on signals it gets from outside the cell, not inside the cell, the cell receptors, membrane receptors outside the cell. And in the cell field. There is a sense of safety in the macrophage. The immune system protectors are relaxed, they are not activated and inflamed insulin receptors work well. We have normal production of energy in the mitochondria and we feel great. The cell gets a sense of crisis, everything changes. Insulin receptor gets blocked by Galectin three and Beckett gets blocked. We get anaerobic metabolism and we get exhausted, we get sick, we get lactic acid. Those the spiral kids go through the same experience when it feels a sense of danger, of lack of oxygen, of lack of safety,



it gets activated. Otherwise it can be there and not bother us. We are capable of living with with gas in our body weight, 100 trillion of them in our gut, you know. So there is a change to the environment. And also the Galectin three allows for oxidized lipids for inflammatory like in soy heavy metals, for pesticides to get attached through a lipid compound, fat soluble compound and come to the tissue. But Galectin three has an effect on the biochemistry of the biochemistry. It alters the membrane of the receptor on the membrane. Any changes, the intracellular site, the function in the cytoplasm, and it will affect our mitochondrial function and it drives fibrosis. So for example, you will see trans ROS a TGF beta one elevated in lyme patients.

Galaxies. We can be too low because it's all stuck in the tissue. You get them better, colitis becomes too normal. It doesn't get elevated with cancer abnormally like for 5 to 7 TGF vita drops now is a patient can respond in a more flexible and not in a in a in a fixation way so an important we have to remember we are not the only ones who want to survive our guests and our infections also want to survive. So if we are together, if they feel threatened, they will respond. And a great example is COVID. The spike protein in COVID is almost identical to collecting, so it is a survival protein of of the COVID. So we have this dynamic dialog and here we have something that can block the negative effect of collecting three wherever we need it. It will still get expressed. Of course, it will attenuate and stop all this devastating immune dysregulation. But in the same time, it's a superb binding of heavy metals, of mycotoxins, and of end, of of other toxic compounds.

But regular binder is like, you open the kitchen sink, you throw everything on the floor and it becomes a mess. Here you got something that regulates the inflammatory response so you don't get the healing crisis, you don't hurts. And people like, like, like you were mentioning when you talk with Dr. Hinchey, there's a reason why every single patient now is on vectors or because you get this, what you describe is very typical of a like patient. They feel while my digestion is working better, I can handle things better. And on top of it you can have botanicals, you can invite I mean, you can have dietary changes. There are doctors uses antibiotics. It's a whole discussion of when and when, when not to use it. If we have time. I can touch it. Then, you know, everything starts working better and it's shown in research that actually antibiotics work much better in combination with more effective respected.

Why? We are exposing the problematic part. We are cleaning the mess and we are allowing oxygen life to come into the tissue. So that's a little bit why this is such I picked up so is really is really like the head of the arrowhead and on top of it you can build so many things. You know, in my practice, yes, I can use things as simple as a few supplements, but I also quietly now I can disclose because I'm doing anymore. For over a decade I did whole body hypothermia you know I disease and I was one of the key people and this is a foundation that I've from about 25 years ago and I and I'm a disrupter in therapeutic offerings in a global level. So of course, I use more, more dramatic methods when needed. But if we can move our life and our body from a survival response to a place of reparative athletic safety, and if we can deal with it with that traumatic



stage, you know, many patients are in a constant PTSD body because of the Lyme disease. And that's a great topic to if we have time out of touch. How do you change this? Because it's key to getting how we change our minds, approaching it like this.

## Thomas Moorcroft, DO

Yeah, I think it's so important and I mean so much to unpack. But one of the things is like, you know, I love multitaskers, right? So I love using something that I would agree. I use it as a binder quite a bit and I don't see the flares I see with a lot of the other binders. I still feel that I have a need for some of the other binders, but it's very interesting, right?

#### Isaac Eliaz, MD, MS, LAc

It's not a problem. Yeah.

#### Thomas Moorcroft, DO

Cool. And so when we bring it all together, like, you know, I was just thinking as you're talking about, hey, we get inflammation in Lyme and autoimmunity and COVID, but we have cardiovascular disease. I'm always I get in the medicine to help people live a long, healthy life, not to just treat inflammation. But it turns out that, lo and behold, I got in the medicine to try to bring down inflammation. I get. But when I think about it, it's almost like I think about it acutely. Inflammation can be good because it's a signal to start there's something wrong and the heal it with practice. I'll see if I'm using the modified citrus pectin say it almost sounds like I should do it all the time.

#### Isaac Eliaz, MD, MS, LAc

All the time. And if I should do it all the time, because as we age, our Galectin three goes up. As we age, our ability to repair injury of all kinds outweighs toxins. The genetic epigenetic is not as efficient, so we end with more inflammation and fibrosis. And this is why centurions have lower galectin three than people in the seventies and eighties.

#### Thomas Moorcroft, DO

Interesting. So can I do too much anti-inflammatory with this or. I mean, cause I'm always wonder, like, you know, there's the whole, like, hot, cold when you sprain your knee or your ankle or there's I can use ibuprofen. I can't do I is this galectin three pathway one where it's like I just want to keep it at a like if I use to practice, I'll keep it at a particular level that's optimal and not just make it not work at all. Like Is there a positive to having Galectin three floating around.

#### Isaac Eliaz, MD, MS, LAc

Post Galectin three is part of its survival helps injury repair and if it could have help just for a few minutes it would be great, but it doesn't get locked down and it's not an anti-inflammatory. I want to emphasize it regulates normal inflammatory response so it will attenuate interleukin six, you know, take it down so you don't have these, in effect, up a bit at the end if you don't get



the damage from chronic inflammation. But it's a tissue level where you need it. Galectin three will still be expressed, so you're not suppressing. The problem is not inflammation. Inflammation drives many diseases, but inflammation is not a cause of any disease. The cause of inflammation is a survival response. That's what causes it. So we're now going deeper. And of course, on a really deep level is how do you let go the survival response. That's our life journey, right? We identify with things, we hold them, we don't let go. And so in this sense, now I want to make sure I at least touch it because it's a key healing method for Lyme patients. So in this sense, when you take what infected introspection, you will still have an inflammatory response when you need, but you will have an inflammatory response without the consequences or with less of the consequences of the post inflammation, damage of the fibrosis of the tissue, damage of the abnormal collagen being being stimulated, which is very big.

What drives cardiovascular disease or deadly ejection preserved heart failure? It would drive chronic kidney disease. People don't realize 17% of the population it what drives Nash, right. The biggest epidemic right now in United States. It would drive strokes and never inflammation. And inflammation is driven by Galectin three. And so on top of it, as you said, we UI we multitask because we recognize that the one drug for one for when receptor is really not what happens in life. It's great for pharma, but it doesn't work. It works for a short time. So we always look at multi dimensional ways of addressing things, just like you and I have been in this conversation. So on one level it's this amazing gift from nature. It's a totally natural product. It's from the peel of the citrus fruit.

And in the same time is how we can shift our being from a survival reactivity to an open heart, love and compassion, responsiveness. And in this sense, we have different organs in the body that are responsible for different responses. And before I know how much, we'll have time to touch on this, but if we look at a lyme patient, the lyme patient, because especially the chronic claims, acute life is a very different story. It's an acute disease, aggressive subscriber to aggressive antibiotic plus botanical. It's a window where you can get rid of the infection. But once you miss it, I have yet to see people who are long term antibiotics, not they don't get better, but the buds that heal. And I got three wonderful women who were healed. You know, one of them is in residency right now. Okay.

So they completely healed. And the ones who took harder to heal was the one who got a few doses of antibiotics. But why? Because we have to treat the person, not the disease. And that's something that is so easy to really to really forget. So in this sense, talking to the chronic patient that the chronic patient can know that when they get some digestive discomfort and headache and joint pain. Now, for the last five times this this cycle of life is coming back. So they are mentally already on this highway. They're going to get sick. They're already there. And it's natural because they have this experience many times that are nervous system knows it becomes a habit. But every time we have a choice and a symptom can be just a symptom, it can go away in 5 minutes because everything changes. So the key thing in Lyme patient is for



the patient to truly recognize, realize and trust that they can heal. And often, you know, Tom often is you. And I know it's the biggest obstacle because people get used to the symptom. It becomes part of their life. It's hard for them sometimes to see themselves healthy. And so one of the key thing when I work with people is trying to have them visualize or see how it's going to be when they heal. And they do it also with cancer patients, what will you do differently if you are healthy? You know, somebody stopped going to school when they're going to go to school, what would you like to study? What would you like to do? How would you make a difference in the life of others and in your life? So then they're the focus on our disease, which is really what the Lyme needs. Just give it the focus. It's going to show up. It's muscles, you know, then suddenly just becomes a part of us and we and we move forward. And Galectin three doesn't let us do it easily from a biochemical point of view, because it triggers the survival response. This I'm not safe, you know. Yeah.

#### Thomas Moorcroft, DO

But just to interject, because I think this is this is the reason I'm doing this entire summit is this conversation, because I would say that at least 70% of every conversation in the summit thus far boils down to love and in loving yourself, realizing that your you are worthy to heal, you are able to heal. And I should say you're able to heal and you're worthy of receiving healing. And then what are you going to do with your life? So I just think it's so important and we talk a lot in the Lyme world and we kind of talk about, you know, poly vagal theory and the other balance of sympathetic fight, fight, freeze. I really like the survival piece because and the way you term it, because in my experience, nobody's stuck in one of these. They're in all of them. They're moving in and out. But you can tell that they're more trying to survive versus thrive. And that's the part that's really interesting to me.

So and like a friend of mine was saying, like, because of the way I talk, she's like, the healing is in the living. So many of our people are waiting until they live, they heal to actually decide what they're going to do when they heal. And I just heard you say kind of maybe the opposite of that. So if you're if you're taking some of the chronic Lyme and I know we've kind of talked about the meditation piece, which for me, I actually healed through yoga before I even met the right doctors. I was 70 to 80% better from within the body and heavy metals just by practicing yoga, which then allowed my brain to calm down. And I could finally, after decades, sit. So I was in fight. I was in survival mode before I got Lyme.

Didn't even know it because that's just how we lived. And I had to come down and I didn't have the benefit of the research you've done. How do you combine the use of something like a pack, the cell C with sort of intention or or self-worth and love work like that because I mean, this is cutting to the chase. I know we need to talk about neuroinflammation and sensitive people and we need to talk about the gut because these are all other reasons, all this works. But to me, this is the crux of the whole thing is can we help people who are stuck in survival get out of survival with a combination of things? There's a lot of my folks are just trying to share what's in my head



so that you to me, it's like they're like, I can't do the mental work. I can't do the emotional stuff because the Lyme is too bad. And what I just heard you say is we can find a way to get around, work around that.

#### Isaac Eliaz, MD, MS, LAc

This is really why I'm talking on Summit because the you know, I mean, I've spent you know, I've been meditating for almost 50 years. So I spend, you know, again, I'm talking about I spent months and months for years and years and know every year just on my own in the mountains. So hopefully I got a few things out of it and I better enough. So this is what makes me really what drives me to talk. And I taught until now for about a decade many in Israel way to thousands of people cancer patient chronic fatigue patient with the amazing stories of retreat. And I hope just to offer something thinking start offering something the United States because of all this I feel I have a responsibility with all this unique training. But basically we have to recognize our survival the way we think. Our survival, which is built within us genetically and mainly epigenetically, is a son, an immigrant grandchild of Holocaust survivors. And I tell the story in my book, and it's built within us.

And every cell in the body wants to survive every chance the body has. For me, I look at cells is people as living organism, but always did in the a lot of what I teach is not because I read research, it's insight. The research just supports my insight. I work in an opposite way. So the cell is a membrane. It decides what comes it, what it wants and what it throws out. And then what doesn't want it throws out and it goes to the lymph system, to the Venus system, comes back to the heart. So now I take nourishment and I push away toxicity. The only organ in the body that behaves differently is the heart. The heart gets all the dirty blood from everybody. If they are deemed accept the dirty blood from everybody, it would we would be dead. The heart in order to pump clean blood needs to get dirty blood.

What does it how do instead of resisting like a cell will do it connect with the universe through their breath. Our drama is meaningless for the universe in its infinite spaciousness and infinite love and compassion. It can handle anything as long as we respect the environment, of course. And then the lungs help the heart. It does this exchange transformation. And then the heart gives blood, and the heart gives clean blood with out discrimination. The aorta is, you know, well is the stiff artery. Blood goes everywhere. And once the heart did its job and it relaxes, who does it now? Anatomically, first, it knows itself through the coronary arteries.

So this is self-love is part of loving others. And in order to love others, it's not self-love because of narcissistic approach. And it's interesting, if you think about it, the heart is the only organ that nourishes itself outside of the organ. And after it finished its job, no other organ does it. The self. Listen, this is in the end, the giving is a survival of the heart. When it stops, we die. So when we connect with our heart, it doesn't make far ahead. Can't concentrate. It doesn't matter if it's foggy Doesn't matter if we have a headache Our heart is still flowing. It's very hard to change



the mind here because what is health? Health is with everything. When everything flows, flows. No hyper viscosity does not sclerosis. There's no turbulence in the blood. Everything is flowing. But our heart does exactly the opposite. Right? We are talking and you and we are analyzing. You are listening to me and you analyzing. I can see this and your thoughts are going well. The moment you think about one thing, well, the flow is being disrupted. So it's very hard to create flow in the mind takes a lot of training, but the heart, it flows naturally. So when we connect with our heart, we connect with the ability to transform difficulties and poisons and struggle into love, compassion and healing, which physiologically, at least is already built within us. That's what I mentioned to you about open heart medicine that you are going to experience soon. Yeah. So this is the point when the patient connect with this, anything and everything is possible. And I can tell you I will.

Before I went to two Chinese medical school, I had to pick this school in California. I came from Israel and I went to Lake County for a night. And I meditated outside on my way to the airport. I got to Israel, hundred and four feet stiffening. Luckily, a brilliant a brilliant clinician took did a dark field of my blood and had a rare rickettsia disease liver enzymes 10,000 occasionally and I didn't respond. Luckily me two dogs who cycling after two weeks. They gave me chloramphenicol which is illegal antibiotic so dangerous for two weeks and I got out of it, but I wasn't getting out of it until one of my students. I felt like I'm dying. You know, the thought, I mean, with such enzymes deliver this is extreme. And I remember one of my students called me, I think, what happened to you? Where's your mind? That was like in my late twenties, you know, and I remember the shift in my thinking and the and it took me many to here. But you know what? I even never even checked if I also had Lyme disease didn't matter for me. I was functioning. I was making a difference in the world.

I was growing. And it took ten, 15 years until all the symptoms went away. And so the key thing is to understand that because everything is changeable, everything is possible. The moment we get stuck and fixated in a place we are not supposed to be stuck. This is elevated TGF better one. This is fibrosis. This is a microenvironment which is not normal. This is a biofilm that now is not functioning well. This is a manifesting action. So we want to dissolve the fixation from the point of view of our mind, our heart. We want to use supplement that will do it when they are extreme cases. We do need to revert to things like therapeutic of a resource where we filter all these oxidized lipids and inflammatory compounds from the plasma. And it's not going to come back. It allows the body a chance to recalibrate.

So for certain people there is a capacity and I wasn't one of them. I had to work hard to get to where I am. They have the capacity to let go very quickly, you know. Right. We have such patience in certain people. It's hard. They need more help. But eventually this fixation, this holding, the stuckness can dissolve. And when we realize and recognize that this is the only truth, that everything is changeable, there is no argument, no matter what is your belief system, everything is changeable. Nothing stays the same. Quantum mechanics and any philosophy.



The moment we tap into this very basic truth, we allow that change to happen, which means that we have a choice in the next breath, in the next thought, and eventually it's going to change the way our gut is dealing with its microbiome, a more friendly environment, and our blood brain barrier starts functioning better and the brain doesn't respond with no inflammation in and within it. We have to remember that it's not we're not in control of everything. We are bombarded with heavy metals, with mycotoxin, with pesticides, especially glyphosate when doing a lot of research. And because I little bit overlooked it, I mean, many people have overlooked it. We check it.

But what are we doing with it? Right. So I just finished developing a formula called Life for Detox, and initial clinical results are very good. We are actually reducing life of the significantly. It's going to be one of my bigger contributions, I think, because it's such a problem. And so we have to understand, we do have to remove anything that disrupts our health and some of it is toxin, some of it is emotional toxin, and some of it is our mind being fixated on certain patterns that helped us to survive when we needed. But now they are no longer needed. And with Lyme, it's a key point for the patient to see themselves healthy.

#### Thomas Moorcroft, DO

I think it's so critical because as you're talking, you know, it is so easy to drop into myself and just kind of listen. But there is also that, hey, what you know, obviously, like you said, there's a lot of thinking going on and I'm like, it's so critical because to me, we talk so much about placebo, right? And we have to it's so powerful. We have to control for it in medical studies. But to me, it's like the placebo isn't 30% or 33% more like 80, you know, and I just think we almost used the word as a negative. I'm like, this is great because placebo means I'm in charge and I can change my mind is changeable. So a lot of what we see, Isaac, is people do get fixated on the label and what just I always like to try to highlight what I'm hearing from people and make sure we've gotten it right for everyone. Listening is what you're saying is like, Yeah, these are important, but it's almost more important for the doctor to know what you have. Your goal is to what are you going to say?

#### Isaac Eliaz, MD, MS, LAc

So it's important for the doctor to let go because the lyme doctors can be fixated on the patient having Lyme disease. So it's also we as doctors have responsibilities, we see the patient and not to label them because the moment we label they okay this patient I have it five patient ladies are going to know. No, it's important for us as doctors to allow the patient to let go, to allow for us to realize everything is possible. We don't know what's going to happen. We just have to give the patient the spaciousness. And the possibility for this to happen.

#### Thomas Moorcroft, DO

Would not agree more. It's a very it's like in this field, I get a little crass and like, I really don't give a damn what's wrong with you? I might need to know what it is, but I'm just I don't care what



the label is. I want people to get better and I want them to live their amazing life. And yeah, I mean, I think it, it, I think it's so well said creating this space together for the healing and and I do you see a lot of and this is one too since you brought it up. I always have to be careful. But everyone here knows me already. By now it is just so irritating to me that everybody keeps telling you what you have and how long you're going to be sick. And it's like you need all these. I'm like, No, how do you know that? I literally know people who should be alive by based on what I'm told, because of their age and COVID and they're no longer alive. And I know people who should be I've seen people in the hospital like they're everyone agrees there's no possible way for them to live a miracle.

Yet I've seen miracles left and right. It's like what? It's like. Like you said, it's all you can heal. But one of the things that I think is important to highlight everyone is if you see yourself, is still sick. It's a self-fulfilling prophecy. If you're like, I'm never going to get better. I'm a lymey, I'm a moldy, I have my cast. Like, these are things that may be occurring. I think it's so important, Isaac, to, just like you said, create the space, allow the healing to occur and get rid maybe get rid of some of the labels and just let it happen and dove into that. I mean, that's kind of like my whole goal for this entire summit, I think you just encapsulated is to create the space.

#### Isaac Eliaz, MD, MS, LAc

So, you know, I can't tell you how true and know you think about it what happened when we were when capsule fixation integrated books around it fit biofilm that the plaque where the lyme is hiding in until we and then we hide it and we're not in touch with it but it's moment in the moment there is crisis in the lyme field. We're talking about lyme today. Of course, cancer is exactly the same or other thing in the lyme field. Oh my God, they are stressed, they are in flames, they are weak, they are in trouble, boom. And so this idea, we have to break exceptions and we have once we break them and we break them sometimes by breaking the biofilm with respect to soil, by changing our diet, by hydrating well, by detoxifying, by changing our mind, everything goes back. But I always say my only protocol is that I have no protocol. That's my one principle.

#### Thomas Moorcroft, DO

Yeah, hundred percent. And I love it. You know, and it's interesting because like, I find so many little of these nuances where things look similar, like, hey, our emotions, we've created a biofilm around it are this or that and it's like really tut getting plugged, touched in touch and it's, it's interesting. So I have a question like one of the things I see and we all and a lot of people including myself, have attempted to explain some of this is like, you know, when we talk about safety in survival, I don't really like that word a lot because a lot of my people I talk to in their heart, they're just like, I feel safe. In my mind, I feel safe. But then there's this part of their nervous system that does not feel safe. It's still in survival mode, but cognitively they're like, Hey, I'm fine, I should heal from Lyme. So I see some people when they're moving from, you know, a state, a lower state of health to a higher state of health, they'll be like, they'll make the



breakthrough. And then invariably, some people going to be very careful with my word that some people will a week or two later, just fall backwards repeatedly. And I wonder kind of like what you're seeing in your experience and what might be driving through that survival paradox.

## Isaac Eliaz, MD, MS, LAc

What a great, great question. So one thing we have to do, there are multiple levels. While it's a grid that's like a foot that like slowly retreat actually. So it's so deep and what it is for people because there's so many layers to. Let's talk about the nervous system so in this whatever system is programed to remember and to repeat itself the way they know the nervous system is code is like paved highways. So we want to melt this car. So the expression is so physical car, right? That we do like neural therapy, very important in life, but also emotional scars. So the person feels better and then something happens and it triggers a memory, it triggers a pathway in the moment. And they were transmitted changed everything changed. So this one, one specific level. The other level is that one of the issues in Lyme patients is that they have impaired detoxification systems, as you know very well, and they still have some toxic load. So what happens now is they feel better.

They are they turned on their mitochondria, but they haven't had enough of an antioxidant reserve to deal with the increased metabolism. So it's very important to increase at the right pace. And as you create more oxidative stress, which is essential, right or menses, you know, the benefits of putting the body under stress. You want to make sure that you give the body enough support in detoxification in order to be able to handle the increase in pace. Because often we overdo it and the regular person, we will have a recovery of 20 minutes and the patient will have a recovery of a month. So of the metabolism changes and we move into glycolysis and lactic acid. So as you we are getting better, we have to make sure that we don't become just very active making life, but we make sure we exercise, we make sure we exercise in a way that we do more exercise. We slow down, we make sure we oxygenate the body well.

So from the beginning you are limited. Try to exercise with oxygen. We make sure that we take botanicals that helps post-exercise inflammation pick the soil is a key one here. Knockhill is a key one in a lot of studies. Penn Basic is another one. A consuming Berberine things that help you recover your metabolism. And the other part that we have to really recognize, we are made from countless people. If every generation is 25 years in average, forget about the last 50 years going back thousands of years. If you go back 2000 years, infinite number of people have made us the great two to the 80th by a power. It's an infinite number, right? Basically, we are an expression of infinite people in our DNA and more important in our epigenetic behavior.

So often a response that we say, why did it happen? Can be it. It a culmination of 10 million people between 33 generations back in 12 generation because it came together for a certain reason and express themselves. And we and it's expressing itself right now. So we have to understand that sometimes what comes up is bigger than the moment and we have to accept



it. We have to let go of it. And when we connect with our heart for healing, we create a multi-generational healing. Because when we feel the connection, when we send love, healing, compassion to others, this other than not just outside in our mind, they're inside our cells now, inside our DNA, they are determined no epigenetic. When somebody is very upset that you they are affecting you. It's not like I don't want to take the negative energy or you're taking it already. It's got to do with, you know, and think that they are upset at you. It's already affecting you. But if you can use this as wood to the eye, which is what the heart does and it opens your heart to yourself, to them, to anyone who is having difficulties since suddenly we are not contracting. And so we need to find the tricks, how to balance out.

And the truth is that the LONG-COVID has created really a new medicine in your generation of millions and millions of people with chronic illnesses in the lyme patients, anybody who has other infections, as we know it, triggers them or very often, you know, because it's not it's not selective. So it's an amazing journey. And I think we learn a lot out of it. And people like us have to lead the way. And because there's not going to be a magic bullet. So in this sense, yes, it's a journey and the pacing is very important. So the pacing means you pace yourself not too fast, but you also don't contract because like patients often will become overly cautious, overly afraid to do something because you know so well.

And then our activity is lower than our capacity. You can see it in the diagnosis in Chinese medicine. But if we our activity is more than our now, we are going into overdraft. And if the liver is not really working well in cleaning and in producing, we're going to get in trouble. So it's really a issue of pacing. And yeah, it's one of the topics I love to work on with patients and and a lot. It's a great point. It's a key, key point. It's it's easy to get not always easy, but to get somebody better on the short term. You know, I always say I'm a long term doctor, but, you know, it's really let's see, somebody getting better over ten, 20, 30 years. You know, you need to be able to pace them. And the point you brought is a profound point. And there are no simple answers, you know, because I just like you and I said, every patient is different.

#### Thomas Moorcroft, DO

It's so critical, though. And I really appreciate being able to dove into it because I see that that's it. We're not short on new things to try and new things to buy online. But what but I think the the idea of connecting to something that helps, you know, attenuate how the body functions optimally, being able to drop in and like your highlighting of how the heart works and being so open to whatever comes and then changing it by connecting to the universe and making that changes is so critical. And I just I will admit in the last couple of weeks, I've had some frustrations that the handful of people I'm working with isn't. My goal is to be the long term pacing doctor, and I've had a few people just do pacing, just kind of they they it's hard, you know, people are at home, their child's suffering, and they're living it every day. So, I mean, I understand that piece of it, but I just think the way you highlighted these critical healing points are it's just so optimal. It's just we all need to hear it.



#### Isaac Eliaz, MD, MS, LAc

And thank you. And, you know, it's an integration of doing something that helps us in the moment and realizing that our actions affect the future generations related to us and the generation behind us because of epigenetics. And that's the multidimensional interdependent between all of us. And our power is part of our healing to heal others, because the electromagnetic field of the heart is bigger than the body, the way we feel and affect the whole field. And that's why we are all healers, healers for ourselves and healers for others. We all fall into our pitfall, into our fixation. Until we activity ice, you'll fall a lot, you know, it says survival. You know, I come from these it's already built in survival. And yet we always have a choice because we can always connect with our heart in the moment we connect with our heart. The heart is no concept. The heart just takes what others don't want and gives. So that's where the real healing happens. And within it lyme patients also have to create a healthy boundary that we didn't get into. I don't want to get we already.

#### Thomas Moorcroft, DO

Right, right.

#### Isaac Eliaz, MD, MS, LAc

Yeah, exactly. A huge topic with very specific acupuncture and the different ways of creating boundaries. You don't have to contract yourself. That's a mistake. So but the bottom line, Lyme is a treatable condition. People can heal from it. And the door is always there. We just have to find it. And it's not always where we think it is. In fact, it's rarely what we think it is. And as long as we are open and we're not fixated, it will express itself.

#### Thomas Moorcroft, DO

Amazing, I think. I mean, it's so cool to hear all these things that go through my head. I'm like, yes, it's almost like stop looking in the door. Will will appear.

#### Isaac Eliaz, MD, MS, LAc

Open.

## Thomas Moorcroft, DO

But it's so good. So as we kind of wrap things up and I appreciate you taking us on such a tour between the science and how this policy works with the Galectin three pathway and your survival paradox, all the way to opening our heart and, and, you know, allowing it to just pass through and give back through the heart. Because I will say the epigenetic piece of this whole thing is something that I'm learning so much more about experientially. Like I've cognitively, I get it, I know the research, but such a big deal.



## Isaac Eliaz, MD, MS, LAc

So what is the best time? You know I, I have been drawing diagrams of multi-generation now for decades before the research was out, but it was out of my meditation experience, you know, it wasn't that. And then suddenly people thought, I'm crazy. Maybe I am, actually. But anyway, suddenly science came, you know, and we know. So the best is to know once we experience it right, it becomes a different story for us. It's still a lot for us.

## Thomas Moorcroft, DO

So good. I love it. And it's like, that's been my thing. It's like we kind of experientially get it and the science ultimately catches up. So but it is such, such an honor to be able to have this conversation. I feel like we could talk about each one of these topics like you said, for an entire retreat for each topic. But well, maybe we'll work on that but I'm so I'm sure we've mentioned packed this all see a bunch but and it's something that I use in a daily basis and I use with my patients all the time so I'm sure though but there's also other things you're working on. If people who are listening are really interested in learning more about what you do and, you know, even practice, see where can they find out about you and all that kind of good jazz so they.

#### Isaac Eliaz, MD, MS, LAc

Can go to dreliaz.com or dreliaz.org. And I have a high quality newsletter with a number of writers, scientific writer that help they can of course go to, to pick it up so that they can also go to my clinic. Amitabhaclinic.com for treatment, but if they go to to my website and I do recommend my book and not because it's my I finally wrote a book it does give a truly offers a new paradigm and and it's inspiring because what I hear from people it changed my view on health and disease and it allowed me to heal in a different level. So and I took the time to read it to write it. Of course, I want it to be read by as many people as possible. Yeah.

### Thomas Moorcroft, DO

That sounds great. So everybody, that's the survival paradox. All the information like usual for we're going to throw up on our summit resource page so you can find everything. But definitely check out the survival paradox and Dr. Eliaz. And then also again, like I said, this LC is something that I use my friends, use my patients, use it when I was I'm always, as you all know, like I'm resistant to the change until I see that it's a needle mover because there's so much crap out there, to be frank. And when I finally licit, there is a critical mass of people said dove in the using practice are one of the few things that I would put the label game changer on in our clinical practice. Helping people like you said. Dr. Eliaz, heal Right. We're healing from Lyme. We're not just putting it in remission and hoping it's not coming back to bite us in the ass. I've been symptom free for over 14 years now. I have a whole bunch of people who are in the same boat, so I'd like to say thank you for your contributions to our summit and the conversation today. And anytime we can talk about the heart, I'm all in.



## Isaac Eliaz, MD, MS, LAc

I actually want to bring me. Really.

#### **Thomas Moorcroft, DO**

Yeah. And again, thanks for all your contributions to science and to bringing those two sides together. Just to me, it's such an honor to talk with someone who is true to the science and truth and to what's pure of the love in your heart, and put those together and it can actually be done. So if you guys are looking for someone to inspire you along that path, you've been listening to a gentleman who does that for me all evening. So thank you so much for being here and such a great honor.

### Isaac Eliaz, MD, MS, LAc

Thank you. Thank you.

## Thomas Moorcroft, DO

And everyone, thank you for joining us for this episode of The Healing from Lyme Disease Summit. And I'm Dr. Tom Moorcroft. I sign off for this one and I look forward to seeing you in our next interview.

