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DURATION

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23 SPEAKERS

Del Bigtree

Jenn Sherry Parry, Executive Producer, The Highwire

Elizabeth Barker, Valedictorian at Rollins College

Dawnmarie Gaivin, AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Bo, Educator of Autism and Apraxia in Hawaii

Jenny, Elizabeths Communicator

Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Ron Johnson, (R) U.S. Senator for Wisconsin

Donald Trump, 47th President of the United States of America

Female News Correspondent

Male News Correspondent

Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Male Speaker

Eddie Bravo

Joe Rogan, The Joe Rogan Experience

Female Speaker

Dr. Francesco Marincola, M.D., Chief Scientific Officer

Dedrick Allen Pery, TAM Co-Founder

Dr. Michael Liebman, Ph.D., Scientific Advisory Board

Dr. Vijah Mahunt, MS, Ph.D., Chief Technology Officer

Scotty Nelson, TAM Co-Founder

Dr. Ali Asadi, Ph.D., Chief Innovation Officer

Lee Bigtree

START OF TRANSCRIPT

[00:00:05] Del Bigtree

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[00:00:44] Jenn Sherry Parry, Executive Producer, The Highwire

Let's do this.

[00:00:46] Del Bigtree

Action. Good morning, good afternoon, good evening. Wherever you are out there in the world, it's time for us all to step out onto the Highwire. Well, today is World Autism Day. I guess many of us don't really pay attention to that, but it's a very important day for me and for everyone here at The HighWire. This is also the beginning of Autism Awareness Month, as I was contemplating what that means for me and the work that we've done. I actually looked up and said, well, wait a minute, all of this started when I made the documentary VAXXED didn't that release right around now? And I realized just yesterday was the premiere opening of VAXXED in New York exactly ten years ago, on April 1st, we were standing in the Angelika Film Center for the premiere release of VAXXED after it had been unceremoniously kicked out of Tribeca Film Festival, making it one of the biggest media stories in the world. I'll never forget the lines that were wrapped down the block and during. We're going to be doing Q and A's that entire day after the screenings. And I remember as I stood in front of the audience at the second screening, it occurred to me, I wonder where all these people are coming from. What is this interest in VAXXED? And so I asked the question, Will everyone in the room with an autistic child or family member please stand up? And three quarters of that audience, about 150 people, about 110, 20 of them stood up.

[00:02:36] Del Bigtree

And I felt like the oxygen had been sucked out of the room. I obviously had made the documentary with Doctor Andrew Wakefield. I had interviewed nearly a dozen families and gotten deep into their stories, but I didn't realize that this issue was as big as it was. I mean, you can sort of think about the numbers, but to just put it into some perspective, I spent a year on tour with VAXXED. We covered the entire country and Canada, and I asked that question at every Q&A after every screening, 4 or 5 screenings a day, five days a week for almost an entire year. And that question was answered by three quarters of the audience standing up everywhere we went, which meant that autism had become far more than what I think we could call rare. We were moved out of the 1 in 10,000 cases that were first assumed to be the number somewhere around the 1970s. Of course, all of this is launched by Leo Kanner, who first discovers 11 children that are brought to him and recognizing this condition back in 1943, a condition so rare that people traveled all around the world to meet Kanner's kids.

[00:03:54] Del Bigtree

So when we're told autism has always been here and it's always been in the exact same prevalence, which currently is 1 in 30 nationwide, approximately, some will say 1 in 34, 1 in 28. The number we are all paying the most attention to is in California, where the boys are being diagnosed at 1 in 12 point five, the highest rate anywhere in the world, and that's currently amongst their four year olds. And it's believed that you don't get all the diagnosis until eight years old. So that number could even increase. So how is it we just happen to miss this since the dawn of man? How is it that Leo Kanner needed people to fly all around the world to look at this thing they'd never heard or seen of, when it was really as prevalent as 1 in 12 point five boys in the 1940s. Obviously, there's discrepancies between the realities and what the propaganda and the machine, whatever you believe that to be wants us to believe on this journey. We've interviewed scientists from all backgrounds on this issue. They've sat at this table. But probably the greatest miracle I would say, that I have reported on in these ten years happened just a few years ago, when the concept of Spellers came out, a new way of communication that was allowing these children, many of them adults at this point, to unlock their ability to communicate.

[00:05:23] Del Bigtree

If you watch that story of J.B. Handley and Jamie, J.B. didn't know if his son had a an adult IQ, a third grade IQ, was it a mental deficiency, a psychological issue? There are people weighing in on all sides, but once Jamie, his son, started using spelling to communicate, within a very short period of time, it was discovered that he had an exceptional IQ. Jamie, I think within a year less than two went on to college and was taking courses in calculus. We featured spellers here on this show first and then eventually their documentary. It is one of the most incredible stories I've ever reported on in my life. And, um, it seems that there are those that are trying to stop the story from getting out. There are those that don't want you to believe that it exists. And now there are laws apparently trying to be passed so that this communication technique does not see the light of day. This is how we're starting our story today. Take a look at this.

[00:06:29] Elizabeth Barker, Valedictorian at Rollins College

Today we celebrate our shared achievements. I know something about shared achievements because I am affected by a form of autism that doesn't allow me to speak.

[00:06:39] Dawnmarie Gaivin, AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Elizabeth Barker blew the crowd away with her valedictorian speech at Rollins College. Bo often goes viral educating people about autism and apraxia from the shores of Hawaii.

[00:06:50] Bo, Educator of Autism and Apraxia in Hawaii

Shannon, you are not just beautiful. You were kind, patient and smart. A real triple threat.

[00:06:57] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

It took him four nights to write that speech for his dad's wedding to his new wife. It went viral and got 9 million views. There are millions of non-speakers in the United States alone. And I believe. And my goal is that every single one of them at least has the option of learning to spell or type to communicate. Some I believe, some I o. When families come to you and say my child is spelling or typing to communicate, that is the evidence that the spelling and typing to communicate is real. We don't need a 20 year long \$1 million study that says this is a real thing. You can observe a speller doing it and you know that it's working. Do we have non-speakers who are being denied access to letter boards and keyboards, because we're being told that these things are not evidence based. There was a time when sign language was debunked as being not authentically the deaf person's communication and R and E thing, cause non-speakers learn nothing in school. Teachers are shocked at how smart we really are. Something like that. Non-speakers today are being erroneously labeled as intellectually disabled because they don't have speech.

[00:08:13] Elizabeth Barker, Valedictorian at Rollins College

Sometimes it is the people no one imagines anything of.

[00:08:16] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

They just need a communication method that doesn't involve fine motor muscles.

[00:08:20] Elizabeth Barker, Valedictorian at Rollins College

Who do the things no one can imagine.

[00:08:22] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

That's what spelling does. By using the gross motor of the shoulder of reaching towards a keyboard or a letter board. After 11 years of doing this and working with over 1000 non-speakers, there hasn't been a single student yet who could move their arm that couldn't get to a board that has the full 26 letter alphabet on it and spell on that board. People might think it's Unusual that someone's ex-wife would help their son write this speech for the new bride in the wedding. Those 9 million viral views. I relish those because it means that my son has been heard. I would like to see Non-speakers have the freedom to choose for themselves what methodology they want to use to express themselves. It feels like a human right to make that decision when they can communicate. Finally, people hinge on every word that they have to say.

[00:09:14] Bo, Educator of Autism and Apraxia in Hawaii

Let the revolution begin.

[00:09:18] Del Bigtree

Well, it's my honor and pleasure to be joined by some of the stars of the documentary spellers. I'm joined right now by Elizabeth, who is also on the Interagency Autism Coordinating Committee, which is a huge honor. She's one of the autistic representatives now on that committee for Robert Kennedy Jr's HHS, which is just a phenomenal thing to see. She will be helped by Jenny, who will be reading some of the things that she types out as we have this conversation. Of course, I'm joined by Dawn Marie, who is the executive director now of Spellers.

[00:09:57] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Spellers. Freedom. Foundation.

[00:09:58] Del Bigtree

Spellers. Freedom. Foundation. Um, so to begin with, um, what is the success of, you know, the documentary? I know that it really introduced this idea to the world. We were happy to be a part of it, but have you seen a growth in the amount of people that are using this technique?

[00:10:18] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Absolutely. And launching the documentary here on The HighWire was a huge kick start to letting the world at large know that Non-speakers are in there, because a lot of parents didn't know that that's that was J. B's intent behind making the documentary was like, why did I have to hear about this from another parent? Like, this should be in the schools. This should be in, you know, public media. So hence came the documentary and thousands of Non-speakers have actually started typing and spelling to communicate since, which I think is part of what's going on now, is we've hit a little bit of a critical mass that it's no longer this thing that everyone was ignoring or happening off on the side. There's now thousands of spellers or typers around the world, and people are noticing and they're asking for things and they're asking for support from from state, you know, funding sources and whatnot. And it's getting a lot of attention.

[00:11:07] Del Bigtree

Well, it's also needed to get an education right and to get into universities and schools. They're going to need they have this ability. The school has to be able to work with that tech technique.

[00:11:17] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Correct. Absolutely.

[00:11:20] Del Bigtree

Elizabeth's typing her answer right now. And I just also want to say that Elizabeth did give us an opening statement that I'd love to hear. Um, so just let's read this.

[00:11:29] Jenny, Elizabeths Communicator

So Elizabeth typed, there are tens of thousands of us. We are a force of nature.

[00:11:34] Del Bigtree

You sure are. That's, uh. It's such an incredible miracle. I did skip your opening statement, Elizabeth, let's listen to that.

[00:11:43] Elizabeth Barker, Valedictorian at Rollins College

Del. Thank you for having us. Three years ago, the Highwire showed the spellers movie and helped us launch a revolution for Non-speakers rights. Since that time, we have grown to tens of thousands of non-speakers around the world who spell and type to communicate. We have become a force for change, and now the corporate interests who make money on keeping us disabled have infiltrated disability offices across the country to silence us. They want to keep giving us ABA and speech therapy for thousands of hours, even when it is not working for us. They say our communication must be validated and that is illegal. The Americans with Disabilities Act gives disabled people the right to communicate in any way we choose. We have a bill in New York that affirms this right. And the state Disability Office listened to the corporate interests and amended the bill to take away our rights. But we fought back and got the amended bill set aside. Now we need your help to restore the original New York Communication Bill of rights. This discrimination is happening across the country, including California and Massachusetts. It will come to your state, too, if we don't stop it in New York. Families need choice and the freedom to help their children learn and grow. Communication is a human right.

[00:13:03] Del Bigtree

Now. Elizabeth was valedictorian in her school, which shows just how successful you can be. Using this ability to communicate. Um, and so, you know, this story, I actually, I said yesterday as I was watching your promotion, I let all of my f bombs go before I got on the show because this is why I do what I do. It's so infuriating. But it happens in every part of medicine. When I, you know, I started my career on the daytime talk show, the doctors and people would say, what did you learn doing that show? And I said that the slowest moving animal is the evolution of medicine and science. That every time I found someone that was really cutting edge, really taking things to another level, whether it was a surgery or a technique or being less invasive, not only were they not those ideas not being adopted by their peers, they found themselves in lawsuits. They found their licenses under review. There's just this thing that change comes so slowly, and this sounds like that exact story. So, you know, you say that there's, I guess, financial interest. There's a whole world now that makes a lot of money off of ABA therapy. Could you help me understand the difference between ABA and spellers a little bit?

[00:14:27] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

I mean, I see there's a potential for an amazing partnership there, right? I wish there wasn't a divide between ABA and spelling and typing. They. Because they are so trained in like, for instance, breaking down a task into its minute motor steps. And if you think about what it takes for a non speaker to learn to type, they have to learn how to coordinate their vision and moving their eyes with their hand to accurately get to letters, because until they're accurate, they're not spelling anything, right? They're not communicating that way. Right? So there's this whole stage in acquisition when they're learning to type and spell where we're just teaching. It's like teaching baseball. We're teaching them to get their eye on the ball and their and their swing the bat and make contact. And ABA providers could be really good at that, right? Yeah. What's even worse, though, is that in that field, there tends to be a presumption of incompetence and that they don't believe that non-speakers are intellectually in there. It's sort of like the cart before the horse, or they're letting the outsides dictate what they think is going on on the inside. Right? And that's the mismatch. So until they're willing to suspend that old belief and say, look, it's a motor planning disorder, right?

[00:15:41] Del Bigtree

Has an intellectual disability.

[00:15:43] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

It has nothing to do with how their brain is functioning. It has to do with whether their brain can control their body's movements. Elizabeth started typing at five years old, so she's very proficient at it now. But it didn't look like this when she was five years old, right? So there's stages that you have to go through as a new type or speller. Um, and even the documentary just showed everybody at the finish stage, but there's this acquisition phase and I think that would be nice if the ABA industry would be willing to collaborate with us on, let's use this billion dollar industry for the greater good of Non-speakers.

[00:16:19] Jenny, Elizabeths Communicator

Elizabeth Elizabeth typed, we are. We need teachers and therapists to presume competence. We are capable human beings.

[00:16:28] Del Bigtree

Wow. Thank you Jenny, first of all, for helping us communicate. Um, what Elizabeth is, is communicating to us. I can't imagine what it's like to, you know. And so just so I can understand this, if I remember correctly, really the thought in spellers is that there's been an interruption of fine motor skills, correct things that affect your tongue or even writing, you know, but that what you've looked at is if we took gross motor skills, larger muscle movements, and pointed at a letter board, that they're able to make that communication easier and so that they can show you their intellectual ability by being given an avenue through their gross motor skills.

[00:17:12] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Yes. But realize too, that like IQ tests or any standardized test requires proficient motor skills, right? I got a point to the right flash card, or I have to put the ball in the cup. Like even those tests that are designed, these standardized exams designed to show intellect, fail our non-speakers. Right, right. Because no one's teaching them the motor stuff, like no one's teaching them in early intervention. If we took those 40 hours a week of ABA and we worked on motor planning, like how do you learn to do all these sequenced activities with your body so that your brain can control your body? The outcomes would be amazing, right? More autonomy, more agency, more communication, all the things because that's the core deficit. But we didn't really know that. Like, I mean, this is maybe ten, 15 years. Yeah. You know, that it's more mainstream that people know. Um, before that we just we didn't know. Right.

[00:18:06] Del Bigtree

Yeah. I remember one of the things that many of the parents, whether it was Jennifer or JB, um, they said the moment their child started communicating, there was a real concern over how many things did I say and thought weren't being understood in front of my child.

[00:18:24] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Right.

[00:18:25] Jenny, Elizabeths Communicator

And Elizabeth just typed Non-speakers are seen as low functioning and that is false. We are just like you.

[00:18:36] Del Bigtree

And you said something in the video and you also said in the documentary. Um, but that anyone who can move their arm can make this communication. I know that's hard for people. I mean, there's very severe people that are self-harming that are having all sorts of issues, but you've managed to even help individuals like that get to a place of communication.

[00:18:59] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

I haven't had someone yet that we haven't been able to get to a board that has the full alphabet on it, right? Okay. There are lots of typers now who are typing autonomously, meaning it's in a cradle, no one's helping it. No one's holding it as a communication partner. Um, and, and those folks hopefully are helping to validate it for, for those spellers and typers who can't get to that level of autonomy, right? Because they all started at the same square one, right? They all started with an alphabet board that was actually split across three boards. So the targets were really big because your eyes are actually controlled by those fine motor muscles. Sure. So we can't take that out of the equation. You have to find the letter you're looking for, which is why it takes time to learn. To do this accurately is like we can't remove all the fine motor from it, but we remove as much as we can so that we don't spend too much time learning. We get to the communication part. Um, yeah.

[00:19:54] Del Bigtree

So, so let's get to what's happening now. And part of it's probably because of the success that you've had, I guess no one was paying attention when there was 100 children doing this. But now that you're moving into tens of thousands, it's going to require change on institutions, on insurance systems, right? Or at least an understanding of what's taking place here. So.

[00:20:18] Jenny, Elizabeths Communicator

So Elizabeth typed must be on the same wavelength as her non-speakers are being discriminated against nationwide by state agencies wanting to validate our communication.

[00:20:33] Del Bigtree

Why is it not good enough that Elizabeth is sitting here communicating right now? I mean, just what's up with that? I know. I mean, you could. I know that you could put several spellers here that are part of the document. They've sat here together all communicating on this stage. But they're they're giving. What is it you need? Double blind trials or something?

[00:20:54] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Allegedly. But I don't think we need a 20 year, million dollar study to prove it's working when you watch it working. Right? And even by, you know, every field, whether it's medicine, the American Speech Hearing Association, all these different agencies have a definition of what evidence based practice or empirically validated practice is. This meets their criteria. There's plenty of research showing that these spellers and typers are the authors of their own work, that their intellect is intact. They just keep moving the bar like they're going to keep telling people it's not validated. It's not evidence based when it is evidence based. It's just a narrative that somehow leaked out by somebody and people are buying into it.

[00:21:32] Del Bigtree

Alright. So who owns a ABA, a because that just sounds like giant mundane interest. It just sounds like the same corruption. We're watching Bobby deal with. So can we name it? Who is it? Who's who's behind this?

[00:21:43] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

I mean, what I've heard is that literally hedge funds now own.

[00:21:46] Del Bigtree

Like BlackRock.

[00:21:47] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

I don't know.

[00:21:47] Del Bigtree

And these big. Just bought into I mean look it's got to be hugely if we are at 1 in 30 children now being diagnosed on the spectrum, 1 in 12 point five said in California, this is a booming industry and obviously running all these kids through ABA. But ABA goes on and on. I mean, I know there's been frustrations how long it takes, and so many of the spellers come out and say, I'm tired of being talked down to.

[00:22:13] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Right,

[00:22:13] Del Bigtree

Right,

[00:22:14] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Right. That's why I keep saying there's an opportunity here, right? Yeah. If we could just presume competence and actually start teaching them motor skills, then the evidence is right there. Like you said, the kid starts learning and I say, kid, the kid, the adult, the the non speaker starts learning to type and spell. Then you see for yourself. Yeah. Elizabeth had something.

[00:22:31] Jenny, Elizabeths Communicator

Okay, so Elizabeth typed the corporate interests want to keep us disabled. We need Secretary Kennedy to issue federal guidance to follow the Americans with Disabilities Act.

[00:22:44] Del Bigtree

So what Elizabeth is saying then is that we don't need a new law. We need to adhere to the laws that exist. Sounds to me

[00:22:52] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Right. The state agencies have started ignoring the Americans with Disabilities Act, which says people are entitled to use their primary and most effective method of communication. What's more effective than 26 letters, whether on an alphabet board, a keyboard, a. Typing autonomously. Like. What's more effective than that? Because with 26 letters, you can say anything, right? Yeah. So there's nothing more effective than that. It's their primary method of communication and it's their right as a disabled person to choose for themselves their preference, their client preference is one of the elements of evidence based practice. So you've got families and non-speakers all saying, this is what I choose. We've got federal law that says, great, you're entitled to it, right? But then we've got state agencies sending down memorandums saying, nope, you can't do this. And blanket in California blanket denial letters for services that involve typing or spelling, even a camp. There's a family camp that families go to, but it's called the Spelling Spellers camp. They won't fund that either. And it's a social recreational activity because the word spellers is in the title.

[00:24:00] Del Bigtree

But by the same people that will rake me over the coals for talking about autism and saying autism is beautiful, which it is for the people that are here that exist. I'm doing work trying to figure out what's making the numbers go up. Can we get on the other side of it? But obviously you're involved in making their lives better, giving an ability to communicate, to have autonomy, the ability to have a life. And these same people that keep talking about how beautiful this whole thing is, are the ones stepping, it seems, into the into the way of progress.

[00:24:33] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Yes. Nothing. I'll tell you from the minute a child has this. Actually, let me let me speak first.

[00:24:38] Jenny, Elizabeths Communicator

So Elizabeth said she. Elizabeth typed, we need this in New York right now, where the state agency hijacked our communication Bill of rights. Please join our movement for justice.

[00:24:54] Del Bigtree

Well, how do we do that? We'll get to what's happening in New York. But how do we join the movement for justice? While we're talking about.

[00:25:00] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

It, there's a campaign page. We're calling it The communication is a Human Right Campaign. Okay. It is on.

[00:25:06] Del Bigtree

It's on your screen right now, everybody. If this isn't important to you, then I don't know what is. We should all dive in here and demand. I mean, I just this is one of the great travesties. Can you imagine spending your life trapped in a body. People are talking down to you. You know, all the time, acting like you're, you know, a child. When you're an adult, you're ready to go to college, and then you finally break free. It's like the movie awakenings. Only in this case, it's not a physical thing. It's not the drug failing you. It's your society and it's your government and it's lobbyists that are taking away your instrument communication. I just can't think of a greater travesty, really, in this world.

[00:25:47] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Well, and you know, our government has a policy on disability. Do you know, it says in Idea, the individuals with Disabilities Education Act that it is a natural part of the human condition, that disability is natural, and that it in no way diminishes a person's right to participate meaningfully in their life and society. And these state level decisions are about taking away their right to pursue happiness. Inclusion. College classes, adult day programs if they're seen in the community in California using a letter board and they're getting funding to attend that adult day program, they're getting notice of action letters to those day programs, that they might shut them down and stop funding.

[00:26:28] Del Bigtree

Because they see them using the board to.

[00:26:30] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Communicate them, using the board to communicate. They're not even teaching them. They're they're not even teaching them how to use it. These are kids and adults, I'm sorry, adults who are already fluent typers their rights are being jeopardized because of whatever the corporate interests getting into the state level.

[00:26:47] Jenny, Elizabeths Communicator

And Elizabeth typed, we need you to follow our social media campaign and amplify our voices.

[00:26:56] Del Bigtree

Okay. What is the social media handle we can use to.

[00:27:00] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

There's @spellersfreedom.

[00:27:02] Jenny, Elizabeths Communicator

Yeah.

[00:27:02] Del Bigtree

Okay.

[00:27:03] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

@communication4allorg especially this month. So the more our reels get shared and reshared, the better it helps us because really like there's a court of public opinion out there too.

[00:27:17] Del Bigtree

Of course, it's what I say every day on this show. It's the most important court there is.

[00:27:21] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Which is why I called you guys like a month ago and was like, please help us because. Because that's it. And the world at large also needs to know, and this is Autism Action Month. And if people can help us just even that, share those stories and share those reels so that the court of public opinion starts to hear what's happening. Hopefully that will start swaying some of those state agencies.

[00:27:41] Del Bigtree

Let's bring up that social media handle again really quick. I want everyone that is watching this show. We are an action group. That's why we're the Informed Consent Action Network communications4allorg I want you to follow them. And then spellers, @spellersFreedom. If you have social media, let's start following and sharing all these posts this month. This really will make a difference. I think we've got to show all these politicians. So what happened in New York?

[00:28:07] Jenny, Elizabeths Communicator

Elizabeth typed the politicians. Watch how loud our voice rises online.

[00:28:14] Del Bigtree

Elizabeth, you were a true warrior. I love that about you. So specifically, what happened in New York? So how is it something like this go down? She talked about a communications bill of rights.

[00:28:26] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Yes. So I'll give I'm sure Elizabeth can synopsise it, but basically she championed a bill there for the communication Bill of rights, and it passed unanimously in the House unanimously, which is amazing. Then it went on to the Senate and it got stuck in the Senate Disability Committee by Senator Fahey. And there is where some of this influence from corporate interests must have come through, because the bill got amended and through, in the words that the communication had to be autonomous and had to be validated. And if it was autonomous and validated, then, okay, it's covered under this communication Bill of rights. But unless it's those two things, like unless you can get out of the wheelchair and walk by yourself, then.

[00:29:06] Del Bigtree

Prove yourself, prove yourself, stay and prove you can stand. It's like, it's like a bad Monty Python skit,

[00:29:12] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Correct. So those words got added. And then our community. This is why the social media thing is so important right now. Our community got on the bandwagon and flooded all of the disability committee's office with phone calls, letters, emails, social media posts and the bill. She rushed it through to get it passed this past Tuesday and tabled it. Got it. Got taken off the agenda.

[00:29:36] Del Bigtree

Is it Fahey?

[00:29:37] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Fahey

[00:29:37] Del Bigtree

Oh, man. Sounds like a real gem.

[00:29:39] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

But but it's not done yet, right? So we still need to go back to the version that was approved by or unanimously voted on in the House. That's the version we'd like to get passed in the Senate. Go ahead. Elizabeth.

[00:29:49] Jenny, Elizabeths Communicator

Elizabeth typed the bill was amended. Amended to take our rights away. This is a toxic bill now. But we shall overcome.

[00:30:02] Del Bigtree

Absolutely. Um, so New York, California, the typical states that are making life difficult on many different fronts. Um, what is the I mean, it seems to me a, b, a must be fairly expensive, so it can't be a cost. I mean, these are all daily practices that require a training and everything like that.

[00:30:27] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Well, ABA is now covered by insurance, so it doesn't cost the family. When you say cost.

[00:30:33] Del Bigtree

I mean but that's what I mean. Overall cost because the insurance should be going to spellers too. I would.

[00:30:37] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

It should be right as a form of assistive technology.

[00:30:40] Del Bigtree

Yes.

[00:30:40] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Because again, it meets all the criteria to be an assistive technology method.

[00:30:45] Del Bigtree

I would even assume would lead to less need for many in the future if they could communicate their needs versus needing many people to communicate for you. Totally. Yes.

[00:30:55] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Think about Jen and Kade, who've been on the show, and the fact that he helped the doctors discover his stage four cancer and helped the doctors navigate him through the treatment because they needed feedback, subjective feedback about are your feet numb? Are what's happening so they could adjust the medication. If he had not been spelling to communicate, he might not be here right now. And he's serving with Elizabeth on Isaac at this point. Right? So amazing. Even those, you know, you talked about earlier, those folks who are self-injurious or really dysregulated and sure, it takes a minute in the beginning to get their bodies into a state of like less fight or flight so they can learn to do this motor planning. But the game, how the game changes when they can communicate, what is really triggering them. It's life changing.

[00:31:42] Del Bigtree

Yeah.

[00:31:42] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Right.

[00:31:43] Jenny, Elizabeths Communicator

And Elizabeth typed, we don't need more funding. Families need choice to find what works for their child. Non-speakers need to spell and type.

[00:31:56] Del Bigtree

Absolutely amazing. I want to thank you for joining me today bringing this conversation. Elizabeth. I want to give you one more opportunity. You said it before, but I want you to make a statement for Robert Kennedy Jr.

[00:32:06] Jenny, Elizabeths Communicator

Oh.

[00:32:07] Del Bigtree

And I'll make sure he gets it.

[00:32:08] Jenny, Elizabeths Communicator

Wow.

[00:32:10] Del Bigtree

Okay. And so as we sort of wrap this up, it's Autism Awareness month. Um, so many families are out there that wonder, you know, I may have seen this. It seems like it's it's hard work. I know that of the families that have been involved with it, what would be your message to people out there? I think the one I get is like, they they can speak a little bit. So I don't think this is going to work for me. So what would you say to those families?

[00:32:37] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

I really love speaking to those parents because, um, if, if the elevator pitch version is this, if your child cannot or adult child cannot carry on a conversation with you, if they cannot reliably tell you what happened today or what they did, then they can benefit from bypassing their fine motor muscles and using the gross motor of the shoulder to type and spell to communicate right. So it will not reduce their verbal speech. They will not stop speaking.

[00:33:07] Del Bigtree

I would think that would be a fear, right? If I do this, then I'm locking them and they're never going to get to that dream. Of that I have of them. No, in.

[00:33:14] Dawnmarie Gaivin,AT-ACP, Executive Director, Spellers Freedom Foundation, SPELLERSFREEDOMFOUNDATION.ORG

Fact, in fact, and we haven't studied this yet, but anecdotally, everyone's speech improves their articulation improves their reliability of their speech improves. It's like the brain doesn't know the difference between these new pathways it made for pointing to letters and making the mouth actually make the speech sounds it wants to make, so it will not reduce their speech. It could only enhance it. Right. So it's sort of like the juice is worth the squeeze to like give it a shot with, with, you know, the videos that C-4a Academy puts out or finding a provider who's trained in one of the methodologies that teaches, there's many paths up the mountain where like, we don't really care which path you take. The point is, give it a shot, because I think it can make a world of difference in your minimal speaker and even your unreliable speaker.

[00:33:57] Del Bigtree

Amazing.

[00:33:58] Jenny, Elizabeths Communicator

Okay.

[00:33:59] Del Bigtree

Okay, here we go.

[00:34:00] Jenny, Elizabeths Communicator

Secretary Kennedy, you are a champion for autism families. Please issue guidance to protect Non-speakers from discrimination nationwide.

[00:34:13] Del Bigtree

Okay. I'll make sure that he gets that message. Elizabeth, thank you for being so outspoken. You are an incredible light in this world. Congratulations on being a member of Iacc. That is so spectacular. And I know that you're going to make great change there. I want to thank you all for bringing this to us. And let's bring up these social media platforms one more time for everybody. Please use this moment right now to punch it into your phone. Let's start. Uh, this is the website spellersfoundation.org/communicationisahuman right. Um, let's also start following all these social media channels, communication for all org and spellers freedom. Let's start sharing those videos because I'm sure there you got a bunch coming. So this is super important. Thank you for taking the time to join us today. Alright. Well, um, we like to change the world on this show. That's really what this is all about. And so I love the fact that, you know, how many people come on and leave the show and say, you know, we've never had an audience that was that involved that got involved in our social media or hit our website.

[00:35:24] Del Bigtree

You're an active community. It's really what makes it spectacular. It's one of the great things that The HighWire provides is you as an audience making a **difference**. I got a big show coming up. I've got an amazing life story and maybe one of the most advanced clinics in the world looking into cancer. What is his journey been like? What is he up against and what is the future hold for new technology that's coming right around the corner? But first, it's time for the Jaxen report. Alright. Jefferey. Um, I got my blood boiling, obviously, early this morning. That story is the type that really just, um, I find those stories infuriating. Real change, real progress is possible, especially from the people that scream. They care about progress and then run into, you know, Congress, women and men and senates and, and get people to change and rewrite laws in the dark of night. I mean, I try to say there's not evil in this world, but it's moments like this where I really struggle with my my own hypothesis, if you will.

[00:36:42] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Maybe politicians and lobbyists trying to really stop those. What we saw there, true miracles and people trying to stop that. They're really creatures at this point. And obviously there's agendas here that are being uncovered, conflicts of interests. We're going to be uncovering those as well. And when I watched that segment and I'm watching it really all is about communication and **the antithesis of communication is censorship. And that's** the fight we're in. That's the fight we're all in, is to be able to communicate truth, to communicate what is actually reality and what's actually there. And so what we're talking about here is something we've been uncovering for quite some time over the last five years. But this is the Covid vaccine and the censorship that the administration, the Biden administration, laid over the top of that. So the public had no idea what kind of safety issues were coming at them when they were pushing this vaccine. Here's the headline. It says "Biden white House edited messaging on strokes after Covid 19 vaccinations." Now we have a stroke issue. That was that was being hidden. And this is in 2022, they put out a booster because apparently the first two shots we were told that they stopped transmission. We were told that everything's perfect after that. Well, they didn't work. So then they had to do a booster. And then we went into booster mania and up to ten shots for for older adults in America. But they put out this booster. And what's fascinating about this, this is even stat news reporting at the time in 2022, they said this "Pfizer seeks authorization for updated Covid vaccine without fresh clinical trial data."

[00:38:15] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

So remember the days where they said, well, you know what, the first two shots, they raised some antibodies somewhere in people's blood, which does something we don't really know. So we're just going to use that information to approve this new vaccine. And that's how it went. Well, shortly after that approval, the booster shots went out to over 50 million adults. And here is what the internal emails show, compliments of Senator Ron Johnson. And let's look at them now. We'll go right into this. These are documents from the CDC, FDA, white House. And you can see they're going to put out a warning to the public and they're wargaming how this should how this should sound. You can see here in this document, it says the current signal right in the middle here is "moderately Elevated." They cross that out and they change that to slightly. Right below that, it says the "statistical signal has a moderate elevated rate ratio." They change that to slightly. Well I don't know about you, but let's look at some definitions here because those are two different words. It means to a certain extent, quite fairly 50 million American adults, remember took that shot slightly to a small degree degree. Not terribly. These are two different things clearly downplaying. But let's go clear away from the word clearly.

[00:39:27] Del Bigtree

Changing the words, right. Downgrading what the actual knowledge is. And thereby I just want to point out when we're having this conversation, because I know that people are like, are we still talking about Covid? Uh, yeah. When I think we should never stop talking about moments where governments anywhere in the world decide to murder innocent people, which is what I want to point out, is happening here. As soon as you recognize that Stroke, which leads to death. You know, we've talked about, you know, other things, whether it's, you know, myocarditis, pericarditis, but this is stroke now that we're talking about. And so when you decide in an internal email to downgrade the warning on that, what you're saying is, and by the way, you are recommending this, as you said, 50 million people we were talking about, all of America was being told to take these vaccines, hundreds of millions of people. When you do that, and even if it's rare, even if it is slight, but at moderate, what you're saying is we know people are going to die by this mandate. They're going to die when they read this recommendation and think that that risk doesn't apply to them. And we are okay with that. I want to make that clear. It's also why I think it was Denmark has never had a mandated vaccine program because they said it's against our constitution to murder innocent people, which is what we would do if we mandate a product that works for most people. But for those that didn't, we killed you. This is your government saying it's okay to kill some people and they don't need to know about it. That's that's how I read this right now is we're having this conversation really important because that was only an administration that was in office four years ago. We are not talking about the 1930s or 40s or 50s. We're talking about yesterday.

[00:41:12] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Right. And for the people watching going, well, it's just word. It's just word salad. With that, let's go further into these emails. So here's the next one. And you can look at this. It says this is this is actually hilarious because it's in the first they're talking about "consistent to our commitment to transparency." The CDC planned to post a statement on their website that explains potential risks, preliminary signal, they change potential risk to preliminary signal and next steps from the white House.

[00:41:42] Del Bigtree

So let's just everyone listening right now. Jefferey really just I want everyone to think about this. If you read potential risk, if you take this product, that's what they were going to write and then preliminary signal. Which one triggers you? Preliminary signal even mean anything to you? Look at this. I mean, this is this is shocking stuff. Jefferey is not word salad. This is like, I don't really I don't even know what I'm reading. Preliminary signal, potential risk. Understood. Houston got that message.

[00:42:10] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

At the same time, they're trying to really soften the blow to this safety signal. They have project groups with up to 15 experts doctors, lawyers, everybody health experts. Look at this internal email here. Look at these working groups they had working on how to message these shots and the issues from them. They have a myocarditis, all ages working group, Guillain-Barre syndrome, working group, thrombocytopenia working group. You go to the next page here, stroke project. There we go. And a death project. That's got to be some great conversation. Stroke and death project. Great times guys. So let's go to the the final one because they also reached out to reporters on how to messages they had trusted reporters. And it says here Embargoing briefing with Peter Marks. Great guy. We did a whole documentary on him and trusted reporters. Helen Branswell of STAT. We have Washington Post reporters there. We have AP reporters. But then you look down here and you go into the trusted experts. There's Peter Hotez, among others. These are pharmaceutical, pharmaceutical, industry conflicted experts, and their white House is bringing them in the CDC. The FDA is bringing them in to message this. And you were you were mentioning about Denmark not wanting to basically kill their citizens when a stroke issue comes out right after these boosters are going into arms in the 65 and older, that's the most vulnerable population for these for for these signals to start.

[00:43:34] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

But what happens after a year or two? Well, this is why we start seeing headlines like this. "Strokes are getting younger. The alarming rise in stroke rates among young people" is this what's happening? What we're looking at here is, is essentially a crime scene. We have documents of a crime scene here, and it's not just stroke. Let's go to a new study that just came out looking at the best, the brightest, our military soldiers taking two Covid shots. They looked at this "transient elevation of nt-probnp after Covid 19 vaccination in healthy adults." This is a blood test used to detect heart failure. It's used to detect the extent of heart damage. They did this test on again healthy military adults after two Covid shots. This is what the researchers wrote nearly 49%, about half their of participants exhibited a relative increase, exceeding 1.5 times their individual baseline. The authors concluded, "in healthy adults, this Covid 19 vaccination was associated with short term subclinical elevation of nt-probnp, particularly after the second dose. While not indicative of overt cardiovascular injury, this biomarker response may reflect transient myocardial stress and warrants further research," you think? And this is what we're talking about. You can change the food pyramid. You can change the nutritional guidelines for the military to get them more combat ready. But how does that work? If you're mainlining a heart stressing shot into them continuously with boosters every year?

[00:45:05] Del Bigtree

For what? I mean, again, I mean, Jefferey when we talk about the military, these are mostly men and women that are in that sweet spot where Covid has no effect on them. Zero death rate, you know, under 25-30. I mean, that zone, they are so healthy. And we've talked about this on the show before. The entire argument for vaccination is so that they be, you know, military ready, like ready to go at any moment. And here you are. If they have elevated heart issues, guaranteed, they're not ready to charge onto a battlefield today. And you are inflicting that upon them for a cold that will not affect their heart. I mean, the whole thing is really outrageous and I want to reflect on a story you had earlier. Jefferey. This is all on the back of the fact that the administration also sat down and recognized that natural infection created better immunity than the vaccine in itself, and they all decided to not tell us that and instead mandate these shots, recommend these shots, recommend these boosters, and then downplay all the harms from it. Jefferey mostly in my career, starting the doctors, my work was investigating when pharmaceutical companies like Merck did this with viox, when they finally got it into a courtroom.

[00:46:21] Del Bigtree

And you realize in their internal emails they were assessing how many people would die from viox and said, that's fine, we'll put up with that because we'll make more money than that. We see the same thing with Johnson and Johnson and talcum powder. We see that with the Sackler family when it comes to OxyContin. But what we're looking at here, remember, is not a pharmaceutical company is the government of the United States that has now internal emails that are discovering that they were hiding injuries and harms and making a risk reward benefit ratio for what, a pharmaceutical company. I mean, this shows you how entrenched and how corrupt this government is and what Robert Kennedy Jr finds himself in the middle of trying to do something inside of there. But this is horrific that our government would act just like a money grubbing pharmaceutical company that doesn't mind paying billions. And what happens here when you try to get paid billions? Oh, liability protection in a courtroom. That's totally rigged. You're not going to see any money inside of there because the government has rigged that too. This is horrible.

[00:47:29] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

And this is why we'll never shut up about this, because the vaccine injuries are continuing to line up. And as we said, this is this is evidence of a crime scene. It's now stroke. We know it's also Myocarditis. Here's Ron Johnson talking about what the CDC knew and hid. Take a look.

[00:47:45] Del Bigtree

Okay.

[00:47:46] Ron Johnson, (R) U.S. Senator for Wisconsin

On February 28th, 2021, Israeli health officials notified CDC quote of "large reports of myocarditis, particularly in young people following the administration of the Pfizer vaccine." Again, that's February 28th, 2021, two and a half months after the emergency use authorization. On April 12th. Over a month later, a DoD consultant raised his concerns to CDC and FDA officials about their ability to monitor and track cardiac related adverse events. The consultant notes, quote, if you do not ask, you will not see it. But does that mean it does not exist? Unquote. Around the same time in mid-April 2021, CDC officials discussed safety signals for myocarditis. Quote, for myocarditis with mRNA vaccines based on DoD and Israeli data, but do not take immediate steps to warn the public from May 17th to May 21st, 2021. Cdc officials discuss whether to issue a formal health warning called a Health Alert Network message on myocarditis, noting that, quote, providers aren't reporting these cases to Veirs. They knew they weren't. They knew they existed. They knew they knew they weren't reporting them. Uh, a couple days later, during a May 24th, 2021, vaccine safety meeting, notes show that FDA and CDC CDC officials asked, quote, is Veirs signaling for myopericarditis now question mark and are told for the age group 16 to 17 years and 18 to 24 years. Yes. Yes. They saw a safety signal in Veirs. Yet from May 20th 5th to May 27th, CDC officials provide up to date information on the status of the Han to Pfizer and Moderna representatives, not to the public. They're warning the vaccine, the injection manufacturers, indicating CDC's preference to keep those companies more informed about vaccine adverse events than the American people.

[00:49:47] Del Bigtree

You know, they're not reporting the signals to the public, as Ron Johnson said, they're only reporting it to the manufacturers themselves that are getting paid for all this. But Jefferey, why didn't they report it to the doctors? Because that's the point that's being made here, right? If they just simply put out a call to all doctors, all pediatricians, hey, there appears to be a myocarditis signal, especially in young people. Keep your eyes out and be sure to report every myocarditis or pericarditis that you see in your delivery of this vaccine. We're trying to get to the bottom of this and see the data that would have changed the entire culture. God knows what numbers we would have seen. But what you're telling doctors is we have no single signal. This thing is perfectly safe, and anyone that questions it, we're just watching their license taken away. I mean, you literally incentivize doctors to just bury their heads in the sand if they were seeing a problem when you should have said, we never did safety trials. We got emergency use authorization. We're rushing this thing on the market. But we are telling you doctors now, we don't want to alarm the public, but you need to know we have a myocarditis pericarditis. And they should have said on the story right before the stroke. We need you to start looking for this and report every version you see, because we want to see how bad is this signal since they'll tell you VAERS is so bad at capturing it. But no, none of that happened.

[00:51:04] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

This generation will never give up this cause. And the people that have been vaccine injured by this Covid shot, they need justice and it will come. And that's all I can say about that. I mean, this is an extraordinary story. And we have the evidence, we have the documents, and we we have the people clearly that **have been injured by this**. I want to take a detour here from the health conversation to **what I'm seeing is this flashing red light**, which is the Iran conflict. And we had President Trump come out last night, and several analysts thought he was going to come out and end the conflict. Instead, it sounded like this. Take a look.

[00:51:38] Donald Trump, 47th President of the United States of America

We are going to hit them extremely hard over the next 2 to 3 weeks. We're going to bring them back to the stone ages where they belong.

[00:51:49] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

That was one of the that was one of the kind of comments that's been going around social media. Now to the answer of, I thought we were stopping this war. Obviously, there's a lot going on with this conversation. There's a lot of moving parts, and one of the biggest moving parts when it comes to this is seeing through the lens of the global economy. We're a highly integrated global economy, just in time economy, and that's reliant on a lot of really function optimally. One of the biggest things is the oil, the energy roots and fertilizer roots. And what is also in the news right now alongside the brand conflict is this reporting. Take a look.

[00:52:28] Female News Correspondent

Many of the effects of this Iran war are being felt right here at home.

[00:52:32] Female News Correspondent

In the Strait of Hormuz. What's at risk isn't just oil.

[00:52:36] Male News Correspondent

Prices at the pump aren't the only place that US consumers are going to feel the pinch.

[00:52:40] Female News Correspondent

The economic spillover is going far beyond just gas. The conflict is disrupting global supply chains for other surprising and essential products, from fertilizer to helium to the cost of borrowing money.

[00:52:53] Male News Correspondent

Roughly a third of the global fertilizer trade moves through the passageway, and about half of global food production depends on the synthetic nitrogen fertilizer that is mainly produced in the Middle East.

[00:53:04] Male News Correspondent

And when the costs go up for farmers, the price of food cannot be far behind.

[00:53:09] Female News Correspondent

Higher fuel prices automatically translate into higher food prices. Higher fertilizer prices automatically translate into higher food prices.

[00:53:19] Female News Correspondent

Fertilizer key to corn, biggest user of fertilizer and corn forms the foundation of the US food supply. It's also used to make high fructose corn sirup. That means cereals, flour, alcoholic beverages. So bottom line, when corn prices go up, it sends a shock through every grocery store aisle in the country.

[00:53:40] Male News Correspondent

The truth is that American consumers will likely see prices rise no matter what. The question some are now asking is by how much.

[00:53:47] Del Bigtree

I think I want to make a statement Jefferey, because this is, you know, obviously a very volatile issue. We are a nonprofit. We our work is dedicated to eradicating man made disease. We talk about health all the time. You and I, you know, have thought about this. Um, we're not here to decide whether or not this war is just or right or make this about politics. What we're here to discuss right now is how this is going to affect the health. We are not just a national program. We're an international program. As I say at the beginning of every show, wherever you are in the world, where there are people in the world that are having a different experience at this time, and we're really not hearing it here in the United States of America, which is why we've decided to talk about the issues that are going to definitely affect our health in many ways worldwide. So I just wanted to make that clear in case anyone's like, where are you going? Yeah, I have no intention of diving into the politics of this. That's a totally different story. But what we are going to report on is the world around us and what we may need to think about when it comes to our health, which is also our energy. If you're in winter time in the world right now, energy is going to be a very important issue.

[00:54:55] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Alright. And also important is we're implanting season time for a lot of crops for farmers, not just here in America, but in a lot of places around the world. So when you hear oil slowing down, you hear fertilizer certainly slowing down. Think food, think farmers. And what's also happening too, is there's countries beginning to see the writing on the wall here that aren't America, and they're starting to to prioritize their domestic supplies. So here's Russia. This is out of Reuters. "Russia stops ammonium nitrate exports for one month amid global supply crunch." Analysts say it's about 40% of the world's supply comes out of Russia, China as well. "China restricts fertilizer exports, further crimping war tighten supply." And then here's Newsweek. "Us ally declares national emergency due to oil crisis from Iran war." And it gives you kind of a picture here. It says "Asia is the region most exposed to the oil shock. While China, Japan and South Korea hold strategic reserves that can cover months of demand, many Southeast Asian economies operate with far thinner buffers. The Philippines is in particular dire straits, particularly dire straits, with the Middle East accounting for roughly 95 to 98% of its oil imports. And here's now the executive order from Philippines. It states a state of national energy emergency is hereby declared in light of the ongoing conflict in the Middle East and the resulting imminent danger posed upon the availability of and stability of the country's energy supply." Romania has just followed, declaring its emergency as well declares an oil market crisis caps fuel margins. That goes to June 30th. So I'm painting a picture here. What is what does this look like if this keeps going, how does this play out? And I want to I want to say it's very interesting because for me, we can see this through the lens of lockdowns.

[00:56:36] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Remember the Covid lockdowns? Remember the reasoning for those we have. We have the White House's own website from March 16th, and it looked like this 2020 white House 15 days to slow the spread. We all remember this and we know what happened afterwards. But what happened is after that lockdown and the economic destruction and the loss of movement for people, people having to stay at home, forced to be at home, businesses closed. The World Economic Forum, through a Forbes article, said this emissions fell during lockdown. Let's keep it that way. What? What are you talking about? So what I'm seeing here is it doesn't really matter if I'm reading this right. It doesn't really matter the reason the end goal seems to be some sort of lockdown. And so remember, just a month after the white House said 15 days to slow the spread, the W.H.O. aggressively stepped in with this document. "Consideration in adjusting public health and social measures in the context of Covid 19." They put out their guidance and that raced lockdowns and it supercharged them throughout society. So what I'm seeing now is a very similar document from the International Energy Agency talking about public health and social measures instead of the Covid excuse. Now it's this excuse sheltering from oil shocks measures to reduce impacts on households and businesses. And you go to this infographic here. Here's what they're suggesting. You can see at the top here encourage public transportation use on the right side there.

[00:58:10] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Work from home where possible. Where have I heard that before? At the bottom. Avoid air travel if alternatives exist. On the left side, alternative day access car access in big cities. So drive your car as much. To me this looks like net zero by just another name. Any means necessary. But at the bottom line, that's a forced lockdown because we may not have the energy to to do anything about it. And I want to go back to the conversation about food, because this is really the biggest conversation we can talk about. And in the US, we are somewhat insulated for, I guess, a little more time than say, the Philippines or Romania, but we're already seeing headlines like this coming out of the US. Us farmers are shifting acres from corn, corn to soybeans in 2026. It says the main reason behind these changes is the rising cost of inputs like fertilizer and fuel. Ongoing global conflicts and trade disruptions have increased these costs, making it more expensive for farmers to grow crops like corn and wheat. Soybeans require less fertilizer, making them a more affordable option. So already, farmers in the US are taking preventative measures. Defensive measures for what they possibly see may come if this conflict drags on any further. So this is what we're watching here. This is what we want to show people and say, hey, look out for this. This train coming down the tracks looks really similar. And it has the word lockdown on it by just a different name, by just a different input overlay. And that's kind of the idea we're trying to put across here is really keep your eyes open on this one.

[00:59:41] Del Bigtree

Well, because what we keep seeing Jefferey is you and I have reported, we found ourselves over the years getting deeper into territories. We didn't plan on discussing things like AI, but when you start looking at it, at the heart of it is still the same globalist mindset which is preaching, you know, the same, you know, sermon, which is we are overpopulated, we have got to reduce our impact on the earth or we're all going to die on one version or another. This idea of 15 minute cities is being represented right here again in every other day, cars shortening your travel. And once again, let's not fly in airplanes. And so what you wonder? You know, what I ponder is, you know, seemed like Donald Trump was going to break that sort of, you know, authority, you know, authoritative global mindset. And now I wonder, is he is he? No, he's playing right in their hand. Or is it just that, you know, he's oblivious to the fact that he's creating a situation that those globalists are going to jump on? I was just communicating with a friend in New Zealand about maybe going out there for a screening of An Inconvenient Study this summer. She's like, look, uh, let's plan it. But we may be totally locked down because we have no, we, we got rid of our oil refinery in the middle of Covid, the only one we had apparently for the whole green push.

[01:01:04] Del Bigtree

So they have no way to process their own fuels and now they are really screwed. They're having shortages as we speak. I have a friend in England that just watched the oil that he has to fill for his house double in price, and he said, I'll pay it. And they said, there's also a delay. We're thinking ten days. People's lives are being affected right now as we speak. And ironically, it could lead to we can't have you traveling right now. You need to shelter in place. That's why, I mean, we really do have to keep our eyes on it and putting that spin on it. Jefferey I think really important. I mean, maybe, maybe, uh, maybe we're overstating it. I hope we are, but it sure seems like there's a lot of people in the world that are being deeply affected where right now we're just, we're complaining America, about rising costs. Uh, what if you just can't buy it? Even if you had the money? I think that that's what a lot of other nations are facing right now.

[01:01:59] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Right. And I think it'd be great if we were jumping the gun on this story and it turned out not to be true. Great. We'll go back to other reporting. Last couple weeks we've been reporting on the decrease in vaccine uptake. And really the global vaccine markets and the pharmaceutical industries are seeing huge hits to their profit margins because the uptake is really just it's going down after the Covid, after the pandemic response, the failed pandemic response. But I want to report on something here we've never reported on before. What was a global flashing red light for the vaccine industry has just seen a pillar fall. Never before has a recommended vaccine ever struggled to find recruits for its clinical studies, and that just happened. This is an exclusive from Reuters. "Pfizer BioNTech halt US Covid vaccine study after recruitment struggles." They said the "slow enrollment has caused them to halt this because they didn't have enough people to generate any relevant post-marketing data." I don't even know what to say about this. I mean, this could be a fitting end for Covid vaccine.

[01:03:02] Del Bigtree

I do. This means that your polls in every one of these other articles that you've written saying that people don't care about this vaccine issue, this is going to hurt the Trump administration, the midterms and all the things we're hearing. Well, apparently enough people care about vaccines that you can't find enough people to line up for a trial now for a vaccine. So where's the confidence there? Tell me, those people, I mean, and you're talking about the entire nation, they cannot find people enough to show up for a safety trial on a vaccine that's approved by the CDC. Oh my God. Obviously, two different worlds are happening here. We're reporting on one of them. And then there's what the rest of the television is trying to tell you in. Newspapers are trying to tell you is happening in the world. Amazing.

[01:03:48] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Let me show you what they're trying to tell you because arms are out in full force. If you're reading corporate media, if you're watching corporate television, you're seeing a whole different story. I mean, worlds apart from what we're at now in post. Look at this headline. Will the anti-vaccine fever break? Remember during Covid they stopped using the word anti-vaccine because it was too inflammatory. It's actually not correct. Now it's back. And who did they go to? They go to our friend Paul Offit as an expert and listen to his quote in here. He says "he criticized Paul Offit, the bias towards balance." So he's saying "there shouldn't be balance in reporting when it comes to vaccines, criticizes, criticizes bias towards balance, as in frame for questions involving vaccine science, citing programs like the 1982 DPT vaccine roulette." So that's "modern documentary NBC stations, he says. When the media carries a story about a vaccine fear that has really been substantially answered by published studies, which studies, I don't know, you can choose perspective rather than balance, he said." 92. Weird. Maybe it's just Paul Offit kind of just going back in time there. But I'll tell you, it's not.

[01:04:59] Del Bigtree

You know what it means. I'll tell you who woke up that morning was Andy Wakefield. Finally said, oh, good. Finally, I'm not the center of the story. They're going to go after the 1982 film. I mean, just going through the archives, digging through the cobwebs is the reason this movement is thriving right now. Jefferey you can tell they are trying to put those people that aren't haven't woken up yet, that aren't on our side, just put them into a coma and back to sleep. They're even, you know, trying to put them in the dark ages of this movement. Forget about no 1982 movie. Did this doctor often it was your recommendation of a Covid vaccine that couldn't stop transmission and is now causing strokes. And the government lied about it causing heart attacks and the government lied about it causing blood clots in the government lied about it. That's your problem. That's you know, that's what's going on here, Paul. And we're in the.

[01:05:52] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

We're in the middle of a narrative war because what's happening is a manufactured consensus. They're trying to manufacture a narrative here for people to believe. And it's it's very transparent because there's Paul Offit, and in the same week you have this headline of an article, it's "vaccine hesitancy is best understood as a religion." They have a researcher in there claiming she did study, quote, anti-vaxxer parents. And this is what she says. The original quote. "Anti-vaxxers were really nothing of the sort. They were parents who, following a" again, "1982."

[01:06:29] Del Bigtree

Alright. Welcome back to the HighWire. If you're watching us behind the scenes on Instagram, we just had a major meltdown. I believe our hard drive that runs this entire show in the system. It's the first time we've ever had that big a glitch. Um, but thank you for sticking with us. We're going to bring it back, but we are, we've switched over to our road setup. So we've got now I don't have a desk for the rest of the show. We're going to finish the show here. But if you can look over here got Jen Sherry, our executive producer, Cole has brought out the the road system. They're at my desk and we are going to continue on because the show must go on. Actually, I'm really excited for this next conversation. Um, I started out the show saying how much my life changed when I went from working on the doctors television show to making the film VAXXED getting deep into the investigation of autism, but also of vaccines and then all of the different issues that may be caused there. And of course, oversights we are going to, you know, later on in the show, talk about the march against the Supreme Court to bring liability protection for pesticides and herbicides. So this is what our nonprofit does. I can. This is what The HighWire does. And I never imagined I'd be doing any of that. I went to Hollywood to make movies, and instead my life is far better, far more fulfilling and incredible. And I'm just so thankful that what they say life is what happens when you're making plans. Uh, this is one of those stories.

[01:08:06] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

I was born in Nashville, Tennessee. My uncle and dad were both boxers and so boxing was a big part of my life growing up. Watching the fights every single week. But I started wrestling and I started competing heavily in Brazilian Jiu-Jitsu. I got a scholarship to wrestle in college, and at 18 I was able to go to these different mixed martial arts events.

[01:08:29] Male Speaker

It's very impressive.

[01:08:31] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

I was doing professional fights, traveling across the country, but I was thinking about going down more of a training route. And so I opened my martial arts gym, and in five years I had one of the largest MMA schools in the country. My clothing line, we were the largest manufacturer of Brazilian jiu jitsu martial arts uniforms. I had one of the highest rated non syndicated sports show in the country, and everything was going extremely well.

[01:08:54] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

It was just it was a busy day. I was training hard. One day I was training a guy and I threw a kick kind of in a warm up session, but he checked it really hard and I tore my LCL, PCL and meniscus. And so I was taking the pain medication for a couple years. And when I went to stop, I went through withdrawal. And the therapist said, America is behind the times when it comes to opiate withdrawal. Google ibogaine. It supposedly stopped 100% of opiate withdrawals, but it was illegal in the United States, but it was available in Mexico. And so I went to Mexico City. I did ibogaine there. I was home 72 hours later. Never had a craving, never had a withdrawal. And I thought to myself, well, what else is out there? My mom has a rare form of rheumatoid arthritis, and she broke her back and she got tuberculosis, multiple staph infections, all due to the side effects of the medication. And I had read about a study called Coley's Toxins for Rheumatoid Arthritis, and was from 1923 from a doctor named William Coley. Coley's causes a fever. Basically, after the fever was done, people would have a relief in their symptoms.

[01:10:07] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

You know, what we do currently for autoimmune diseases is we suppress the immune system. This stimulates the immune system. And so I started looking to see if anybody had Coley's toxins. And there was a hospital in Mexico that had it, but it had closed two years before. I knew my mom was sick, and I wanted to find answers for her, and I wanted ibogaine that to become mainstream one day. And it sounds crazy, but my two partners and I, we purchased the hospital, hired back the original staff with the mission to try to help people. But our first patient was my mom. She came in, she was in a wheelchair. After three weeks, she was in remission. All of her joint pain was gone. It was like a miracle. In 2021, we launched our stem cell program. My friend Eddie Bravo came down and he had a labrum tear in his shoulder. We injected the tear and 4 or 5 months later he called and said, Ed, this thing is. He's like, it's unbelievable how good I'm feeling. Joe Rogan did an interview with Eddie Bravo on the podcast. He mentions us a lot.

[01:11:18] Eddie Bravo

You know, I got the stem cells in my shoulder.

[01:11:20] Joe Rogan, The Joe Rogan Experience

We should let everybody know this is the place. It's in Tijuana. It's run by Scotty Nelson. Ed Clay, my friend, got a serious stem cells down in Tijuana where they could do wild. Did you go to the place in Tijuana? Yeah, yeah. Shout out to Ed Clay. Yeah.

[01:11:33] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

And the hospital started blowing up. It was a a huge change for the hospital. There was definitely pushback from conventional circles. It was, oh, that stuff doesn't work. They're just taking advantage of people. That's quackery down in Mexico. But the American health system is absolutely broken. It lacks compassion and common sense. It treats patients like a number seeing my mom get better And other patients get better. I knew we were on the right path. Now people know us for stem cells, but stem cells is like it's very simple science to us. Our capabilities is really the future of medicine. If you just cut all that red tape, these geniuses do what they do. We could cure two thirds of solid tumor cancers in the next seven years. I truly believe that.

[01:12:31] Del Bigtree

Well, it's my absolute pleasure right now to be joined by Ed Clay. Ed, thanks for thanks for coming in. We've been wanting to do this for some time.

[01:12:39] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

I appreciate you having me.

[01:12:40] Del Bigtree

I ran into you a bunch as I was. You know, we were running around during the election and around Robert Kennedy Jr. And you were very supportive of Maha and helping make a lot of things happen there. But, um, just getting back, I mean, you know, I just think about my story like I never would have planned on being here and what a crazy journey, do you? I mean, people must ask you all the time, how did you get into this? Did those moves feel where they work? Were they orchestrated? Did you feel guided? Like how did you how did you come into this to go from MMA? You're running your own training facility and then decide to get into building a hospital. I mean, that's a pretty big jump.

[01:13:23] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

It's a big jump. But you know, my mom was sick and I have a big faith in God and just kind of leaned on him during the pressure. That's what got me through it. Um, but we needed answers for her and there were no answers in the U.S. and so it was like, what can we do? And when I read the study on Coley's toxins, it made sense to me. They've been suppressing her immune system. The side effects that she was getting were unbearable, and we didn't have any more options. So I found Coley's toxins. You know, the hospital had closed a couple years before in Mexico, and uh, we just figured it out. Bought it.

[01:14:02] Del Bigtree

How did you talk the we into it, right? I mean, I think that's a big thing, too, right? There's one thing of having a dream, but then enrolling other people around you into that because it was your mom, not theirs.

[01:14:13] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yes.

[01:14:14] Del Bigtree

Uh, were those partners from just earlier? Were the same partners you had at your gym?

[01:14:19] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

No, not the same partner. Scott. Scott Nelson. He's been one of my best friends for 30 years. He owned a company called OTM. And, uh, and he's. It's like his mom, too. He's very close to my mom.

[01:14:30] Del Bigtree

Okay.

[01:14:30] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

And then Dedrick Perry, he did work with me at the gym. Uh, but, you know, showed him the idea we were all single at the time. And, you know, we're like, I think we can let's let's just do it. Change the world. It made sense. I was I remember we were, you know, trying to get people to invest with us. And I couldn't understand why people didn't want to invest. And now 11 years later, I'm like, I would never invest in something like that. You know, there's no way. But you know, we lived in the hospital the first six months because we wanted to learn everything we possibly could about a hospital. And, um, you know, just worked really hard seven days a week. You know, it was wake up. We lived together after we moved out of the hospital. Wake up, drink coffee together, talking about work, get home late, have dinner together, talking about work. And it was just constant for.

[01:15:15] Del Bigtree

First five first steps. Because, I mean, I find this fascinating because people always ask me what, you know, what can I do? Or they'll say, I want to, I want to change the health systems. I'm like, well, start with a clinic or something. Like, I think we, we set goals sometimes that are too big and miss the steps in between. But what are those steps? The steps? You're not a doctor. So you didn't grow up in a hospital, right? None. None of your core team is. So you go in. So are there already doctors there that you're just like, all right, show us how this whole thing works. Like, what was the process?

[01:15:48] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com
Yeah, we hired back the original staff that was running the hospital before. And then, um, you know, hired hospital administrators and just people that had no experience with it.

[01:15:58] Del Bigtree

But all in Mexico.

[01:15:59] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com
All in Mexico.

[01:16:00] Del Bigtree

All speaking Spanish. Do they speak English?

[01:16:02] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com
They speak English as well.

[01:16:03] Del Bigtree

Okay, good. That helps.

[01:16:04] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Um, and, you know, we just, uh, just grinded it out, you know, hired good people, hired maybe some bad people too, that we had to, you know, go through. But, um, it was just, you know, just this faith that we were going to make it work. I mean, I remember seeing the first tumor I saw shrink with Coley's toxins injected intratumorally, and it was undeniable. You know, it's one thing in a scan where you just see it on a screen, but when you see this guy had a tumor coming out of his neck, and within three weeks we got it to go down probably two thirds. You know, on something that's not supposed to work. Uh, you know, that's when I just knew. I just knew. And that was immunotherapy. Coley's toxins. If you look in the textbooks, it's considered the first immunotherapy for cancer. And so from from there.

[01:16:51] Del Bigtree

They ditched it. It just it's like, what happened to it?

[01:16:54] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah. So, um, you know, Doctor Coley, uh, from 1891 to 1936, had a higher success rate treating many cancers than we did up until about 2018, when the checkpoint inhibitor immunotherapy really got popular. That's when they won the Nobel Prize, uh, for cancer. But, um, you know, you figure from the 50s to 2015, it was all chemotherapy and radiation. And, you know, the immunologist, Franco Marincola is our chief scientific officer. Um, he was the former chief of infectious disease and immunogenetics for the NIH. And he's an immunologist. And he said, you know, what I did 20 years ago wasn't considered real science. So here's this great scientist that believed in immunotherapy for cancer. But even, you know, back then, 20 years ago, it was like, oh, this will never work. The immune system can really never have that effect. And, you know, Franco saw one patient, I believe it was in the late 80s, maybe the early 90s, that was cured of melanoma with IL two. And IL two is very toxic. But he knew that if he could figure out the mechanisms that caused that person to be cured, that we could eventually one day cure cancer. So he stuck with it. Him and Steve Rosenberg, who's still at the NCI, they've been really pioneers of this immunotherapy for cancer movement and a lot of others. But they knew that it was possible. And I think we're getting science to the point now where we can really pinpoint. And I do think that we're, you know, fairly close to a cure for solid tumor cancers.

[01:18:21] Del Bigtree

So you have a former NIH scientist expert who, in order to continue his work, really has to be doing that in Mexico. So what is it? Because I remember when I first started hearing about this a few years ago, I'd be like, oh, I'm getting my teeth done down in Mexico or I'm getting this. I just thought it was just a cheaper way to do things. Then I started meeting people that were having life changing procedures done in Mexico and other like Switzerland. They leave the country, though. I can't get this here. So you know why? Why, why is it? Why is this immunotherapy? Why is Coley's toxins? Why is that not. Why is the NIH not working with it right now? Because we're assuming we're under this impression. America wants to be the leader. We want to be the best of the best at everything we do. We certainly have the most funding. We are on top of science and medicines. That's what HHS is. Cdc, FDA, what is it about it that is not promoting the advancement of science? We we grew up in a country like we landed on the moon. Yeah, there's always the moon shot. Why are we missing the moon shot?

[01:19:35] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Well, Franco can work for whoever he wants. Okay? So he we have a lab in Boston and Nashville. We have, I think right now 16 full time PhDs, Harvard, Yale, MIT, education, PhDs, and Franco loves the model that Translational medicine. He founded the Journal of Translational Medicine, which is from bench to bedside and back, back from bedside to bench, bench of the scientist, the bedside of the patient. And so the model that we've created in Mexico, Tam center on the sixth floor, we have the scientists and doctors working on the same floor together next to one of the best labs in the world. I will say, I think we have the best lab in the world for diagnosing cancer for clinical laboratories, genomics, proteomics, digital pathology. We have cellular manufacturing all in the same floor that the scientists and doctors work on. So we can make quick discoveries, we can make quick changes, we can find out what's going on in the lab, which is really the best thing for the patient. You know, I think modern health care treats patients like a number instead of an individual. And we really focus on the individual and we make individualized treatments. We're heavy on science, you know, people, you know, ten years ago could have said, oh, that's alternative. That's not real science. Now they can't knock our science. We can have bioethical debates, which is reasonable.

[01:20:54] Del Bigtree

But what does that mean? What is a bioethical debate? What do you mean by that?

[01:20:58] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Well, you know, how the clinical trials are run is I don't think the way that the clinical trial model is run right now is ethical. So our model is set up to where, okay, it takes 5 to 7 years in the United States to get to a phase one safety trial with the FDA and 30 to \$50 million on average. We can do that in as little as six months for less than \$1 million. So we have our biotech company where we're developing new therapeutics, and we can get them into humans quickly, see how well they work. If they work well, we keep them going. If they don't, we, we don't keep keep using them. Yeah. And so the model that is a more ethical model to me. I mean, why should a patient wait 10 to 15 years when they don't have 10 to 15 months? It doesn't make any sense to me why we keep these patients waiting. And now, you know, with the genomics and the multi-omics, the different omics that you can put together with patient samples, we can really dig in to targeted treatments. I mean, we do a what's called whole exome sequencing on a tumor, RNA sequencing, HLA typing. And then we make predictions off of that with our bioinformatics team on the top 20 neoantigens antigens that are found on the tumor but not in healthy cells. And then we make targeted peptides to them. But we can only do that by having the scientific equipment and the great scientists that can make those predictions and understand that. And so it's really a more logical to me, ethical approach. I don't think patients should have to wait. Conventional science might say that, oh, you know, we need to stick to this old archaic process of clinical trials that doesn't put the patient first. It uses patients as a number. And I don't think that is correct.

[01:22:38] Del Bigtree

Would people then the argument would be let me push. On the other side, though, is that you're using patience as an experiment that they're, you know, your advancement, but do they know that they're in a trial space, that that is what they're doing there, that they're taking a risk? We don't have a long term safety profile. I mean, obviously, you know, you're talking about this is something that's really common in America with right to try. You're talking about patients that are dying of a cancer or Aids or whatever, you know, ailment. And we were denying them access to a trial drug that they wanted to try. And they're like, I'm going to be dead by the time you determine that that product is safe.

[01:23:16] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah, I think we try to change informed consent to inform decision making. I think we go further than normal informed consent, where we partner with the patient on all of their options. We give them lists of clinical trials all over the world. We give them on and off label approved medications. So we really partner with the patient to have the best knowledge that they can to make a decision themselves. We believe patients are smart enough to make decisions if given all of the information. And so I understand that and someone could abuse it. By the way, there are people who abuse that and take advantage of people. That is not what we do. We are I mean, very high science, very high ethics. And we take it very seriously. We just don't agree with the, you know, the current thought process, the current thought process. To me, I think it's well intended and a lot of people try to bash them. I'm not one that bashes them. I think it's well intended, but I think it's old and we need new ideas based on where science is today.

[01:24:14] Del Bigtree

Well, in science is moving faster. I mean, it always is moving faster. You know, I said at the beginning of the show when I was on the doctors, all the guys that were really pushing the envelope and working miracles, I mean, I got to see the best of the best. It was the cool thing about that show was I could just reach out and say, hey, you've got a new surgery, whatever. Would you like to present it for free? I've got someone that has that issue. They need help and we would just make them famous on the show. Um, but the, the most miraculous things I witnessed while doing that show every single time. Those, those practitioners or those geniuses were completely under attack here in America, mostly by their peers that just didn't want to change, didn't want to move. Um, and I think that, you know, for my audience, I mean, I'm fighting for informed consent. I called my nonprofit, the Informed Consent Action Network, but really in the vaccine space, because what's ironic is how much red tape there is for a product like you want to test to get through the gantlet here in America, hundreds of millions of dollars, years and years of studies. But when it comes to a product given to a perfectly healthy child, they're they're not even doing what you're doing. There's just we're going to assume safety doesn't make an antigen. Does it create an antibody? Boom. It's on the market.

[01:25:33] Del Bigtree

Five day safety trial for hepatitis B. Oh, you know what? Let's put it in day one. Old babies. Even though we mostly only tested on adults and kids, older kids, seven day old babies. So I'm hesitant in this space, which is the issue I'm dealing with, is I believe we're being poisoned by these products because they never went through a safety trial. But I will also say, when I'm in debates, a cancer patient is different. It's a different risk profile, right? I'm dying. I am willing to take the risk. We should be really careful with risks we take with perfect, perfectly healthy kids, and we are giving them less safety and attention than we are for drugs, for people that are in serious circumstances. So let's get to, you know, your investigations and your studies. A lot of people are going to Mexico and clinics like yours or, you know, hospitals like yours because you are doing cutting edge things. Some of them old, some of them like Coley's toxins. But, um, there's this idea that pharma is hiding the cancer cure, right? That, you know, if they, if they, if they found the cure. I think I picture it like Raiders of the Lost Ark. You finally find the ark. Merck buys it, and then they go down into a basement somewhere, and they hide it away so that no one ever sees it. Is that what's happening with cancer, in your opinion?

[01:26:57] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

I don't personally believe that. I mean, we've tried every possible alternative type treatment for patients over the last ten years.

[01:27:05] Del Bigtree

Even the ones that doctors apparently have died for. Gc-maf.

[01:27:09] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yes.

[01:27:09] Del Bigtree

Have you tried Gc-maf?

[01:27:10] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yes we have. Yes. I mean, literally everything. And so if there was a hidden cure for cancer, like we would have found it. You're looking for passion, right? You know, I would love to be able to tell the world this is this is it. But you know, there's there's no magic bullet to cancer. The reality is in the alternative field, which I don't necessarily consider as alternative anymore, but alternative and conventional, Nobody has a great answer for stage four metastatic cancer. And you have both sides throwing stones. All the while, patients are dying and kind of stuck in the middle of this throwing stones fight. Um, you know, we are seeing incredible gains with immunotherapy for cancer. The checkpoint inhibitors have changed the game. Um, but we have a long way to go. But I do think we're close with all of the new diagnostic technologies. I mean, if you can pinpoint certain things within the cancer, if we can figure out what creates an immune response to cancer, we work on the cancer dark matter, which is the non-coding region of of the cancer. We work on what's called viral mimicry right now, where we're trying to mimic a virus virus in the tumor, to create an immune response, to trick the immune system to thinking that the tumor is a virus.

[01:28:25] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

And, you know, I think that we're making really, really good gains and we have really smart people working with us, you know, but I talked to Franco, for instance. And Franco says, yeah, if I had seven years and unlimited funds and I could just get all the red tape out of the way. You know, he really believes that that we could cure two thirds of solid tumor cancers in that 5 to 7 year period. And so my job, as I see it, is to make it as easy as possible for him. We have a very favorable regulatory environment in Mexico. We have a good relationship with the Cofepris. Um, we have all the licensing set up to where we can do these faster trials, phase zero trials, really, and, uh, translate this, these discoveries very fast. And so my job really is to help Franco have what he needs with as little friction as possible so we can make that vision come true.

[01:29:21] Del Bigtree

What's some of the most exciting advancements you've had?

[01:29:25] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Well, I think, uh, on the cancer side, you know, we went through thousands of tumor cell lines in silico, so in computerized model and we picked the top ten most immunogenic, meaning the immune system could see that tumor cell line the most. And then from that ten we brought those ten into the lab and tested them in the lab to find the most immunogenic tumor cell line. Then we knocked down genes in different tumor cell lines to see what gene knockdown caused the most immunogenic cell death. Same process in silico, same process in the lab. And then we're knocking down we're using the most immunogenic gene knock down in the most immunogenic tumor cell line. And we've developed a secretome from that, which is like a super adjuvant for cancer. And I'm very excited about that from there. Same process. We're also doing extracellular vesicles or exosomes out of those as well, and combining that with our dendritic cell vaccine, which is another pretty advanced vaccine. So those three things in combination I think are really cool.

[01:30:31] Del Bigtree

We also and these are vaccines that are essentially trying to inspire the immune system to attack the cancer that's in your body, like in finding some part of that cancer, I guess basically put like you would a virus growing it, putting it inside and then saying, here's a way that the immune system can recognize, oh, that's my enemy and then attacks the cancer. Exactly. Which it should have been. I mean, really, cancer is supposed to be being attacked by our immune system, correct? I mean, isn't that.

[01:31:01] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yes.

[01:31:01] Del Bigtree

I mean, it's I don't have cancer right now. They have cancer cells because I have an immune system that is perpetually fighting and attacking cancer.

[01:31:09] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yes, we have cancer going through us all the time and cancer grows, uh, kind of secretly in the immune system. The immune system doesn't see it. If you can make the immune system see cancer, it will attack it and kill it. You know, the hard part is getting it to see that. And that's our focus. How do we get the immune system to see the cancer? And then how do we create a death in the cell that creates the immune system to see it even more. So we do something called cryoablation where we'll freeze a tumor. We'll inject it with different adjuvants. So let's say you have a tumor in the lung with the goal from the cryo, they're to get a tumor in the leg to go away called the abscopal effect. So that's technically a vaccine inside the person's own body. We use the patient's own tumors many times though. So it's autologous. You know therapy in those cases.

[01:32:01] Del Bigtree

Any patents do you like? Do you try to apply for patents coming out of Mexico? Oh, those American patents. Like how does that process work?

[01:32:08] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah. They're American. I mean, we have our biotech in Boston.

[01:32:11] Del Bigtree

You said you have clinics, right?

[01:32:12] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

And yeah, we have a new one for the Secretome and the EV product. We have something called a map cell coming out, which is a new stem cell that we're really excited about. Um, there's something called a muse cell and a muse. Yeah, M u s e and there's a doctor out of Japan that's done some really good work on that. And we took a lot of what she had learned and made it even better. So they had, at least from what we could understand, scalability problems and really how do you scale what they do? Well, we've figured that out and found other markers in the stem cells that they didn't know about that might even make that cell drive even better. And we're very excited about the map cell.

[01:32:55] Del Bigtree

So wow. So, so, so what's your recommendation to someone that's like, do I want to go and to a clinic like Tam? Do I want to go like, what's a part of the decision making? Obviously, I'm going to get conventional here. Everyone's getting the same thing. In America, we it's standardized. But when we're going to Mexico, why does someone make that choice?

[01:33:21] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Well, I think for herniated discs, for instance, with stem cells, we are herniated disc. Yes, we're the best at that. We do about 20 herniated disc procedures a week, and we're about to publish over 500 patient study showing the success of that. But, um, I would go I would go to Mexico all day long if I had a herniated disc. Yeah. You know, before surgeries of knees, shoulders, etc. were great at growing back Labrums were great at knee injuries. Um, and then for cancer, you know, for diagnostics, like if you want to get as much information as you possibly can about your cancer, you would want to come to us because we can get that information. And that's not part of, of the standard of care in the US. And then you can take that information and potentially use it in the US with your oncologist, because they might have extra targets to with targeted, approved medications to attack. Or we can do some customized, uh, treatments, you know, in Mexico as well. So, you know, we work with a lot with oncologists in the US. We don't see them as like opposition or anything like that. And, you know, we really want to build a bridge. You know, they build bridges, not walls. Like how do we work with other groups? And because ultimately the patient does better when people are working together and they're not, uh, you know, being told, oh, you can't trust him or this or that or, you know, conventional is all bad. I don't think most oncologists are bad. I mean, oncologists, they have one of the toughest jobs. I mean, can you imagine they have metastatic cancer patients coming in that have a small chance possibly of surviving. And they're seeing that day in and day out. So a lot of them seem cold, but no telling what they're going through emotionally inside. And I think, you know, we should probably give them a little grace, but, um, you know, we want to work with the other side. Uh, we want to, you know, basically give the patient the best chance for recovery of anything that we're working with.

[01:35:16] Del Bigtree

Where does the whole stem cell world at? I actually, you know, I was telling you before the show, I had an opportunity because I broke some ribs skiing. I think it was like six weeks ago now. I got sent red lights every like, man, I'm doing really well. I think I healed pretty quickly, but I was just about to like, do I get a stem cell injection? I know they're saving. I heard the miracle statements, but I'm just asking myself like, how many stem cells is there too many stem cells in a body? That's my number one question. Is anyone asking? Everyone's like, oh, I have a product that increases your stem cells. This increases your stem cells. Like it's all about stem cells. But I'm a skeptic. I think people that watch this show know on all sides, like I'm always going to ask the question, what do we know about stem cells now? Are there too many stem cells? Is there injecting the wrong places? Does anyone care?

[01:36:07] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah. Well, I'm a skeptic too, by the way, on a lot of what's being advertised as stem cells. I've seen the supplements. I don't know anything about that, so I don't know how that works. If it's true or not. Sounds almost too good to be true, but maybe they got some peer reviewed literature we could read. Um, but there are meta analysis showing what the minimum effective dose of specific stem cell treatments are. And so I could show you the meta analysis and maybe for your shoulder or your rib. You know, we could go based off of the literature. Yeah. There's different types of stem cells. There's, you know, bone marrow derived adipose derived umbilical cord derived mesenchymal stem cells. Um, and, uh, you know, you can choose which, which one you want. We have adipose and umbilical cord derived. Okay. Um, we grow ours in hypoxia. So, um, there's most people grow theirs in what's called a normoxic environment. It's at like 20% oxygen. Um, and, you know, it's a very simple cell growing process. We grow ours at 5% oxygen because that's the oxygen level inside most of the places in your body going into a disc. For instance, you want to have a cell that's grown in low oxygen that's similar to where it's being injected into. Mm.

[01:37:29] Del Bigtree

Interesting.

[01:37:29] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah. But, um, you know, we did a study recently where we ordered 5 or 6 of the top Wharton jelly products in the US because people are claiming Wharton's jelly, minimally manipulated. Wharton jelly is a stem cell and they're marketing it as stem cells. And there were virtually no stem cells in those products. We published this in the Journal of Translational Medicine, and between 81 and 100% of those cells were dead. So, um, you know, now, does that say that Wharton's jelly, you can't get stem cells and plate them and grow them. No, that's that. That would be something similar to what we do. But the Wharton's jelly being marketed in America. Uh, most of it is not actually a stem cell product. So, uh, you know, I could point you to literature and let you make an informed decision on what's best for you based on the science.

[01:38:23] Del Bigtree

I think you've briefly probably met Bobby Kennedy, but you know, when you think about, you know, we have I think we have a very, you know, porous group now open to I mean, I got to sit in some of the conversations. I know Marty Makary wants to look at, um, new technology. He wants to fast track things that are working. Doctor Oz obviously spent his life doing shows like this. He had his own show celebrating things that were working. I know Bobby, you know, but what what would be, you know, what would you say to them? What what do you think needs to happen inside the US government agencies to put America back on top of medical and science research? What has to happen?

[01:39:06] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Well, I think for stem cells, for instance, let these companies jump to phase three and let's do a big study, you know, and maybe have the NIH help fund, You know those studies because the idea that a stem cell that is a legitimate biotech company that's been doing it has to go through phase one and phase two and wait five to 7 to 10 years to get the trial done is pretty ridiculous. When we we know the safety and we know that it has signals of efficacy. Yeah. Um, you know, for health care overall, especially with diseases like cancer or, you know, something that's considered terminal, I think we need early access. And I think they're doing a pretty good job with that right now. But they really need to figure out how to lower the cost across the board. So for instance, if we were to go into a phase three, we'd probably have to sell to Big Pharma because we can't fund the 100,000,500 million, however much it is type study. And so there's got to be ways kind of around that. We've solved the phase one problem with our model in Mexico.

[01:40:08] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

It was based to bypass the the broken system in the US where we can do trials in Mexico. Give the US FDA our data. I hope that they take it and let us jump to phase two or phase three so we don't waste that first 5 to 7 years. So that's one way to do it. But they really need to figure out a way to lower the cost of that phase three trial because, um, you know, we've never taken an outside investor. They're still just three of us. And we've done it intentionally because we don't want to be beholden to big Pharma or some corporate interest. Now it's really hard. You can imagine. Yeah, it's really hard to do. But that's what we've we've tried to do. We will hold off as long as we can, but maybe one day we have to have to do it. Um, but I wish that weren't the case and I wish it could be more reasonable, uh, to get a drug through the phase three process, especially when we see, um, you know, like for instance, with our disk injections, how well it's working.

[01:41:08] Del Bigtree

One of the interesting conversations I had was with Jim O'Neill, who I don't, I don't know what happened to him inside of the government. He was there for a little while, but, um, he was really caught up in the fact that FDA changed its mandate. It was supposed to just be focused on safety. Um, and then let efficacy be decided by doctors, patients, and all that. Very interesting. If we return to that, the idea though, being and I see more and more of this, whether or not returning to just safety is the way to go. But what he pointed out to me was that efficacy was changed by pharma. They wanted, as soon as they made FDA responsible for efficacy. That's the \$100 million trials. That's where you just make everything way too expensive to have any competitors. They'll complain about the red tape. But as you just said, only Big Pharma can afford it. And so it keeps all competition out. And it also sort of instantly turns FDA into promoting body because now it's giving you the seal of approval and you're off and running. There's an argument to say, what if we took that away from them? Let's get back to efficacy being decided by, you know, results. Hospitals can show the results. Patients can go where they're seeing results. All you have to do is prove that this product is safe and, you know, relatively safe. You know, but that idea making it cheaper. I think pharma is behind making those things really expensive. They want they want you to have to go through these double blind, you know, studies that, you know, they'll skip them whenever they can, but they want you to have to go through it because then you can't compete. We get no new ideas. It slows the entire thing down.

[01:42:43] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Yeah. Well, you know, if the government could do like the a lot of the CRO work, the clinical research organization work, um, and do the testing for some of these biotechs. I mean, for instance, we had acquired a team from Boston. What they were spending \$800,000 or so a month on. We're spending about \$60,000 a month because we fully vertically integrated. So we do all of our tests. We do everything in-house. But, um, you know, most biotechs don't. I mean, nobody else really has that. That was our model. And but if the NIH or NCI could do testing for these trials, it would dramatically lower the cost. I mean, the cost for the testing when they send out the samples, the markup is outrageous. Yeah. And so that really hurts smaller biotechs from being able to really progress their research because everything costs so much. But it really doesn't cost that much when, you know, you do it in house, you have to have a certain amount of sample sizes. So, you know, if you run a flow cell on a sequencer, you need to make sure that flow cell is full because you're going to spend, whether you have one sample or 50 samples, the same amount. And, but you know, if you can really solve those problems and understand the math and the samples for the clinical trials, you can drop the cost tremendously. That's what we've built, you know, within our own, uh, system, but we're kind of the only ones at least that I know that are like that, but that's what the model needs to do is to lower the cost. Use common sense. We use first principles on everything. Like we question every way something is done. If it's just the way it's done, like, well, why yeah, why why why? And, um, you know, I think that is a way to get the, the cost down a lot doing, um, you know, just safety trials with the FDA. It's an interesting idea. I don't know how insurance would pay for these things afterwards. You know, if we don't know if they're.

[01:44:37] Del Bigtree

If they work

[01:44:37] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

I'm sure he's thought about that. So I'd be interested to see what he has to say about it. But, um, you know, there's a lot of good ideas to do this, but we people have to be open to it and we've got to be open to like breaking everything down to first principle. Um, and that's where you can really find the savings in health care.

[01:44:57] Del Bigtree

If people are interested, are watching this, they have a cancer, an issue. Where's the best way like website? Where's all your information?

[01:45:06] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

You can go to theTamcenter.com for the degenerative disease or cancer side CPI stem cells.com on the stem cell side musculoskeletal. And we'll have our Tam global and Tam bioscience website up soon.

[01:45:21] Del Bigtree

Alright. Very cool. Look, I, I know part of your story we're interviewing you was, uh, you got arrested and actually went to jail right before your life made this transition. Can we talk about that off the record, maybe how that affected your life?

[01:45:35] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Sure. Let's do it

[01:45:36] Del Bigtree

And motivate you. Okay. Awesome. Well, look, if you want to know a little bit more about Tam, here's an incredible video that shows you what they got going on.

[01:45:45] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Approximately 600,000 people die every year in the United States of cancer. 700,000 people die of heart disease. And chronic disease is an epidemic of monumental scale.

[01:45:56] Male Speaker

There's too many people that are dying because they don't have the access they need to the leading edge scientists to the advanced Diagnostics and the next generation therapeutics.

[01:46:07] Male Speaker

It sounds dramatic, but I was planning my funeral. I felt like I was shooting myself in the head.

[01:46:11] Female Speaker

My oncologist at Dana-Farber Cancer Center said no one has lived longer than three years.

[01:46:16] Male Speaker

I can't tell you how I'm going to live, but I have a choice of how I'm going to die.

[01:46:20] Dr. Francesco Marincola, M.D., Chief Scientific Officer

I do believe that an individual has the right to at least make an informed decision about what is their best option for anything in life, including treatment of their own terminal disease.

[01:46:31] Dedrick Allen Pery, TAM Co-Founder

As it stands right now, it can take anywhere from 10 to 15 years for patients to get access to certain treatment.

[01:46:37] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

Why should a patient wait 10 to 15 years when they don't even have 10 to 15 months?

[01:46:42] Dr. Michael Liebman, Ph.D., Scientific Advisory Board

I think it's important for the world to understand. Tam is trying to seed and then help propagate a new model.

[01:46:49] Dr. Vijah Mahunt, MS, Ph.D., Chief Technology Officer

It's going to have a ripple effect.

[01:46:51] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

The idea of Tam center started with a question, what if we could put some of the leading scientists in the world, the manufacturers, the inventors, the creators of these leading edge therapeutics and diagnostics into one location, working side by side with medical doctors so their breakthroughs aren't so far away from the clinic and the patient. What if we could have the scientists working directly with the doctor, solving these complex problems in a regulatory environment that favored the patient's outcome over the red tape?

[01:47:25] Scotty Nelson, TAM Co-Founder

We are recruiting the best scientists. We're recruiting the best doctors.

[01:47:29] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

We have Franco Marincola, who is the chief of infectious disease and immunogenetics for the National Institutes of Health. He is the founder and editor in chief of the Journal of Translational Medicine, and he's the coeditor of one of the main textbooks that oncologists use for immunotherapy for cancer.

[01:47:45] Dr. Ali Asadi, Ph.D., Chief Innovation Officer

The time leadership are revolutionizing beyond the boundaries, the healthcare landscape.

[01:47:53] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

We have Ali Asadi as our new chief innovation officer. He invented the very first proteomic product. Using next generation sequencing, you can get the best genomic data, you can get the best proteomic data, you can get the best methylation data, but we're the first to combine it in a true multi-omic approach.

[01:48:11] Dr. Ali Asadi, Ph.D., Chief Innovation Officer

Multimomics is the comprehensive tools that look at human health at different angles.

[01:48:18] Dr. Michael Liebman, Ph.D., Scientific Advisory Board

They're expanding the different options that a physician has to treat the patient.

[01:48:22] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

We want to help the people that nobody else is willing to help. We want to go that extra mile to do whatever it takes when everybody else has given up.

[01:48:29] Dedrick Allen Pery, TAM Co-Founder

We are at the intersection of revolution. The patients are demanding.

[01:48:33] Ed Clay, Former MMA Trainer, Founder, Cellular Performance Institute, theTAMcenter.com

It's making the ultimate difference of saving lives. There's nothing bigger than that.

[01:48:47] Del Bigtree

Alright. Well, I want to thank you for moving through our bumps along the road today. Um, you would think it was April 1st, but it's the second. Keep trying to tell my team that. Not funny. Anyway, look, you know, this work that we do here, the fact that we can point you to our original videos in the middle of Covid, and you can see we were telling you what we're now seeing in the emails. I'm not shocked that the Biden administration lied to you. They were lying from the very beginning. They were lying with the emergency use authorization when they told you it was 95% effective. You knew that if you were watching The HighWire, not because you had to take our word for it, but because we showed you our evidence. We showed you the emergency use authorization. We showed you where the FDA was admitting we have no idea if this thing stops transmission. We didn't even test for that essentially was what they were admitting to in the documents. See, we go to the documents. We don't care what the experts are saying. We go to the evidence of what is taking place. This is an evidence based show. And, you know, it's love talking to guys like Ed Clay that are on the cutting edge of developing evidence. What does that actually mean? What is a risk.

[01:49:58] Del Bigtree

And then certainly we should weigh in. Where are you at in your life? Are you dying at the moment? Certainly changes your risk reward or the risk profile of the decisions that you're making versus a perfectly healthy child? These are the conversations you are not hearing anywhere else on any certainly news network. No one's going to take the time. Meanwhile, you're going to your doctors and you're believing everything that you're being told there. And most likely, they don't really even know what the science is because they're just pushing what the next drug that came through the door is. So if you want to keep this work going, if you want proper testing, proper science, especially on the products that are being given to your kids, how about especially the ones that are being forced on your kids in some states, like, you know, California, New York, same states that are trying to oppress the spellers right now? Shocker, right? We keep seeing these patterns, but we don't just talk about it on The HighWire. We fight for it? We go into courtrooms and make changes. And you're making that possible. So I just want to give a shout out to all of you that sponsor and make this work possible at The HighWire. And I hope if you, you know, are watching the first time or you've been watching and thinking, you know, um, I wonder, you know, would my dollar make a difference? Well, I tell you, every one of you that just thought that we would have had a backup computer today, we could have kept the show running.

[01:51:25] Del Bigtree

We actually could use your help. We are. We run everything bare bones here. Very simply. It's a great looking set, but most of it built with my hands and my friends. And these are just television knockoffs behind you, not a \$60,000 video wall. We don't waste our money on things if we think we can do it as simpler, tighter, better way. That's how we do the work here. And today is evidence that sometimes every once in a while, in fact, I think Cole has been here for eight years and one day, and that's the first time he's had to move out to my desk and run on a different computer. So we have a pretty good track record. We also have an amazing track record in court. If you want to help us do that work to free the five to bring home a final victory in West Virginia right now, where we won back the religious exemption. But now we've got 20 attorneys that have run and gotten the state, you know, in the appellate courts to hold up that decision. So we're in the fight of our lives.

[01:52:22] Del Bigtree

If you want to be in that, or at least vicariously living that fight through us. I hope you'll donate now become a recurring donor. Uh, if you go to the top of any of the screens here where you watch the show, you can just click on the donate button. We're asking to be recurring donor. \$26 for 2026 would be awesome. Um, as we say at the top of the show, there's no corporation that is funding the work that we do here. You are our sponsors. And so look, if you are listening right now, not watching a visual, we'll make it really easy. Just text 72022 right in the word donate, and then I will return a text right back to you immediately so that you can get started. Just get involved. Start being a part of making the world a better place. It's really what I love about both these powerful stories today, whether it's spellers and Dawn Marie and Elizabeth. Look at this hero who's stepping up, uh, expressing her, you know, ability to communicate and fighting for others to communicate when the machine, the oppression, the deep state, the pharmaceutical corruption, whatever you want to call it, is trying to shut it down. And then you have Edgar Clay that, you know, drops everything he's doing on a mission to save his mom and is now looking at science in a whole new way and saving so many lives.

[01:53:43] Del Bigtree

Uh, I hope these are inspiring stories for you. That's what we set out to do is to inspire you to recognize you're here for a reason. We all are. Alaa, there's no way that we hear a story like, oh my God, that guy. What an amazing guy. You're an amazing person. And if you're not waking up in the morning doing what you love or following that passion, recognize that every single week on The HighWire, you're seeing individuals that did just that. Just stop dreaming about it and suddenly just started putting one foot in front of the other. It's a life changing experience. But if we all do that, if we all follow that calling, I don't think there's an authoritarian system in the world that is going to keep us from our destiny. So that is what we're going to keep celebrating. I want to bring attention to one of the big fights happening later on this month. We're in April. On April 27th, the Supreme Court is going to hear the case of Monsanto and Bayer and whether they should be protected from liability after the billions of dollars they're losing in courtrooms, exactly like the 1986 moment, they are saying to the United States government. We are losing so much money from these legal cases.

[01:54:54] Del Bigtree

We can't make a profit, and we're going to stop spraying poison over all of your food if you don't protect us from liability. You want to have a voice in that? Meet us on April 27th in Washington, D.C., in front of the Supreme Court. We'll be marching there. We're going to have some great speakers to be speaking while we march. It's going to be a celebration. Bring your kids. Bring your family. Show them what you know. Civil disobedience looks like walking there in peace but standing for something. And while you're standing there, be great to know. What made you stand up? What made you change your mind? What really inspires you to maybe be a more dynamic individual? That's what we think we're inspiring on the high wire. Things like opening your Faraday bag helps people understand where are you getting that energy from? Oh, well, did you know you probably if we're going to have this conversation, I may want to put my phone in here and not have people listening in on it. Or maybe it's a B brave hat, but at that march. Wouldn't it be cool to wear some of the merch and it's all 60% off? A great way to. Donate to us right now. 60% off all merch. Grab a Faraday bag at Be Brave hat or. Even a high wire sweatshirt. Take a look at this.

[01:56:07] Male Speaker

Good evening ladies and gentleman.

[01:56:09] Male Speaker

The Highwire

[01:56:16] Lee Bigtree

We asked and you delivered, showing us how you Highwire.

[01:56:20] Female Speaker

This is how we Highwire.

[01:56:22] Female Speaker

This is how we Highwire

[01:56:23] Lee Bigtree

Team Highwire is being repped from all over the world.

[01:56:28] Female Speaker

Sporting our new Highwire gear in the Free State of Florida.

[01:56:31] Male Speaker

And I wear this cap. Makes me feel proud.

[01:56:33] Female Speaker

I am a doula and childbirth educator and I love wearing my Get Factsinated T-shirt.

[01:56:39] Lee Bigtree

Sometimes it's not just what you wear, it's who you meet while wearing it.

[01:56:42] Female Speaker

When I was wearing this shirt yesterday, a tourist came up to me and said, love that shirt.

[01:56:47] Male Speaker

Since 2020 when I woke up from The Matrix. I've been talking to neighbors, connecting with local groups.

[01:56:53] Female Speaker

There are a lot of people that are a little bit hesitant about approaching the topic of vaccination, and this wearing this shirt allows them to approach me, and I know exactly where to send them.

[01:57:02] Lee Bigtree

Whether you're dropping the kids at school or marching in rallies across the globe. We see your dedication, we feel your support. And now it's easier than ever to join the movement because we're having our biggest sale yet. We want to see millions of truth tellers show in the world how they high wire. Head to Thehighwire.com shop to support our mission and stock up on gear for the whole family.

[01:57:27] Female Speaker

Thank you so much. Keep it up.

[01:57:29] Male Speaker

Thank you for spreading truth.

[01:57:30] Female Speaker

We love you guys. Thanks for what you do.

[01:57:37] Del Bigtree

Alright, well, look, if you are even considering going to the people versus Poison rally in Washington, DC on April 27th. Go to the website peopleversuspoison.org. You can register there. That helps us understand how many people we should be prepared for. While we're there. And also there will be some, you know, news flashes and links that we're going to keep adding there. We may need you to talk to your representatives. It sounds like this liability protection might have leaked its way into the farm bill. I think we'll be talking about that next week. So they're coming at us from all directions. Pharma is retaliating. The American Academy of Pediatrics has won a lawsuit. There's they've got Robert Kennedy Jr under attack. Does that mean. Oh, just throw it in. Just give it up. No. That means we get louder, we get louder, we get bigger. We are in the offensive position. They're stealing our language. Calling what? They have a cult or religion. Vaccines. Amen. They can't provide a single safety trial. But now they're going to try to say we're the ones that are practicing some sort of religious ideology? I don't think so. But it's going to take all of our voices. This is the moment that we've been waiting for. We've been chosen, I believe, for this moment. This is what The HighWire is talking about every day. Are you ready to win this? Are you ready to do what it takes? Are you ready to say yes? Well, I hope you keep saying yes as God speaks through you, as you are guided for what you're supposed to do next. This is the moment and we are happy to be here. I hope you are too, and we'll see you next week on The HighWire.

END OF TRANSCRIPT