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Randy Grellner, DO, Physician & State Senator (R-OK)

James P. Miller, MD, Former Trauma Surgeon

Gail Macrae, RN, BSN, Acute Care Nurse

Ralph Lorigo, ESQ. Multi Practice Attorney in New York

Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Zach Lahn (R) Gubernational Candidate for Iowa

Robert Malone, MD, MS, MRNA Vaccine Pioneer

Female News Correspondent

Male News Correspondent

Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Female Speaker

Male Speaker

Neil Oliver, Broadcaster and Author

START OF TRANSCRIPT

[00:00:05] Del Bigtree

Have you noticed that this show doesn't have any commercials? I'm not selling you diapers or vitamins or smoothies or gasoline. That's because I don't want any corporate sponsors telling me what I can investigate or what I can say. Instead, you are our sponsors. This is a production by our nonprofit, the Informed Consent Action Network. So if you want more investigations, if you want landmark legal wins, if you want hard hitting news, if you want the truth, go to. Icandecide.org and donate now. Alright everyone, we ready?

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

Yeah.

[00:00:45] Jenn Sherry Parry, Executive Producer

Let's do this.

[00:00:46] Del Bigtree

Action!

[00:01:00] Karen Hayles, Son Died Following Covid Hospitalization

Good morning, good afternoon, good evening. Wherever you are out there in the world, it's time to step out into the Highwire. Well, there's a first. I think we got a glimpse of like a glitch. Didn't have audio. Video wasn't running. Del, let's do this again. Anyway, just showing that we're all human. We're all human beings, and we're doing the best we can under difficult circumstances. We got a storm here. Probably gonna be hearing some rain, a little bit lightning everywhere. We've got generators running this time just to make sure we don't lose the video feed because the power goes out. It's one of those days and we're all in it together. I want to thank you for joining us today. It's actually it's been an incredible week. There's a lot happening in Washington, DC. One of the biggest things I think is the Ron Johnson hearing. Of course, Ron has just been spectacular in his investigation. Um, really triggered by Covid, all of the Covid vaccine injury stories, all of the issues that have taken place. He has been on top of it the science, the investigations. But really this week was all about the hospital protocols. Remember when they were locking people out of the hospital? They couldn't see their loved ones. Some of them wanted to give them ivermectin or hydroxychloroquine, or try a different approach than the remdesivir and the ventilators, where nine out of ten across America was dying trying to get a different protocol not allowed. Some people not even able to get their loved ones then out of the hospital system so they could treat them the way they thought was best. It was actually just a litany of really powerful stories, sad stories, and an indictment of what I would say is the biggest international malpractice event in the history of the world. Ron Johnson, hearing, which we stream live here on The HighWire, looked a little bit like this.

[00:02:54] Senator Ron Johnson, United States Senator (R-WI)

The early news and images coming out of China, Italy and New York City as they were coping with SARS cov two were alarming. Unfortunately, there were leaders who used the fear of the unknown to gain undue power and control over our response to Covid. Today, I am providing a platform for these stories to be told so that this kind of cruelty will not be repeated.

[00:03:19] Patty Myers, Husband Died Following a 2021 Covid Hospitalization

I'm here today on behalf of my son, Chase Hales.

[00:03:22] Stephanie Williamson, Husband died following a 2021 Covid Hospitalization

I have waited four and a half years to be the voice of my husband.

[00:03:26] Gail Seiler, Treated with Hostility at a Texas Hospital After Doctors Learned she was vaccinated for Covid-19

In December 2021, I entered a local hospital seeking treatment for Covid.

[00:03:31] Patty Myers, Husband Died Following a 2021 Covid Hospitalization

Tony, my husband, was 55 years old. Tony tested positive for Covid 19 on August 6th, 2021.

[00:03:39] Melodie McKeel, Husband Died following a 2021 Covid Hospitalization

My husband became seriously ill with Covid 19 and worsened rapidly.

[00:03:45] Darla Smith, Husband Died Following a 2021 Covid Hospitalization

I was unable to remain by his side to monitor his condition and advocate for his care, or communicate with him consistently in person.

[00:03:53] Patty Myers, Husband Died Following a 2021 Covid Hospitalization

After his oxygen level had fallen into the 80s. His doctor instructed us to go to the hospital. I drove him. It's the worst mistake of my life.

[00:04:04] Brad Seiler, Former Nurse and US Army Veteran

Instead of hearing a plan for how they would help her recover, our family was repeatedly told that she was unsalvageable, that her lungs were permanently damaged, and that which we should prepare for her death.

[00:04:19] Gail Seiler, Treated with Hostility at a Texas Hospital After Doctors Learned she was vaccinated for Covid-19

I repeatedly requested, um, treatments such as ivermectin, hydroxychloroquine, budesonide, zinc, vitamin C, and other early interventions, but those requests were denied.

[00:04:32] Patty Myers, Husband Died Following a 2021 Covid Hospitalization

The head ICU doctor told me to, quote, stay in my lane. After asking for ivermectin, cheap effective treatment was withheld or stopped.

[00:04:43] John Littell, MD, Family Physician

I overheard a young hospitalist berating a patient and his patients begging for ivermectin, something. I went up to that young hospitalist in the hallway and I said, you know, that patient on his cell phone in his room, isolated, knows more about the treatment of Covid than, you know, in your little finger.

[00:05:02] Pierre Kory, MD, Pulmonary & Critical Care Physician

The story of ivermectin is not how much evidence there is. The real story of ivermectin is how they convinced the world not to use it.

[00:05:10] Peggy Hokett, Husband Died Following Covid Hospitalization

The very next morning on August 28th, an infectious disease doctor called me and he said, your husband's going to die. He's unvaccinated. What did you expect?

[00:05:22] Gail Seiler, Treated with Hostility at a Texas Hospital After Doctors Learned she was vaccinated for Covid-19

When the hospitalist in the ICU learned that I was unvaccinated, he looked directly at me and said, I'm so sorry, Mrs. Seiler, but you're going to die.

[00:05:32] Randy Grellner, DO, Physician & State Senator (R-OK)

When did Madison decide that disagreement cancels dignity? When did our hospitals begin acting as though a patient who made a different choice deserved less respect?

[00:05:43] Peggy Hokett, Husband Died Following Covid Hospitalization

I could barely recognize my husband. He was severely bloated and fluids was dripping off of his body, onto the floor in puddles.

[00:05:54] Patty Myers, Husband Died Following a 2021 Covid Hospitalization

He was a hostage in that hospital. The final five days he texted me. Why are they not bringing me food? He struggled to receive water, ice and basic care.

[00:06:06] Gail Seiler, Treated with Hostility at a Texas Hospital After Doctors Learned she was vaccinated for Covid-19

After I had been hospitalized for 12 days, Brad entered the ICU on December 15th, intending to get me out of the hospital and take me home. Security and nurses followed him in demanding he leave, but Brad refused to leave without me.

[00:06:22] Brad Seiler, Former Nurse and US Army Veteran

Hospital administrators called law enforcement and what should have been a discharge became an approximately six hour standoff. I wouldn't abandon her. As we left, a nurse told me. Mark my words. She'll be dead tonight.

[00:06:38] Gail Seiler, Treated with Hostility at a Texas Hospital After Doctors Learned she was vaccinated for Covid-19

Doctors insisted that my lungs were permanently damaged and that I would not survive outside their care. They were wrong. With the help of Doctor Richard Bartlett. My husband and my daughter. They cared for me at home using treatments that the hospital had previously refused me, and I fully recovered.

[00:06:59] James P. Miller, MD, Former Trauma Surgeon

I watched previously compassionate and devoted doctors and nurses become cruel and ambivalent about the well-being of patients. As the Covid experience evolved.

[00:07:09] Gail Macrae, RN, BSN, Acute Care Nurse

Behind closed doors, we knew that we were committing these violations. Every doctor and nurse here will tell you that. And the reason that we didn't act on it is because of the lack of ethical training in our professions. They've institutionalized us, and we don't have the ethical backbone to protect our patients first.

[00:07:31] Peggy Hokett, Husband Died Following Covid Hospitalization

Raymond can no longer speak for himself, but I can. I am asking Congress to seek the truth and find out what happened to my husband and many other victims of this severely flawed hospital protocols.

[00:07:46] Karen Hayles, Son Died Following Covid Hospitalization

Nothing's going to bring back my son. But those responsible should be held accountable.

[00:07:55] Ralph Lorigo, ESQ. Multi Practice Attorney in New York

This is about medical freedom and the right to try. This is about governmental suppression and how big giants like Big Pharma control our destiny.

[00:08:06] John Littell, MD, Family Physician

If I've learned nothing else in my 36 years as a family physician, it is that there is no healing without hope. And thank you, Senator Johnson, for helping us give hope.

[00:08:30] Del Bigtree

Obviously, a very emotional day on Capitol Hill Monday when all of that was taking place. Um, if you want to watch that, didn't have the opportunity to see it live. It's on our website here. You can see it. Senator Ron Johnson roundtable. Covid hospital protocols under the microscope. Just once again, just a shout out to Senator Ron Johnson. I've said it before. He sat with me before the last election, said the only reason I'm running again is I want to bring justice for all those people that have been injured by a vaccine injury. It's literally the one reason he decided to try and get back in office and talk about someone sticking to his word under very, very difficult circumstances. You know, even with this administration, there's still tons of senators and assembly members and you name it. Most of that town are buying what happened there hook, line and sinker. It's hard to wrap your head around, especially when you watch those hearings, but it might be something to check out. Maybe you find something you can share with a friend or a loved one that might help them open up their mind and recognize what happened here. If you've been watching The HighWire you, you know, we didn't just tell the stories of those that were happening here in America. I've been traveling all over the world. It happened in Italy. It happened in France, Poland. It happened everywhere. Which means there was this very bizarre international cabal that forced all of medicine to take a path that ended in the death and destruction of innocent human beings.

[00:09:57] Del Bigtree

There's no other way to see it. It defies all reason as we know it. And as you watch this hearing, even just watching, um, you know, that montage, you get the sense that in some other time in this country, especially every eyeball in America, would have been riveted to their television sets going, I can't believe this actually happened. I can't believe, you know, these people's stories. I can't believe real doctors and scientists are explaining what they did, what they were told to do, how they went along with it. And yet we live this amazing world now where we're just in these silos, where those of us that are interested see it, and the rest have no idea what's going on. The rest have no idea that Tony the science Fauci plead the fifth. I've asked friends of mine in liberal states like Colorado and California have heard about that. No, I haven't heard anything about that. You haven't heard about the guy that locked us all down, forced a vaccine that couldn't stop transmission, was rushed under the market, causes myocarditis, pericarditis, you know, blood clots, you name it. You haven't heard that. That guy is now pleading the fifth. I mean, it's really astounding, isn't it? I mean, there's are things that when you think about Watergate, what was Watergate compared to the stories that are breaking now? But anyway, I want to give a shout out to Senator Ron Johnson.

[00:11:12] Del Bigtree

If you want to be alerted when we are covering these stories that are coming out of Washington, DC, these historical moments as they're happening, then really you just have to get on our mailing list and sign up so that we can give you text alerts. The best way to do that is 7 to 0 two, two, and, uh, type type in the word Dell. Just my name Dell. And I'll respond to you and get you signed up so that you are being made aware, so you can catch it in real time as the world is changing around us. Indeed, it really is a spectacular hearing, very emotional and my heart goes out to all the people that shared their stories and all the people around the world that have been destroyed by the lies that were propagated through mainstream media, carried out by scientists and doctors the world over. And as I've said, one of the scariest things is the scientists and doctors that didn't go along with that protocol that stood up against it. We're bringing, you know, having much more success saving people's lives. Most of them are under review or have already lost their licenses. This was a purging of all the great scientists and doctors that stuck to their Hippocratic oath, saying, I'm going to treat the individual right in front of me, and I don't care what the hospital system or some government bureaucrats are telling me to do.

[00:12:28] Del Bigtree

I know what's working. I'm sticking with it. So we now live in a very scary world where mainstream medicine is simply populated by drones, soldiers, if you will, that will do whatever the globalists tell them to do. And that is the sad matter. And it was really made apparent on Monday. I've got a big you know, one of those, by the way, is Pierre Kory. I do want to mention that Pierre Kory had a testimony. And I also want to point out that he has this incredible book that we put out through ICAN Press the War on Ivermectin. This lays it out in such incredible detail. And by the way, if you've read this book and then watched that hearing, it will really all come together for you. We are giving a 10% discount on our store right now. And we're also putting it out with a Highwire bumper sticker, which is super cool. We talk about shirts, we talk about hats, but throw this on your car and watch how many people come up to you in the grocery store parking lot and said, oh my God, you watch the Highwire too. You might just find a new friend in the town that you live in, but definitely get this book.

[00:13:31] Del Bigtree

Share it with those that you love. This story isn't really just about ivermectin, as Pierre Kory said it is. How did they get away with taking a life saving drug out of our hands, making it illegal, and therefore murdering millions of people around the world? An incredible book. Um, really big show. Coming up today, I'm going to be talking to Robert Malone, Doctor Robert Malone, in just a little bit. There's a petition that's going around. A lot of the experts and scientists that have been on this stage are signing it. And I'm going to talk about why I didn't sign it and talk to Robert Malone, just about how we can see something from different perspectives. It should be a great dialog. And then, of course, it's Breast Cancer Awareness Month, and I am going to be joined by Jennifer Simmons, doctor Jennifer Simmons, who's a breast cancer expert. Uh, should we be getting mammograms? That's what all the news is telling you to do. She might actually have a different perspective. And we're going to share that with you in a little bit. But first, it's time for the Jaxen report. All right. Jefferey. What do we got going on? Well, what do we not have going on this week? It's amazing how many things now are having to hit the editing room floor, because we are in an active cycle in the news.

[00:14:55] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Well, when we started the Highwire, the idea of vaccine safety informed consent, saying no to mandates, these were as as you know, and our audience knows, these were the third rail of all third rail topics. It's political suicide. Politicians want nothing to do with it. The media wanted nothing to do with it. But I want to put a spotlight on what has changed. And what has changed is now politicians are leaning into these subjects and actually using them as platforms during their candidacy, trying to get elected. What am I talking about? Zach Lahn in Iowa, who is the Republican candidate for Iowa governor in 2026, recently said this. Take a right.

[00:15:36] Zach Lahn (R) Gubernational Candidate for Iowa

The idea that you have to have a medical intervention to participate in society is wrong. And if we look at what happened through Covid, you know, we learned that the medical establishment did not deserve the trust we were giving it, and it's lost the trust. I think Iowans understand this as they lived through that period of understanding. You know, the process at which a product is approved, the rushed nature of it, the harmful effects it can have. Look, the average Covid vaccine has an adverse effect rating of one in 1 in 800. The swine flu vaccine, which was pulled off the market in the 1970s, had an adverse effect rate of 1 in 100,000. We are seeing as agencies up and down our government on the federal side are captured by big business, big pharmaceutical companies, and they're doing the bidding of those companies. And it's at the detriment of the health of our people many times. And so we just have to have the truth in science of what's going on. The medical establishment has not given us that. And so this is where the state of Iowa plays a role, whether it's on farm chemicals or whether it's on vaccinations. Look, we know there's benefits from vaccinations, but the question is what? How many and who has the choice? I believe the choice is between parents and their doctors to make the choice for their children, and they shouldn't be penalized by being taken out of society for choosing not to take a medical intervention.

[00:16:58] Del Bigtree

It's very well stated, and boy, you are right. What? You know, we are in a totally different place now.

[00:17:06] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

And why is this important? Not just because it's a sea change for conversation, for political, upcoming political candidates. Because Trump's it's going to be a blink of an eye before Trump is out of office and his term is over. And Kennedy, it's questionable. Will the next administration continue to keep him on? We don't know. So it's important that political candidates, if they want these topics moved forward, if people want these topics, move forward, that's how they should be talking. Well, Iowa was interesting because there's a cross section of, as you heard him say, these crop chemicals, these cancer causing crop chemicals like glyphosate, that's a big farm country there. But also just earlier this year, here's a headline out of Iowa because the vaccine conversation is really heated there. "House lawmakers advanced bill to end school vaccine requirements." This would have been the first state that bill failed, but this would have been the first state to eliminate the requirement for children to be vaccinated in order to go to school. That is a huge thing. So to hear Leanne talk about lean into this and talk about it is really an interesting move because the bill originally died. So he appears to be bringing it back around. So that's a very interesting point I think people should really pay attention to.

[00:18:16] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

But it's not just that all the states now, it seems like or several of them are battling. So remember, we have governor Josh Shapiro in Pennsylvania and there's a measles scare. About a month ago, it was really heating up. He and Kennedy were are going back and forth well in that mix. The health department in Pennsylvania tried to throw in Covid era restrictions, health restrictions. So they wanted to they wanted to basically rewrite the Department of Health's, uh, statutes and be able to allow health officials to enter premises without a warrant. That means schools, apartment buildings, colleges. They want to be able to question. Yeah, yeah. And they wanted to be able to question students in private without parental consent or notice. But one of the big things they wanted to do was they wanted to have isolation and outbreak, quarantine of what they were calling presumed susceptibles. So we know how this goes. And this was just completely pushed back by the people. Here's the headline here. "Governor Josh Shapiro's administration will rescind Pennsylvania's disease tracking proposal that reignited pandemic era outrage." Remember what we just saw from Senator Johnson in all of that testimony, that heart wrenching testimony. People will never forget this. And anytime anything approaches a Covid era flavor, people were seeing them stand up and push back hard.

[00:19:38] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

This is what they did here. Listen to this quote. "The Department of Health received a historical high volume of feedback during the public commentary period, and it is clear additional stakeholder input is needed, Rowland said in a statement." He's the spokesperson for the Department of Health Historical. He's not saying we're just going to rescind this and not say anything about it. He's saying, look, we you got us. It's historical amount of feedback. Looks like most people aren't happy here. But the next the next headline here or the next I should say statement on this article, it says "nearly all of the members of the Republican caucuses in Pennsylvania, Senate and House submitted letters in opposition to the proposed regulations, arguing they were more restrictive than the ones enacted during the Covid 19 public health emergency and would infringe on Pennsylvania's Pennsylvanians constitutional rights." So there you have an entire political party in the Senate and the House sending letters. You know, they were getting emails, phone calls from their constituents saying, stop this. Stop this now. And they listened. So another another positive movement for the Covid era era. Failure is not coming back. And that's, that's you're seeing these state level movements. These are very, very important.

[00:20:49] Del Bigtree

Well, that's a huge one. I mean. She was running on it right? It's clear. I don't know if he's running for president. I know he's got you know he's he's he's bathing in pharmaceutical you know presence in what he's doing. He wants to be the pharmaceutical leader of, you know, America. He has decided to make Pennsylvania that. And you couldn't get two opposite, more opposite stories than Lamb. And then looking at him. But look what happened. He thinks, oh, I've got all these constituents that are afraid of viruses that are going to back me and, you know, being able to like, bring in authoritarian state. And he has to I mean, and think about that when you rescind something like that and basically make an apology to the public. You. I mean, that is not an easy decision to make. You mostly first just want to see, can we walk away from this and act like it never happened? No, sorry. We created too big a buzz. The people are against this and that. I mean, I really we always got to remember as this sort of, I call righteous apathy kicks in around, you know what we do well, how our vote doesn't matter who we are, doesn't matter. Saying things like that doesn't really make a difference. It really does make a difference. This sea change is only because there is still power to the people in the United States of America. What an awesome story that is.

[00:22:05] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Now, I want people to also look at the federal level here too, because it's not just states. Here's some reporting on a federal level move that people should be aware of. Here's the headline. Senate bill would make federal vaccine recommendations harder to stop and harder to undo. This is S 3323. So this is a federal bill. It's introduced in the United States Congress. It's called the Family Vaccine Protection Act. So with with a lot of the bills, when they see say something like that, you almost have to invert the meaning. So just to give a quick background, remember the ACip, the Advisory Committee on Immunization Practices, the advisory advising committee that makes recommendations. It's independent of to the CDC for vaccines that has been shut down by a judge, um, that in a lawsuit by the American Medical Association, mind you. So American.

[00:22:53] Del Bigtree

Academy of pediatrics that when it happened. But the AAP brought the lawsuit.

[00:22:57] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Yes, absolutely. Yep.

[00:22:59] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

And that was shut down right before the ACip was going to talk about Covid vaccine injuries. So the timing was you can't you can't really split those two hairs there. But that committee is offline now that makes the recommendation. So there's an issue. So now comes this bill, and let me read this bill here. I'm going to go right into it. It says the director. That's the CDC director. I'm gonna go to the second line. The director shall adopt now, it said before, consider now it shall adopt. So this is an order to the director of the CDC. Any such recommendation? That's by ACip, unless the director determines such recommendation is not supported by a preponderance. Preponderance of the best available peer reviewed scientific evidence and publishes the results of that review. So it's saying right there, ACip, any recommendation ACip makes, the CDC director must adopt it unless they can figure out a way to find all the science and publish it or publish it to refute the ACip. That's a pretty high bar. Now it goes further because it also talks about considerations for new vaccines. This bill is very detailed. It says, upon the licensure of any vaccine or any new indication for a vaccine under section 351, the advisory committee shall consider the use of the vaccine not later than its next regularly scheduled meeting.

[00:24:16] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

So they have to do it. But it also goes not later. Part B, not later than 90 days after receiving a notification in writing from the holder of the license of the vaccine. So two things right there are happening. This bill is saying that the ACip now it's now, it's now it's giving direction and orders to ACip. It's saying if there is a license, a licensure of a new vaccine or a new indication ACip, you have to take this up. And if there's not, if the pharmaceutical company writes ACip, they have to take it up. So it's allowing the pharmaceutical companies to direct them. So let's look at this for a second. Acip goes offline because because according to the lawsuit, it wasn't balanced enough. There needs more balance. And now this this comes in, this bill comes in and it's directing the CDC director. It's directing ACip. So you have to wonder if there's a plan for ACip moving forward here.

[00:25:10] Del Bigtree

Well, I want I want to weigh in here, Jeffrey, because this is really actually quite terrifying. And sometimes we get what I would say is a view. They show us their cars. They're showing their cards right now, and it's pretty scary. First of all, ACip is not a government agency. It tends. And up until Robert Kennedy Jr has been completely staffed by pharmaceutical entities that do not fill out their disclosures. It's been shown that they are absolutely conflicted, usually making money from the very industry that they're supposed to be, you know, representing or discussing or making recommendations about. And so what this is essentially saying is we don't want the CDC to have any power in this discussion. We want what we believe will be a captured, you know, regulatory body outside of the government that forces the CDC to do what it wants. And we're not even going to stop there. As soon as a pharmaceutical company comes up with a product, we don't want you to have the time to look at the science or investigate it or think about it. We want to warp speed to your very next meeting. You have to deal with it, and you have to move forward with whatever recommendations are made.

[00:26:22] Del Bigtree

What tells me there is obviously they feel like they can control Acip. These are all pharma shells. All of the people signing on to this are working for the pharma lobby, and it is clear that though they may be losing their hold over CDC and FDA right now on some level. Robert Kennedy Jr. We will definitely have control of this outside, you know, advisory board. So let's make that, you know, concrete. Anything they say cannot be moved against by the government of the United States of America. This is absolutely a play, the last play really for complete pharmaceutical control over the decisions that happen in our programs in America. People, you have got to be looking at this. They've just played their hand. This is how powerful pharma is, that it can get politicians to say, I don't even want the power. I want to give the power to the pharmaceutical industry. We've got to push back. We've got to reach out to our representatives and tell them what we think of this type of legislation. Really scary stuff, actually.

[00:27:25] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

And co-sponsors Richard Blumenthal, Adam Schiff, I want to end this segment on just a win coming out of Texas, Texas Attorney General Ken Paxton. He recently put out this headline, this press release here, um, secures landmark settlement with sprouts grocery stores. So, you know, those misters that miss the produce? Well, there's something called produce. Max, produce Max is a pesticide. A lot of people probably didn't know that. Um, and this is Ken Paxton. This is what he wrote in his press release. Pro "produce Max is an EPA registered antimicrobial pesticide containing hypochlorous acid chlorine based compound. Thousands of grocery stores across the United States have engaged in off label use of produce max in produce misting systems to allegedly control bacteria and extend shelf life. Now, under the settlement, sprouts has agreed to stop spraying produce Max on all produce, including conventional non-organic produce nationwide. Additionally, sprouts will cease use, missing or otherwise produce max or any other synthetic antimicrobial pesticide on all organic produce nationwide." So good on you sprouts. Good on you. Ken Paxton This is a win win for everybody, including really the consumer, the end consumer on this. This is a big, big win.

[00:28:37] Del Bigtree

It's amazing to see. When we see someone like Ken Paxton or people that are out there, attorney generals, and there's been some really great attorney generals over these last couple of years across this country. In fact, many of them are signing amicus briefs for the cases that we think we're bringing and going to the Supreme Court. So we're starting to really get attorney generals to pay attention. But when you see a story that we didn't even report on, right, it wasn't our investigation. This attorney general finds out that what is considered, I think, by most of us to be a health food store is poisoning our fresh produce before we bring it home and then is able to step in, bring a case, stop it, get sprouts to, you know, turn over a leaf and actually start, you know, taking care of the people that are buying there that didn't even know this was going on. I mean, these are, there's some real heroes out there, man. And I really want to, you know, give a shout out right now and say, look to all the attorney generals out there, man. Follow Ken Paxton's lead. These are amazing developments. And I'm, you know, happy to live in Texas, where this guy has really been great. Pushing back against Pfizer, demanding answers, investigations into Covid vaccines. He's really been spectacular. But this one blew me away.

[00:29:51] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Yeah, I mean, he's doing there's a lot of power in those attorney general positions. And I wish they'd all follow the lead of Ken Paxton because this is amazing. Yeah. I want to end this conversation, this segment here on the mental health crisis. This is something that it's really passionate. I am really passionate about. We are here at the HighWire. Um, I put out an entire documentary on Highwire plus if anybody hasn't seen that yet, you can go to The HighWire dot plus the words p, l, u s and watch this the mental health crisis. Um, I talked to psychiatrists saying very candid things about the entire industry and the limited tools they have, but something happened that makes me really happy. It just came out from the CDC. This is the youth health report. Um, and it's they do this every two years. It's a survey of students in grades nine through 12. And I want to bring people to this table from the survey. These are the results that they had from 2023 to now 2025 when the results were taken. You can see here on the left, these are what they asked. Persistent feelings of sadness or hopelessness. Um, poor mental health. So I'm going to go through each one. Persistent feelings of sadness and hopelessness. Helplessness dropped 7% from 2023 to 2025. Poor mental health. These are self surveys. Drop 6%. Seriously? Now we're getting some serious stuff here. Seriously considered attempting suicide? Drop 6%. Made a suicide plan. Dropped 4%. Attempted suicide. Dropped 3%. If you look at those numbers they're working with, these are hundreds of kids, hundreds of teens and adolescents and young adults that are not making plans for suicide, attempting suicide, considering it, or just having poor mental health.

[00:31:24] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

These are big, big, big numbers. Big changes. Real results. What? Why did this happen? Well, um, looking back, this was the spring semester of when this survey went out. So Kennedy had only been in office for about three and a half months. So it's unlikely that just him stepping into office would have influenced this this much. Although his work I'm going to go into in a moment with mental health is is completely legendary when it comes to the US government's efforts. But the Covid lockdown restrictions ended in May of 2023. So most likely the CDC report doesn't doesn't pontificate on why this is happening. But those lockdown restrictions ended. So perhaps people are these these kids were so excited about this that they actually, for the first time, saw a glimmer of hope in their lives that they were no longer being locked down forever, because in their short lives, that probably was a big impact when you had almost four years of lockdowns. So that's a that's a massively positive story here. But I want to go into also what what the government is doing. We have Kennedy making huge moves here. This was just this past summer. We have RFK Jr launches plan to address overuse of psychiatric medication medications. He's trying to curb SSRIs. He's trying to have a safe pathway for people that want to get off these drugs, because right now they're just kind of suggestions for clinicians.

[00:32:41] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

Doctors are just picking and choosing how these how these work, how people get off these things. It's a complete disaster because the studies have not been done. But then NIH went a step further. And HHS, I should say, went a step further. This is Kennedy. He announced over \$700 million in new funding for mental health addiction and homelessness. Now, when you first read that, you see mental health. Okay, great. But addiction and homelessness, what is what does that have to do with mental health? Well, we go to the Kaiser Family Foundation now it's called KFF, and we look at the latest numbers in 2026 of adults experiencing homelessness. And you can see by this chart, almost 25%, it says 24% there in 2025 of adults experiencing homelessness also have a serious mental illness. Now that's a big deal. So we have mental illness, serious mental illness, experiencing homelessness and disorder, substance use disorder. There's this cross section here. It's a very powerful cross section to address. And Kennedy, HHS, they're putting \$700 million into that pot to say this. We want this. We want to change this. Previous administrations have not even have not even done a fraction of what they're trying to do right now. So I believe moving forward, this is going to have continued to have results just like those CDC numbers. I'm looking forward to seeing these numbers being reduced, mental health being reduced, suicide attempts being reduced. We have we have a multifaceted approach now from the US government. This is the first time in my lifetime I've ever seen anything like this.

[00:34:13] Del Bigtree

I also wonder how much, you know, all of the, you know, transgender conversations and the racial conversations, children standing up and expressing how guilty they feel about the crimes of their forefathers. I mean, a lot of this was just so confusing for children and to be moving into a, you know, we've reported on how we're returning to a place of reason in these conversations and asking ourselves, is this really appropriate conversations for the age group that we're talking about? I think we've only seen the beginning of this turning around. If we, you know, stay on this. Why don't we let kids be kids? Why don't we let these conversations, you know, that that they're capable of having, have them not be discussing what they plan on their sexual life being in the future as adults when they're in kindergarten. I think all of those things have been weighing heavy on these poor children. And, you know, I really wonder if you took everybody on an SSRI and pulled them. Do they ever have suicidal thoughts? It's hard to imagine, given the side effects of those things and what's going on, that it wouldn't be like 100% of them.

[00:35:19] Del Bigtree

So what happens if we stop giving these drugs to people? Now, I know that people say they were suicidal, which is why they're on them. And that's this whole game that's being played. But there are so many fronts to this. I think we're just seeing the beginning of this reversal, but really incredible reporting. Jefferey a lot of, you know, positive things. I think going on, it does feel like we're coming out of this age of insanity that really peaked through Covid. On the other side, I hope we continue this trend. Um, great stuff. And by the way, Jefferey, you've got the download every Monday. I also want to remind everybody what you just said, which is all of those great Jefferey Jaxen investigates these deep dives into polio and mental health are now not just available to our members. We're opening up Highwire. Plus just type in Highwire dot plus. We want to make sure that everybody gets this information now. And each one of those is a powerful, brilliant documentary. You can watch them now. Jefferey. Keep up the good work and I'll see you next week.

[00:36:20] Jefferey Jaxen, Investigative Journalist, The Jaxen Report

All right. Thank you.

[00:36:21] Del Bigtree

All right. So as you know, we're big on petitions and letters and FOIA requests. It's a lot of what we do here at HighWire, and I can. We just recently had a petition that many of you signed, and we're going to be moving forward. Join Ican and telling Secretary Kennedy, please help the Covid 19 vaccine injured. Really what we discovered is he has the ability to override the decisions being made. I think it's like over 90% of the cases are being thrown out of the injured saying, oh, they weren't really injured by the vaccine. There's no way that that is possibly the number. There's no way 90% of them that are being injured are wrong about their story. And so that petition says the Secretary Kennedy, we actually found in the rules around your position, you can override that and, you know, begin a new judgment process or change what you think the judgment should be. So we are pressing on that. I love this opportunity. We're bringing pressure all the time. Um, but there's a letter. It's a lot like a petition right now that many are signing that is, um, got a lot of powerful language in it. It's an open letter regarding the removal of the mRNA platform addresses to Secretary and President Trump by Americans of Health freedom and the signatories. A lot of the scientists and doctors that have graced this, you know, desk right here have signed on.

[00:37:43] Del Bigtree

So let me just read through it. Uh, this is dear Secretary Kennedy and President Trump. Executive summary "as influential leaders within the health freedom movements, we are writing to object to policies under your oversight related to the mRNA platform and to call you to act on our policy goals. While the centerpiece of the MAHA health freedom agenda has been removal of mRNA shots, you have failed to take decisive action. And this front, despite overwhelming credible evidence, is the harm of this technology. Instead, your policies related to mRNA technology are neutered and self-defeating, putting pregnant women and children at risk, misleading parents and eroding their rights and failing to help those harmed by vaccines. If you continue to ignore our central issues of removing the mRNA platform, the Health Freedom Movement will withdraw their support of you and you will face the political consequences. Very strong words, but let's look at what they're asking for. We ask you to deliver our actual policy goals in the near term, or face the political consequences. They want to ban mRNA gene therapy derived technologies for all vaccines due to their demonstrated abject failure regarding safety, efficacy, and disease prevention. After more than four years of real world use and billions of doses administered." We have on this show, I think shown you every study explaining that that is true.

[00:39:02] Del Bigtree

This is the most horrendous technology probably ever to hit the planet earth. Uh, "terminate the Prep Act declaration of Covid injections as no emergency exists." I totally agree, there's no emergency. I don't believe in the Prep act. I don't believe in the 1986 act. This should definitely be erased. We should not be protecting manufacturers from the results of their products. "Recommend that Congress repeal the Prep Act entirely due to the numerous constitutional conflicts. Absolutely banned pharmaceutical direct to consumer advertising, as is the practice in every other country except New Zealand." I have been a proponent of this from the very beginning. I come from media. I'm telling you, our media is controlled by the industry. "Review and revise current HHS level policies that create perverse incentives for health care providers to engage in medical coercion, including but not limited to, vaccinations." And lastly, "end conflicts of interest at the CDC, FDA, FDA NIH NIAID." I'd. Uh, yeah. Um, and so those are all really incredibly important issues, but I haven't signed this. And a lot of people are asking me why. And so I thought, uh, instead of like writing a letter about it or putting out a post, why don't we just talk about it? And it really comes down to the mechanism inside of this. I agree with all these points. I think, you know, I'm passionate on all of these issues, but I do, you know, as and I'll be honest, like I was, I was reading through it.

[00:40:30] Del Bigtree

I'm like, yes, yes, yes, yes, yes. And you know, I was almost ready to sign. I mean, this stuff is so important, but it was really in this mechanism. And I kept, you know, I thought about it. I'm like, well, hold on a second and let's just read through it. It's in just from the second sentence here, "health freedom voters can and will walk away if we continue to see inaction or condescending Non-policy on our core issues." If you continue, let me read the rest of it. "If you continue to ignore the centerpiece of our policy agenda removing all mRNA products covered by Prep Act emergency declaration entirely from the market, you will pay a political price. We will run our own candidates in the state level. We will support other challengers and sponsors who share our values and advance our draft bills at the federal level, for the midterms and for 2028." So ultimately, it looks like this is being put out at an opportune time. We're coming into midterms. So political pressures are important, right? In order to keep, you know, the work going that Robert Kennedy Jr is or is not doing. And President Trump, um, they want to, you know, secure support inside of the House. And this is essentially saying we will withdraw support.

[00:41:50] Del Bigtree

And so I'll just be honest with you, I agree with all of the issues here? These are major issues. Children are dying. People are dying. This event that Ron Johnson had is pointing out, and many others like it. And people that have been on the stage. I've shed tears with these people telling their stories. React 19. We worked very closely with. But it comes down to this mechanism, and I just had to sit there and think, okay, would I really withdraw support if this mRNA thing isn't fixed? I guess we're saying by, you know, November or there's even voting going on right now, I suppose it's immediately if there's not immediate action on mRNA, am I going to withdraw support? Which made me think about do I think Bobby is doing nothing? And I think clearly we've just seen a report on many things that are being done that are great Siri investigations and changing the public perception of things, withdrawing, you know, gender, you know, blocking drugs, basically castrating children definitely changes in the food supply, which have been massive, but also an attempt to reduce the vaccine program from 17 vaccines down to 11, which was stopped by the American Academy of Pediatrics. Big stories on hepatitis B. We have a president of the United States that is saying that he believes vaccines cause autism, and we have a health, uh, HHS Secretary that has stated publicly he's investigating vaccine harms, vaccine injuries, vaccines, and autism.

[00:43:18] Del Bigtree

The NIH has now got a division and a department that is going to investigate vaccine injury. These statements are all happening. I mean, these these words are being put next to each other. Vaccine and injury by the government of the United States for the first time, I think, in over 40 years. When I think of VAXXED and what brought me into this, it was the autism story. And then, of course, it expanded massively when Covid hit and so many people recognized, oh my God, maybe Robert Kennedy Jr isn't crazy. Maybe Del Bigtree isn't crazy. It does appear they will just rush products onto the market. But when I came down to it, I just thought, would I walk away? I wouldn't. I'm not going to walk away. I think Bobby Kennedy is up to his eyeballs in alligators. I know for a fact that he is. It's one of the most corrupt government systems in the world and a system that's being run internationally. We saw Covid and that takeover. So if I wouldn't actually walk away and by the way, I'm not prone to making. You've never seen me make a statement that says I'm moving to El Salvador. If somebody gets elected, I don't make idle threats like that. And because of that, for my own integrity and for the position that I hold, I have to be true to my word.

[00:44:28] Del Bigtree

And I don't want to have to answer three weeks or a month from now. If this mRNA technology doesn't disappear, why are you still supporting other things that Robert Kennedy Jr. I thought you were withdrawing support, and so I didn't want to find myself in that situation. But let me be perfectly clear. I pray that this petition, this petition does everything that these beautiful, passionate individuals that are involved with it hope that it does, which is we get rid of one of the worst technologies that humanity has ever seen. But I wanted to bring in another, you know, perspective, one that is a dear friend of mine that has had great deep discussions on topics just like this. What do we do inside of a movement? How, you know, what are the strategies we use? So it's my honor and pleasure to be joined right now by Doctor Robert Malone. All right, Doctor Malone. Um, I, I you are one of the people that has signed on to this. You've written several several articles about it. So I had my moment to discuss the really, the only issue I have with the approach. Um, you have the floor and I want you to, you know, express why this is the approach and why you know, how you think it will work.

[00:45:42] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Yeah. So thank you Del. Uh, and before we launch into that, I just want I can't resist, uh, referring to something that was in Jackson's report. Do you know it? Hypochlorous acid is?

[00:45:55] Del Bigtree

I don't actually.

[00:45:57] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Good. Okay, that's a good start. Hypochlorous acid is a natural product. It's what your white blood cells use to kill microbes.

[00:46:05] Del Bigtree

Okay?

[00:46:06] Robert Malone, MD, MS, MRNA Vaccine Pioneer

It's classified as a pesticide because it is an antimicrobial. How is it manufactured? It's manufactured by pushing electricity. The process is called electrolysis through highly purified water and highly purified sodium chloride. For the uninitiated, that's table salt. So it's the product of water and table salt. It is a very, very potent antimicrobial. That means it kills bacteria. It's routinely it is the standard of care in Canada for treatment of ulcers, wounds and burns. It's a Remarkably effective for that. So it's a natural product. Your cells make it. It happens to be classified as a pesticide. But that's because of the quirks of EPA and how they define pesticides. So this this whole, you know, I appreciate Ken Paxton. And the underlying issue here is not hypochlorous. The underlying issue is the failure of Sprouts to disclose what they were doing. Yeah. And what they were doing was applying a material that kills bacteria and fungus. So why should that matter for produce? Well, we've seen many, many examples of that when you get contamination because now we're importing a lot of our produce from Latin America, where they have defecation in the fields and other things. So that's I just wanted to mention that, that it's, it's worth getting a little bit deeper into the details on that. Now regarding the petition. Uh, so, uh, the I want to give you. I'm not even quite sure how to start on this. Um, number one, after one of those essays that we put out, uh, I got a call from a very senior person at HHS, not Bobby, not not Stephanie, but another very senior person who's a friend.

[00:48:08] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Uh, and, and he said, hey, Robert, I want you to know that there's no great conspiracy because if you track all the decisions relating to mRNA, including the highly inappropriate licensure of this influenza vaccine, which now makes mRNA platforms qualify as a platform technology. And there's a whole congressional statute about platform technologies that now that it qualifies with, uh, remember Bobby said that there was, a clear evidence that these mRNA products were neither effective nor safe for respiratory viruses. And yet we have two licensed products now for precisely that respiratory viruses. And they were licensed, including for the influenza product for the most at risk category of people for flu. And yet no testing was done on its safety or efficacy in that category. I mean, it's a gross abuse. Yeah. And by the way, the verbac, which we all focus on the ACip. But the other committee that that advises in this area is called the Verbac advises the FDA. There was two votes on this mRNA flu vaccine product by Verbac, and they were both unanimous in favor. Furthermore, the Secretary has done nothing to change the composition of the Verbac. The changes in ACip in all of that. Uh, um, how do I say this gently? Uh, confusion.

[00:49:45] Del Bigtree

Uh, let me, let me just let me just let me just take one moment to say, obviously for anyone that may not know who you are, you were a part of the change to the Advisory Committee on Immunization Practices, a dynamic, brilliant change. And I've told you, you're my favorite, you know, leader of ACip I've ever seen. How you handle those meetings was absolutely brilliant. But that didn't last very long. Right. So what Bobby learned is that right now is held up in court. So he has no ACip. And so what we're seeing is the corruption around him is able to actually shut down the changes. So what you're saying is he should do the same thing with Vrbpac that he did with ACip. Would would you be expecting a different result and not a total attack on that committee?

[00:50:28] Robert Malone, MD, MS, MRNA Vaccine Pioneer

I'm just saying.

[00:50:29] Robert Malone, MD, MS, MRNA Vaccine Pioneer

That there's this strange juxtaposition of a full full frontal attack on the ACip issue and a complete Absence of action on Virbac.

[00:50:41] Del Bigtree

Okay.

[00:50:42] Robert Malone, MD, MS, MRNA Vaccine Pioneer

And Verbac is the one that makes the decision about whether or not licenses happen.

[00:50:45] Del Bigtree

Right.

[00:50:46] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Now. So this individual spoke to me because there's a series of events, and the most recent from the CDC is this very twisted interpretation of the discussion that had taken place within the ACip relating to, uh, um, the authorization for use of Covid vaccines in neonates, essentially in little children.

[00:51:13] Del Bigtree

Yeah.

[00:51:14] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Um, and if you read through that and nitpick it, which we have, that's another Substack we got to get out in the queue. Uh, if you nitpick that the CDC absolutely distorted the language that it is citing in order to justify this, uh, very twisted interpretation that has resulted in their recommendation that pediatricians Administer these products to very young children who have virtually no significant risk.

[00:51:42] Del Bigtree

So, so let me just my understanding and correct me because this is getting very vague, but this isn't that shared decision making discussion that ACip had, which took it out of this, this, this category of recommended, which sort of triggers the mandates in the state decisions. It moved into shared decision making. And I feel like there's been some misunderstanding that people think that means share the decision with the government. It's really meant to be share the decision, like sit with your provider, have them tell you what they will, but you in the end get the choice. Correct.

[00:52:14] Robert Malone, MD, MS, MRNA Vaccine Pioneer

That's that is the huge weight. Jefferey had some characterization of what the complaint was from the American Pediatric Association. Um, uh, AP yeah, and the essence of the complaint, because they, they don't, the question is, how do they get standing? And you understand this? Yeah. Because of it. Right. Um, okay. So their standing is based on the thesis that their members, pediatricians are harmed by having to provide informed consent to patients over vaccines. That is the harm. That's amazing. That is the bedrock. Okay, so here's the point I wanted to start with.

[00:52:54] Del Bigtree

Oh, we both agree that that's ridiculous. I think we're I mean, we're agreeing, right? Okay.

[00:52:58] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Okay.

[00:52:59] Del Bigtree

Okay. All right.

[00:53:00] Robert Malone, MD, MS, MRNA Vaccine Pioneer

But here's, here's the starting point that I wanted to make. I had this phone call and, and the person I'm not going to name gender, uh, said to me, Robert, you need to understand there is no grand conspiracy in favor of mRNA products and vaccines and the platform technology, but rather what we have is incompetence. We have incompetence compounded by bureaucratic. Uh, I forget the term he used. I'll use sneaky.

[00:53:29] Del Bigtree

Okay.

[00:53:30] Robert Malone, MD, MS, MRNA Vaccine Pioneer

For want of some other words. Uh, so there's there's no he this oops, I said it. This individual asserted that there was no particular conspiracy going on, which some might say.

[00:53:43] Del Bigtree

Does he wear a dress? Because if that was the case, we might really be able to dial in on this. No, I'm I'm kidding. I think there's plenty of. He's we don't have to worry about it. Go ahead.

[00:53:51] Robert Malone, MD, MS, MRNA Vaccine Pioneer

So so, um, uh, that's the starting point. Now, I want to say something about why I ended up signing this.

[00:53:58] Del Bigtree

Okay.

[00:53:59] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Uh, Mary Bowden has been a very, uh, let's say, harsh critic of me personally and many others.

[00:54:07] Del Bigtree

I think I'm in there. I think I've had some criticism, but. Okay.

[00:54:10] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Yeah, she has very strong opinions about things, and they reflect the fact that she has been subjected to some very strong measures. Uh, and I can certainly understand the righteous indignation. Yeah. And I frankly, I share it. Uh, I just try to keep it bottled up a little bit more than she does, but that's her style. And she has taken on together with others that have spoken to me, the development of this document, which has gone on now for many months.

[00:54:42] Del Bigtree

Okay.

[00:54:43] Robert Malone, MD, MS, MRNA Vaccine Pioneer

And, uh, she despite our differences in the past, I ended up blocking her because she was attacking me all the time.

[00:54:50] Del Bigtree

Okay.

[00:54:51] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Uh, he called me up that weekend before the petition came out, and she said, Robert, I need your help. I would really like you to sign this. Yeah. And so we talked about it and I said, Mary, what do you think you're going to achieve by doing this?

[00:55:08] Del Bigtree

Right.

[00:55:08] Robert Malone, MD, MS, MRNA Vaccine Pioneer

And she didn't really have an answer. Okay. So I want to be clear about that.

[00:55:12] Del Bigtree

Okay.

[00:55:13] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Okay. It's it's, uh, the, the logic that you're asserting I concur has merit. However, there's a bit of a hole in it.

[00:55:22] Del Bigtree

Okay.

[00:55:22] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Please let me finish the story. The story with Mary is. She asked me kindly, and I took the opportunity to talk to her a little bit about strategy and tactics and the importance in growing importance of her as a major leader in this sector. There's many people that are following her. There are many people that appreciate what she's doing. Vaccine Safety Research Foundation considers her one of their pillars. So I took the opportunity to talk to Mary a little bit about strategy and tactics. But I said, you know, overall we're aligned here. And this is the point that differentiates your position, which I respect from mine.

[00:56:07] Del Bigtree

Okay.

[00:56:07] Robert Malone, MD, MS, MRNA Vaccine Pioneer

And that is if we will not criticize politicians and I'm sorry, Bobby is a politician.

[00:56:14] Del Bigtree

Yes, I agree.

[00:56:14] Robert Malone, MD, MS, MRNA Vaccine Pioneer

If we if we refuse to criticize politicians because there's an upcoming election, we will never criticize politicians because there is always an upcoming election. Now let's unpack that a little bit more. When the Fabrizio Ward poll came out, which was what triggered the white House and Overton, our new FDA commissioner, uh, nominee, and Siouxsie Wiles and The West Wing to assert that Bobby should stop talking about vaccines. And we should have no more vaccine controversies, because it is going to cause the loss of House seats in swing districts. Based on the Fabrizio Ward poll, which it now has come out, apparently was written by people inside the white House, perhaps that same person that phoned me, uh, so that those polling results regarding, uh, House districts that were swing districts and the impact of vaccine controversy in those districts causing the potential loss of the House was what justified Bobby suddenly stopping his discussions about vaccines? Yeah, that was explicit. Furthermore, I was told when I was back there on the inside that the white House really didn't want the ACip to meet again. So, uh, you know, the white House can clarify.

[00:57:35] Del Bigtree

I mean, just because and look, we're in the weeds, but I think this is a very, very important conversation, Robert, because what we're going to get to is overall, there is a movement here, right? There is whatever this Maha is and whether it holds that name or not. But there's a large constituency of of people with diversified goals that stood together and did, I think, really shift an election. But when we say the white House, I used to always think that meant the president, but we can refer to the white House and actually be referring to people that maybe are very loud and seem like the president, but are not the president. Can I make that.

[00:58:10] Robert Malone, MD, MS, MRNA Vaccine Pioneer

I like I like to call it the West Wing.

[00:58:12] Del Bigtree

The West wing. Okay.

[00:58:14] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Yeah. West wing sets policy.

[00:58:15] Del Bigtree

Because I believe just to cut to the chase, Trump really unearthed this idea. If he's the white House and he was afraid of talking about vaccines, I think his executive order mirroring Bobby's attempt to reduce the vaccine program down to 11 vaccines, saying he wants to split up the MMR essentially said to the entire world, if someone is saying, I'm afraid of this conversation before the the midterms, you got that dead wrong. And so there seems to be a confusion between white House and presidential perspectives. Is that right?

[00:58:48] Robert Malone, MD, MS, MRNA Vaccine Pioneer

And I just I just called out names for you.

[00:58:51] Del Bigtree

Yeah, yeah.

[00:58:52] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Okay. Yeah. I was very specific about that.

[00:58:55] Del Bigtree

Yeah.

[00:58:56] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Uh, so that was then. And there was a, a communication made that, uh, the secretary shall stop talking about this immediately. Shortly after that, he went on Rogan and the word vaccine did not cross his lips.

[00:59:11] Del Bigtree

I recognize that. Yeah. Okay.

[00:59:14] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Um, but here's the here's the rub. They're going to lose the house. I'm sorry. Big announcement. You can hold me to it. Uh, that all they got to do is have one district change. It's a pretty bold statement.

[00:59:27] Del Bigtree

And there's there's been some other bold statements, one around July 4th that didn't actually land down. So I will say you've made bold statements that don't come just to put it out there, because I like to stay positive. I like to say, and by the way, I'm not a political organization and I don't really talk about voting specifically, but I think there's a chance that that might not be true. But I will give you the confidence in that.

[00:59:49] Robert Malone, MD, MS, mRNA Vaccine Pioneer

Time will tell. But, uh, the, the, the wisdom in DC right now is that the thing that's in the, the, the thing that's in play right now is the Senate. Yeah. Uh, the house is pretty well, uh, cooked. And that has been the historic trend no matter the president.

[01:00:07] Del Bigtree

Which, which is what, which is what makes me very concerned about the mechanism of to get back to this, this discussion, the mechanism of this, you know, letter, if you will, signed on by a lot of people that people listen to, they're saying they represent, I think Was it 60 million different people around the earth? You know, is is sort of what they're saying. I don't know if that's true, but the mechanism is happening right at this election period. And it's saying the movement will withdraw. And so my question is to where and put their focus to who. Well, who else out there could do what Bobby's doing at all?

[01:00:45] Robert Malone, MD, MS, mRNA Vaccine Pioneer

Except if if that's the subject of another essay that we put out. Yeah. If you and you were there, you were there as the sausage was being made at the very start, I know. Yep. And I know you were involved, for instance, in a lot of the sausage making having to do with the appointments. But those appointments at the very beginning were extremely disappointing, I think, for this cohort or this coalition that has been branded as Maha and.

[01:01:18] Del Bigtree

Okay. Well, let me let me let's because I think this is. Let me just say why? Okay. All right.

[01:01:24] Robert Malone, MD, MS, mRNA Vaccine Pioneer

You had your statement. Um, uh, if you go through one by one, the items that were identified during the original, uh, Maha um coalition, the original, uh, Maha report that the administration put out at the beginning, uh, almost none of those have come to pass. And in particular, the issues around mRNA. Glyphosate is notorious. Uh, there is just, I'm sorry, failure after failure, after failure to deliver. And what we get instead is studies and, uh, executive orders that never come to anything. And I'm afraid that this vaccine schedule modification currently fits into that category. Uh, so we've had a whole lot of talk, and as far as I'm concerned, very little walk.

[01:02:23] Del Bigtree

Okay. So I want to I want to speed this up a little bit because as.

[01:02:27] Robert Malone, MD, MS, mRNA Vaccine Pioneer

You pointed out that the, uh, the nutrition agenda, which is largely Kelly and Casey Means agenda.

[01:02:35] Del Bigtree

And a whole lot of, let me just say, and a whole lot of voters that represented organic farms, regenerative farming, there was actually a huge movement. A lot of moms that really weren't, you know, weren't in the vaccine space, but really did see the crap food and the colors and things and wanted changes to that. So it represented not just two people, but and frankly, I think it was one of the largest growth boosters to Bobby's ability to pull millions of votes towards President Trump. But I want to get too sidetracked on that. I want to get I want to get to another concern I have. I think that we could agree that things are not moving as fast as we want. My concern is not my question is just who you know, even if Bobby's not the most talented person at it. Let me just ask you a very simple question. Do you think he he doesn't care about mRNA? Because a lot of this is like he's turned his back on us. He doesn't care about mRNA anymore. I feel like you know him not as well as I do because I've spent a lot more time. But, you know, this guy is Bobby. The type of person that forgot that mRNA is dangerous. Does he not realize that this flu shot is not only a terrible shot, but is going to be shed all over his own children, his future grandchildren, and the entire earth? I mean, that's he has that understanding. Let me just answer that. He does understand that, right?

[01:03:51] Robert Malone, MD, MS, mRNA Vaccine Pioneer

You believe you believe what goes on. And you know what goes on in Bobby's head. I don't. I can't read minds. All I can do is, is observe actions. The actions are not there. If I was the secretary with the positions I've taken, I'll just take responsibility for myself. Yeah. If I was. If I happen to be the secretary. Not that I want that job. Uh, and that's a good point too.

[01:04:17] Del Bigtree

Who would who would want that job.

[01:04:20] Robert Malone, MD, MS, mRNA Vaccine Pioneer

Had those opinions and these events occurred. I would have been extremely vocal, as, you know. Uh, and, and if I didn't see movement, uh, on that agenda front, I would have acted. I would have spoken out loudly and eventually I would have resigned. I would not tolerate this.

[01:04:45] Del Bigtree

And you did resign. And frankly, you did resign. You are you're describing exactly what you did. And now really, we don't have you inside of government. So though I see why you would make that decision. Someone has to stay in there and attempt to get through that sewer that you were in, and you left, because it obviously is a cesspool. I want to move on to another problem that I have here, and it's I'm very concerned when I read this that it would create a divide in the movement. Divide and conquer is what the other side, whether it's right there.

[01:05:16] Del Bigtree

Or whoever. So let me just read some of the posts I'm very concerned about. This is one that came from somebody that's very passionate about this letter. I've been told by a very credible source with firsthand knowledge, that Bobby Kennedy Junior is placing the well-being of children with autism over the well-being of every other child in the nation who is injured or killed by, or could be injured or killed by Covid injections, or the CDC recommended shots. That's a you know, I think I can just leave it right there. Right there is now we have a movement where it's saying the Covid injured are being robbed of their opportunity by the autism injured families. This is a terrible I know, you know, this a terrible way to go. And she states and then Mary Talley Bowden steps in and says, the person that, um, was the source for that story that he has turned his back on the vaccine injured. I'm her source, Mary Talley Bowden says. And it's based on a conversation I had with someone very close to Kennedy. I really don't like all these hearsay conversations of people that are close to.

[01:06:18] Del Bigtree

But okay, they exist. And so now there seems to be a doubling down on a pitting of autism parents. Uh, Covid injury against autism parents, which I don't, I can't stand at all. And finally, here's the autism and autism mother weighing in. That is way too small. Here we go. Mary is not now. Or has she ever been a part of the Health freedom movement? She cares about one issue and one issue only Covid mRNA vaccines. And good for her. They need to go. So. But she has been attacking Kennedy since he was nominated. I think you said that. And you've gone on to say that she's been attacking you. But but you have written books, you know, Psywar you talk about the danger we have is when, you know, when a movement starts fracturing and this petition now is inciting people to be fractured at a moment where whatever our decisions, the one thing we shouldn't allow is some decision inside of our government to tear us apart as a movement. Right.

[01:07:23] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Okay. So a couple of responses to that. Okay. Thank you for bringing it up. Okay. Um, and I respect that thread in that logic. I just want to say that.

[01:07:34] Del Bigtree

Okay.

[01:07:34] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Thank you. Number one, it's already happened. The, the if if, for instance, as one data point, I was recently at the brownstone retreat at Polyface Farms. This is Bobby's historic constituency. This is the core of Maha.

[01:07:51] Del Bigtree

Mhm.

[01:07:52] Robert Malone, MD, MS, MRNA Vaccine Pioneer

The term Maha was not used once during that entire meeting.

[01:07:57] Del Bigtree

Okay.

[01:07:58] Robert Malone, MD, MS, MRNA Vaccine Pioneer

There had already profound disaffection that began with the decision regarding glyphosate, which the Secretary supported. The secretary has supported Overton's appointment. The Secretary has repeatedly publicly supported actions that are 180 degrees from those positions that he took when he was running for president. So I don't know what's going on. Bobby's head. The question got raised to me the other day on a podcast, because this is a very hot topic, and it.

[01:08:32] Del Bigtree

Is why we're having it. It's why we're having this conversation, I appreciate it.

[01:08:35] Robert Malone, MD, MS, MRNA Vaccine Pioneer

It's good to have it. It's good to have it. Yeah. Um, so, uh, getting it out into the open. Maha has been captured. It has been corporatized both at the, at the, uh, at the level of the superPAC and uh, Maha um Holdings and Maha Action and Maha Institute. And if you, uh, want to see the data to support that thesis, just look at who participated in this recent Maha event that I was.

[01:09:12] Del Bigtree

I was there. I was, I was there and I read your article about it. And I think there's multiple perspectives on that. And look, you know, I started Maha, I was the one that launched, you know, Maha action and all of these things. And to be honest, I walked away because, you know, I, I saw that this was sort of what was wanted of Maha. It was going to be and I and look, bringing in things like Walmart. Right. I mean, we're getting a little bit off, but I do want to say this because I was just at this event and it's easy to judge it from afar. And I have my own opinions. But I will also say one of the things that was difficult about Maha when I was like in charge of Maha was like being CEO of civil rights. It was a very weird experience. I know how you do it, right? It's a movement, but it's not. It's Bobby Kennedy, it's a it's an HHS secretary. But the big question was, what is the purity test for Maha? This is what I was grappling with. Is Maha only organic? Is it only organic? You know, is it is it chemical free? Because once you start drilling down, it becomes an elitist group that only people that can afford shopping at Whole Foods can afford. And what you see here is a decision. I'm not. Whether I agree with it or not is to try and get to the masses. And, you know, when you listen to, you know, I'm just I'm just saying the perspective is let's bring in Walmart and those that are delivering food, can they make a better product.

[01:10:34] Robert Malone, MD, MS, mRNA Vaccine Pioneer

To buy and united health care? And we go on and.

[01:10:39] Del Bigtree

On and, and, and by the way, all of those things are completely capable of just taking this thing and turning it into absolutely nothing. And so I agree that everyone should be careful and we should be looking at what is happening there. But I'm less concerned about this word, Maha. I don't care whether Maha is the word. There's a movement of people and if they want to change their names. But what is troubling is when those people fight each other. And that's what I'm concerned with. Not care whether they'll use the name Maha. I'm concerned that people that should be aligned are fighting each other. But you've written about this. You're a part of it too. You've written some articles. Let me read this because you've stated.

[01:11:18] Robert Malone, MD, MS, mRNA Vaccine Pioneer

Reminded, I'm reminded. I'm reminded of a dinner that I had with Nigel Farage about four years ago in London. Uh, tell me.

[01:11:25] Del Bigtree

About that after I read this, because I got to move on quickly. This is by your own, this criminal mRNA malfeasance by the CDC. It's a very powerful article, but you wrote this. I recently spoke with Doctor Mary Talley Bowden. She told me she has been communicating with Del Bigtree. And my clear impression from that conversation was that the organizations and people surrounding Kennedy want to move on from the mRNA vaccine fight and concentrate their efforts on autism. Autism deserves serious investigation, but autism cannot become a political permission slip to ignore what is happening with mRNA vaccines right now. So you're playing into this a little bit, too. One issue does not erase the other, which is exactly my point about this petition. This petition is saying if Bobby does a bunch of stuff on autism, he's made a quid pro quo and he's denying mRNA. So technically you're saying by signing this, I think that the mRNA technology is the one issue that supersedes all else. You go on to say, if that is indeed where Children's health, defense and I can now stand, then perhaps CHD and I can have run their course as an effective force in the mRNA vaccine issue. And if the same position extends to del Bigtree and The HighWire, the same question must be asked there. Organizations that built their audiences reputations and influence by demanding transparency and accountability from the federal public health establishment cannot suddenly decide those principles are negotiable because their friends are now running the establishment.

[01:12:46] Del Bigtree

I just want to say this you have every right to criticize me, and everyone does. And everyone has that right. I do not have an issue with that, but I do want to answer to this a little bit. First of all, I currently have a lawsuit against Robert Kennedy Jr. Right here. You can read it. And this is about the CACP program, which I think should be illegal. And I'm demanding that he change it. I have another lawsuit that will probably be coming out within the next month against Robert Kennedy Jr. And I have criticized him on this show repeatedly. And I do nothing but talk about the science that shows how bad mRNA technology is. But what I'm curious about, Robert, is you were on this show all the time. You have me on speed dial. Why are you quoting a conversation I had with Mary Talley Bowden and not asking what I actually said because I did not actually say that. And I'll be honest, what I said to her was, I'm not trying to stop you from what you're doing, Mary, I understand. And by the way, I want to make this really clear. She is heartfelt. She is not trying to create some super divide amongst people. She really is really upset about the carnage that is moving through her office. She's watching it every day. I see the same passion as the mother that is waking up with the child that cannot speak and is now an adult.

[01:14:04] Del Bigtree

And they lost them a long time ago. Same passion. I absolutely understand it. But what I said is, can you help me? It's why I called her behind the scenes. And the only reason I'm mentioning that conversation now is because you've made it public. But I said, can you help me bring back this vitriol that is now pitting different injury groups against each other? That's why I reached out. And I had I expressed passion in that conversation, because I'm deeply worried that if we lose the only voice we've ever had, and whether it's not, it's as fast enough for you or others. We are seeing vaccine injury being stated in headlines by the government of the United States, vaccines and autism being stated by the government of the United States. And I do believe that Robert Kennedy Jr will be doing science. I hope it happens quickly. Look at mRNA in just two weeks ago, he and Hegseth are doing a public investigation. Headlines about it to see if the Covid vaccine injured or killed military personnel. So he's not afraid to go after mRNA and state publicly. I believe this product kills. Now, maybe you see those just as acts of statements with no real teeth. But for the people that have been dealing with vaccine injury for 40 years, waiting for a government to finally admit that vaccines injured people, it does not seem to me we should take away the only person that has ever been our government changing the language around this conversation, and I do not see how it doesn't affect politics, and I want to.

[01:15:35] Del Bigtree

Lastly, I'm going to give you a final word because we need to move on. But if we withdraw our support, we don't just withdraw it from Robert Kennedy Jr. We withdraw it from Ron Johnson, who is in the middle of some of the most important hearings that is ready to call Rochelle Walensky to the stand and Janet Woodcock, because we now have a diary that thank thank you to Robert Kennedy Jr. Of Tony Fauci. We have his diary where we know he's lying. We're seeing internal emails that are now being made public. And one of the most important investigations, I think, in the history of this country, that will stop if we if they lose the Senate and the House. Rand Paul, in his investigation to gain of function and all the lies of that, that will be stopped. And so this petition seems reckless to me. If it does not accept that its only mechanism, if it doesn't get its way, is a total destruction of all the work that is moving, not just of Robert Kennedy Jr, but many people that have sacrificed their lives, like Ron Johnson, who only ran to be a part of this. I don't think this is a smart decision to threaten political retribution. Can't we at least give these guys the four years they're attempting to do this in?

[01:16:42] Robert Malone, MD, MS, MRNA Vaccine Pioneer

No, no. You're conflating two things.

[01:16:45] Del Bigtree

Am I?

[01:16:46] Robert Malone, MD, MS, MRNA Vaccine Pioneer

But the petition is. Yeah. What the petition is saying is the logical consequence, if you don't address this issue, is that you're going to lose this constituency, which to a significant extent, they already have. No, not saying.

[01:17:01] Del Bigtree

We will withdraw our support. It's going to happen. You will lose your support. It says we, the signers of this. You're saying, Robert, I will withdraw my support.

[01:17:10] Robert Malone, MD, MS, MRNA Vaccine Pioneer

Not sign this as a blackmail petition.

[01:17:14] Del Bigtree

You didn't say that again. You did not sign this as a what?

[01:17:16] Robert Malone, MD, MS, MRNA Vaccine Pioneer

I did not sign this as blackmail. Which is what you seem to be implying. And by the way, I spoke to Ron this morning. Um, your characterization of, let's say, the transparency of HHS to the senator is a mischaracterization. Uh, the senator is extremely frustrated with the lack of transparency and willingness to cooperate. But I don't want to put words in the senator's mouth. Uh, this this issue of whether or not, uh, this a very unique populist uprising coalition that I've just finished today, editing the last draft of a 90,000 word manuscript called The Chronic Rebellion that that dissects this whole arc. Okay, so it's not like I haven't thought about this. Yeah.

[01:18:14] Del Bigtree

Well, it's. Why have you on. I appreciate your perspective.

[01:18:17] Robert Malone, MD, MS, MRNA Vaccine Pioneer

It's already happened, Bill. This this it's not. It's not foreshadowing that something might happen. It's already.

[01:18:25] Del Bigtree

Happening. I disagree, I disagree. I think we always have the ability to talk things out. Like we are here to talk about the benefits to reanalyze where we're at, to see would we really be better off. This is really the simple question. Would we really be better off if we did not have a Robert Kennedy Jr and a Donald Trump in office? If nobody was saying that vaccines injured people. Or is that really a better world? Because that's I mean, very simply put, I just don't think that's a better world.

[01:18:53] Robert Malone, MD, MS, mRNA Vaccine Pioneer

Setting up a false dichotomy.

[01:18:55] Del Bigtree

I don't think I am the situation.

[01:18:58] Robert Malone, MD, MS, mRNA Vaccine Pioneer

The situation is that the Secretary has been an abject failure in following through on many of these key issues. He's followed through on some, uh, and the, uh, position that's been taken by CHD and by many others, is that we just need to let him have more time. Uh, he's trying really hard, but he can't make progress. I'm sorry. This this presents a, a a narrative that the secretary of HHS, the largest department, the largest cabinet level department in the most powerful state in the world, does not have sufficient power to tell some bureaucrat in CDC to go stuff it with their latest policy pronouncements that are highly contrived regarding jabbing young children with mRNA vaccines. No, the secretary does have that power. The secretary does have.

[01:20:02] Del Bigtree

Power for a boss, though. That can. Absolutely. And I honestly I asked Mary Talley Bowden if. Bobby, let me just ask you this, said, this is the call. If he suddenly just said, I'm getting rid of mRNA technologies because she agreed she thought Trump had a soft spot for this technology. I said, what do you think would happen? She said, I think he would get fired. And I said, and then where were you? Are where are we going to be at? So firing Bobby then is the result we think we want by making him make a demand. So let me let me finish by saying this, Robert. I feel like I feel like this is what I did. I took a guy and I threw him over the wall of a castle into a den of thieves and vampires. In the sickest people. There are all in hopes that some way he could make his way to the front gate, kill enough of the guards in there to drop a drawbridge so that we could go in. And what I feel like we're doing is standing outside this castle going, what's taking so long? He should do it right now, or we should lynch him and get rid of him. It's a political assassination because he hasn't dropped the drawbridge fast enough. And lastly, I'll say this. I didn't go and work in government. Bobby wanted me to. I couldn't do it. I couldn't even work in Omaha because it did end up having too many things that I would have to compromise.

[01:21:12] Del Bigtree

I don't have an ability to compromise, and I don't have an ability to make a false threat, which is why I haven't signed this declaration. But you are reporting on it. I report on it. And Bobby Kennedy, by the way, is the first one to say, have all of your criticisms that you want, but please get out and vote. Please make sure and please tell Robert Malone I'd love to have him back on ASAP if he would get here. I need help in here. And lastly, this all comes down to me to the Teddy Roosevelt statement about the man in the arena. And this is what Teddy Roosevelt says. It is not the critic who counts, not the man who points out how the strong man stumbles or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood, who strives valiantly, who airs, who comes short again and again. Because there is no effort without error and shortcoming. But who does actually strive to do the deeds? Who knows? Great enthusiasms, the great devotion. Who spends himself in a worthy cause, who at the best knows in the end of the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly said his place shall never be. With those cold and timid souls who neither know victory nor defeat.

[01:22:25] Del Bigtree

Theodore Roosevelt. I put myself in that category. Robert, we are sitting out here and judging. I've had a little taste of what's in there. I didn't like it. You had a little taste of what's in there. You didn't like it. But I have watched Robert Kennedy stand for vaccine injured for two decades or more. I've watched him dragged through the mud. I've watched him tarred and feathered. I watched him getting beat up. And I have contacts on the inside. They're saying you should see how courageous he is. You should see the departments that he's building. You should see the work that he's trying to do. He needs more time. That is my message. I'm not forgiving him. I will be suing him every time he comes up short. But I believe telling voting body to pull your support of the only people that have ever had our backs on this issue, that were the only ones ever brave enough to talk about vaccine injuries. I don't think this is the right time, and I don't think it's the right statement, and I think it's in danger of making us turn on each other. I know you don't want to see that. I don't want to see that. I want to thank you for your time in this conversation. And will you work with me behind the scenes to try and pull this movement back together for the things we are aligned on? I think it's really critical. Thank you.

[01:23:35] Robert Malone, MD, MS, mRNA Vaccine Pioneer

We're aligned on that also. Thank you for the time.

[01:23:38] Del Bigtree

Take care Robert. All right. Well, you know I know that's in the weeds for a lot of you. But we watched the civil rights movement. We've watched these movements in the infighting that takes place. And instead of seeing in books in the future, looking back, I think it's important we have these conversations right now. And if you think I'm wrong comment right now. This is a conversation we should all be having. But it is clear. Together we stand. Divided we fall. All right, let's get to what's really on everyone's mind this month, which is breast cancer awareness. And when we think about it, we go to the news and we hear about it. We see football teams wearing pink, which is always an amazing experience. And behind it is always go out and get your mammogram. It looks something like this.

[01:24:24] Female News Correspondent

As we know, October is Breast Cancer Awareness Month and the push to get people screened is underway.

[01:24:29] Female News Correspondent

According to the National Breast Cancer Foundation, 1 in 8 U.S. women will be diagnosed with breast cancer in their lifetime. We're seeing cancer in.

[01:24:38] Female News Correspondent

Younger and younger populations. And so I think it's really important for us to remember that screenings are for everybody. Nobody is immune to cancer.

[01:24:47] Female News Correspondent

And it is recommended that women above 40 be screened for breast cancer every year.

[01:24:52] Male News Correspondent

Early detection and enhanced technology is a combination that doctors say can save many lives.

[01:24:58] Female News Correspondent

Breast cancer screening can increase the survival rate for women with stage four breast cancer by 60%.

[01:25:05] Female News Correspondent

Mammograms can reduce breast cancer deaths by 26%.

[01:25:09] Female News Correspondent

Women whose cancer was detected through screening were much more likely to live ten years past their diagnosis, compared with women whose cancer wasn't detected through screening.

[01:25:19] Female News Correspondent

It has given me peace of mind to not wake up every day and think, oh, it's today the day I'm going to have cancer.

[01:25:28] Del Bigtree

This is obviously a huge subject for, I would say, probably the majority of the people that watch this show. A lot of you are moms. I've said it. You warrior moms are why we're even in a position to have the debate I just had the only reason Robert Kennedy Junior is in the position. Hhs is the mothers that are out there that have changed the politics around these issues. But this is a huge question, and I and I get we get so many people writing in, should I get a mammogram? I'm getting mixed signals. I'm confused on what to do here. Well, there is a dynamic doctor, Jennifer Simmons, breast cancer surgeon that has really been traveling the country, if not the world, bringing a slightly different perspective. Take a look at this.

[01:26:14] Female News Correspondent

Doctor Jen Simmons.

[01:26:16] Male News Correspondent

The world renowned integrative oncologist.

[01:26:18] Female News Correspondent

Philadelphia's first fellowship trained breast surgeon. But now she's really focused on that root cause, holistic breast health.

[01:26:25] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

I come from a breast cancer family. I mean, it's really part of my origin story. And every woman in my family had breast cancer. I never wanted another woman, another family, another community to suffer the way that mine suffered. I became a doctor. The first doctor in my family. I became a surgeon, and at 46, it was my time to hear those words. I'm sitting there in the office of my friend and colleague and physician, and he tells me that I need surgery and chemo and radiation. It was only when it was about me that I could take off those blinders and start asking the questions. Is how we're treating cancer correct? And the answer's no. The bottom line is that mammograms are there in order to produce breast cancer patients. We hoodwinked the entire planet for decades, 50 years.

[01:27:18] Del Bigtree

Well Doctor Jen Simmons joins me now. It's an honor to have you on The HighWire. Thank you for joining us.

[01:27:27] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Hi. I'm so happy to be here. Yeah I can feel how shocking that statement must feel to people.

[01:27:34] Del Bigtree

Yeah. I mean, this the statement that we're really only going through this testing process to create patients essentially, uh, drill down on what you mean by that, please, because that is a strong statement.

[01:27:50] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Yeah, it sure is. But, you know, we're told that mammograms save lives. And if that is true, that means that screening with mammogram and finding a cancer equals a life saved. But when we look at the data and we have decades of data on this, every single large scale, well, randomized study shows the same thing. And that's that screening leads people to live longer with the knowledge they have a diagnosis, but it does not save lives. There is no increased survival tied to mammographic screening. And in fact, what Mammographic screening does is just increase the number of women that know that they have breast cancer without increasing the number of women who survive.

[01:28:38] Del Bigtree

How is that possible? I mean, that statement would seem to me that knowledge is power. Knowing I have breast cancer is going to lead to me being able to do something about it. So again, help me understand how knowing about it is leading to a bigger problem and not a reduction in the issue.

[01:28:59] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Yeah. So when you talk about what Mammographic screening does, we have to consider two things. Okay. And the first is called lead time bias. So let's say you have a woman and she develops clinical disease. She feels a lump in her breast. It's 65 and she dies at 70 of breast cancer. Okay. Okay. That same woman, if she's screening with mammogram, she knows about her diagnosis at 60, but she still dies at 70. So mammogram doubled her survival, right? Because it went from a survival of five years to a survival of ten years. But she didn't live one day longer.

[01:29:43] Del Bigtree

Interesting.

[01:29:43] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

It did not impact overall survival at all. So that's what mammogram does. It gives you a false sense of survival because people live longer with the knowledge that they have a diagnosis, but they don't live longer. The other thing that makes the mammogram data so skewed is that mammogram. I am not saying that mammogram doesn't find breast cancers. It does. Okay. But 20 to 50% of the time it is finding cancers. And they're real cancers, but they're not biologically relevant cancers in that women would have never known about these cancers over their lifetime, but for the mammographic screening.

[01:30:32] Del Bigtree

Interesting.

[01:30:33] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

So there are two very major studies that demonstrated this. The first is the Cochrane collaboration. It looked at over 600,000 women. These women were all part of the Swedish trial. So they all had the same access to care because it's universal health care. And they all had the same kind of care. And what this study found was that comparing the women who screen to the women who don't screen the exact same number of women, die of breast cancer in both groups. There is no increase in survival. But if you use mammogram to screen, you're going to identify a portion of the population somewhere between 20 to 30% more breast cancers than if you allow women to be discovered by clinical disease, meaning that this is a pool of women somewhere, depending on who which study you read, it's somewhere between 20 to 50% of the time. We are overdiagnosing breast cancer. We are identifying these lesions that would have never become the disease. So findings of microscopic cancer is not the same as having breast cancer. We know this from autopsy studies which have been repeatedly done. And when you look at women who between the ages of 20 to 50, who die of other causes they die of in car accidents, they die. Suicides, overdoses, that kind of thing. When you look at their breast tissue under the microscope, the harder you look, the more you find. But you will find a reservoir around 20%. 1 in 5 women will have evidence, microscopic evidence of cancer in their breast. These women did not have breast cancer or die of breast cancer. All that they had was microscopic evidence. So when you use the mammogram to screen, this is what you're identifying. And the mammogram is a very unsophisticated tool. It has no way of knowing what is and what is not relevant. But that's not the question that our system is asking. Our system is merely asking, how can we identify the most people with breast cancer because we have been sold this this belief that finding a breast cancer equals a life saved.

[01:33:12] Del Bigtree

Well, and I can imagine.

[01:33:13] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Not what the data shows.

[01:33:15] Del Bigtree

And I can imagine because I actually I was working on the doctors television show. I honestly think I was one of the first people to say the third leading cause of death in America is now iatrogenic injury, which is dying in hospitals for reason other than you went into. And so I've been on this quest really for, you know, 15, 20 years. And so can I go ahead and assume that you're diagnosing, you know, 20 to 50% of these women that will actually never have breast cancer. But because they find it, they now start a procedure of biopsies leading to surgeries. And the industry kicks in, which has all sorts of other risks that go along with it. Is that happening here? And what are then what happens to these ladies?

[01:34:04] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Absolutely.

[01:34:05] Del Bigtree

Okay.

[01:34:05] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Without question. Okay. So we currently have 4 million breast cancer survivors in our population right now.

[01:34:13] Del Bigtree

Okay.

[01:34:14] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

And let's just say a third of them. So, um, 1.3 million women who have been overdiagnosed and treated unnecessarily. And what happens to these women when they're treated for breast cancer? Well, they undergo surgeries that they didn't need. So breast deformity at best, breast absence at least. And mammogram has only increased increased the mastectomy rate. So not saving lives, not saving breasts. And then all the treatments for breast cancer have their own ramifications, their own dangers. It increases the risk of cardiovascular disease. It increases the risk of neurodegenerative disease. It increases the risk of osteoporosis, increases the risk of osteoarthritis and the sexual dysfunction and the psychosocial injury and the financial injury. And we go on and on. So women treatment for breast cancer is not benign. And if we are overtreating 30 to 50% of breast cancers, we are not only not saving lives and not saving breasts, we are causing great harm. Now, I want to be clear. I am not saying that breast cancer isn't a horrible disease. It is. I am not saying that there is no one that needs breast cancer treatment. They do. But what I am saying is that we have to do a far better job at identifying who does and who does not need treatment, because the costs of unnecessary treatment is great. And when we go back to what we said the first day of medical school, which is first, do no harm, right? The mammogram is in direct defiance of this because we are harming women by using mammogram exponentially more than we are helping anyone.

[01:36:12] Del Bigtree

What about the BRCA gene? I mean, this is something that really was made famous when, you know, movie stars like Angelina Jolie started, you know, getting mastectomies the moment they found out they had a BRCA gene. Um, you know, I say all the time on this show, like we're creating the image and likeness of God. I struggle with some discovery that your body is now your enemy and you have to start cutting parts of it off. But you know what? Should someone because a lot of people are getting that test. Do I have the BRCA gene? So what are your thoughts on the BRCA gene?

[01:36:52] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Well, let's start off with understanding what that means. Right. Because the BRCA gene is not causing breast cancer. The BRCA gene is a tumor suppressor gene, meaning that people who have a mutation in their BRCA gene are just not able to handle environmental insults in the same way that someone with normally functioning BRCA genes can. So a BRCA gene is a DNA repair gene. It helps damaged cells to heal. The BRCA mutation is not more common than it was before. It still represents 5 to 10% of the population. But the interesting thing is that if you had a BRCA mutation 60 years ago, you had about a 35% chance of developing breast cancer. Now, if you have a BRCA mutation, you have an 87% chance of developing breast cancer. And part yes, part of the reason it's not the gene didn't get worse. There was no, you know, genetic transformation over that time. What's transformed is our environment and our approach and our approach. So we take these women with BRCA mutations and what do we do? We tell them that they need to screen early and often. So we're subjecting them to radiation, a toxin that we know they cannot handle because they can't handle environmental insults. And that Wow is one of the biggest environmental insults we give them. Mrs and in doing that, give them gadolinium, a heavy metal. Every single year. And we are asking these women to deal with more environmental toxins than they had historically. And of course, they are developing more breast cancer at earlier ages. But if we instead approached this population intelligently and again, we are talking about a small portion of the breast cancer population. We're talking about 5 to 10% of the breast cancer population. Most most breast cancers are are spontaneous. They are not. There is some familial not not a high penetrance mutation like Rqqah or Palb2 or anything like that. There are some familial genetic predispositions, But in the BRCA mutation population or any high penetrance, it is about the environment and our environment. Am I allowed to say it sucks? Yeah.

[01:39:32] Del Bigtree

Absolutely.

[01:39:34] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

That that we are we are not living on our grandmothers earth. We're not living on our mother's earth. We're not even living in our older sister's earth. Right? The earth that we are living on now is exponentially more toxic than ever before. And the challenges are serious. And this is why we are seeing more breast cancer at younger ages. And that's across the board. It's not just the BRCA mutation population, but we we have to learn by what we're seeing and what. And right now we're not right now we're treating it like it's the gene instead of the epigenetics, the effects of our environment on the gene.

[01:40:15] Del Bigtree

Okay. So we have clearly, I think, described a problem in how mainstream medicine is addressing this very important issue. It's Breast Cancer Awareness month. Awareness has to have some value. Is there a better way to get awareness? Or let me put it this way, in Doctor Simone's perfect world, what is a better way to think about this as a woman to address it? Is there testing you recommend? What is the solution?

[01:40:45] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Okay, so I'm a little afraid to even get started here because I'm just back from the Maha Summit and at the Maha Summit, I'm a little bit had steam coming out of my ears. Not because I don't think that, you know, that grassroots organization has the right thing in mind, but it seems like there are still some people up there on the pulpit saying more screening, more screening, more screening, more early diagnosis, more early diagnosis. And that is not the solution. That is not going to change anything. That is just going to, in the area of breast cancer, create a bigger group of people that know about their disease longer. So what we need to do is think about it in a preventative way and look for the things that we need to look for in order to prevent a breast cancer diagnosis. So at Perfection Imaging, the company that I founded, we are screening for the inflammatory precursors of breast cancer. We are identifying who is at risk right now, not by their genetics, but by where they are physiologically and biologically right now. So we're screening the tears for the inflammatory precursors of breast cancer, because we know we can identify proteins that tell us who is at risk for breast cancer right now in a five minute at home test. Testing the tears. And if you are at risk right now, we can do things to mitigate that risk.

[01:42:15] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

We can do things to identify the inflammation that is leading to your increased risk long before anything would show up on imaging. Correct that risk, mitigate that risk, and prevent a diagnosis. Wow. We are also screening for metabolic health because we know that metabolic dysfunction, which is affecting 90% of Americans. We know that metabolic dysfunction predates breast cancer along with other chronic diseases. So if we can identify metabolic dysfunction before it is abject metabolic failure, we can help people to prevent a diagnosis. But when we screen, we need to image the breast in a way that does not harm women. Because we're talking about the screening population, we are talking about the population of women who we have no reason to believe that they have breast cancer. So subjecting that woman to radiation for the purposes of determining if they have breast cancer or not is not ethical. It's not ethical to expose a healthy woman to radiation. So what we do is something called the Cuti, where we're using circumferential sound waves transmitted through a warm water bath. It creates a true 3D reconstruction of the breast without pain, without compression, and without radiation. It received FDA clearance in 2023, and I opened the first independent center using this technology in 2024, and I am rolling it out around the country. Now, I want to tell you what I think is the most important part about this technology, and that's that it has true functional capability, meaning that we can see something in an asymptomatic woman.

[01:44:01] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

And instead of sending her for a biopsy, we can follow it. So we have the ability to know what is and what is not biologically active. And if this woman comes back in 60, 90, 120 days and we measure a doubling time, and that doubling time is greater than 100 days, because we know that cancers have a lower doubling time, have a doubling time of less than 100 days. And things that are either not cancer or not meaningful have greater doubling times. So we can follow these women. And following lesions is not unique. We follow lesions in the lung all the time, not because lung cancer isn't a thing or lung cancer isn't deadly or dangerous. Of course it is. But biopsying the lung is very inconvenient and you can get into major trouble when you biopsy the lung. There can be serious consequences to lung biopsies. So what do we do when we find asymptomatic things on on other imaging in the lung? We follow it. But we don't follow those same paradigms for breast because it's too easy. It's too easy to biopsy the breast and the consequences of buying biopsying the breast to the system, right to the providers and to the system are not much.

[01:45:21] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

You know, you can't get into much trouble biopsying the breast. And so we do it for everything. And 80% of the breast biopsies are done for benign changes. And of the 20% that show cancers, only 70% of them are real cancers that need to be worried about. So, you know, 20 to 30% of them are also totally indolent, meaningless lesions. So if you use an intelligent imaging technique to determine who does and doesn't need biopsy, not only can you save women from being over biopsied, but you can save them from being overdiagnosed and overtreated, and all the while you are not exposing them to radiation, to pain or to harm. So this is how we move forward. We move forward by screening for the precursors. And anyone can do a metabolic screen. Anyone can have their tears screened for for the inflammatory precursors of breast cancer. And when we image and I am not saying not to image, but we cannot put women ethically in harm's way for the purpose of screening, especially when we know definitively that there is no survival benefit to doing that. And that was clearly stated in the American College of Physicians position paper that they put out in the Annals of Internal Medicine in April of 2026, where it stated, at any age, there is no survival advantage to screening with mammogram.

[01:47:02] Del Bigtree

Wow. Well, look, I think that's a very, very important message. I think a lot of times we watch a show like this and we didn't grab our notebook and write all of that down. So where's the best place to where you are? Where we can find your information. We can really drill down on maybe a better approach and a better way forward. How do we follow the work that you're doing?

[01:47:25] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Please come to perfection. Imaging and perfection is spelled with sh t in the center. Perfection imaging.com. I am launching my Substack, but in the meantime, you can read The Smart Woman's Guide to Breast Cancer. You can find that anywhere that you get your books and, um, you can follow me on social. I'm at doctor Jen Simmons and my Jen has two ends.

[01:47:51] Del Bigtree

Jen, thank you so much for what I think is a very positive message during Breast Cancer Awareness Month. I'm always amazed the more awareness we bring to something that the worse it gets. It's a curious thing. Maybe this year we can start moving in another direction.

[01:48:10] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

I mean, I certainly hope so, but this has become an area that is wholly about dogma and has lost and left science long ago. Um, I'll just leave you with some parting words, which are please think before you pink, because many of the times these organizations that offer pink things in the month of October are actually contributing to the very disease and the very problem that we all concern ourselves about. Because the one thing that I think unites all women is that they are afraid of and concerned about breast cancer. And if you go back to the basics and protect your environment, the food that you eat, the water that you drink, the way that you think, the way that you move, protect your sleep. Say no to all those toxins. Have detoxification practices, you know, get exposure to sunlight. All of this is going to make a difference. But what's not going to help you is going to get a mammogram every year.

[01:49:15] Del Bigtree

All right we heard it doctor. Jen Simmons thank you for your time. Keep up the great work. And I look forward to to meeting with you again soon. Take care.

[01:49:25] Jennifer Simmons, MD, Integrative Oncologist & Breast Surgeon

Absolutely.

[01:49:26] Del Bigtree

Think before you pink. At the end of this month, you may want to think before you poison your own child. I'm of course, talking about we've got Halloween, which is sort of the beginning of our sickness holidays. Let's just pack our kids full of garbage and sugar and ask us why the flu is now spreading. Well, there's a group of moms and natural health candy makers that have all come together. I am being stopped in the streets with people saying thank you for tricked by the treat. What do I mean? Well, take a look.

[01:49:58] Female Speaker

Dear neighbors, it's the mom down the street. I've got a confession to make. Every Halloween night, my kids race home with bags full of candy. And every year I force a smile while secretly plotting to throw it all in the trash. Why? Because the scariest thing on Halloween isn't the ghosts and goblins roaming our neighborhood. It's the candy. The toxic candy you're passing out filled with high fructose corn sirup, hydrogenated oils, artificial dyes, and synthetic flavors. Halloween fun has turned into a parent's nightmare. And if I let them eat it, they get a tummy ache and turn into hyperactive monsters. So I pry the junk candy from their sweet little hands with promises of the switch witch, and I'm left feeling like the candy police ruining all the fun. Thousands of parents have had enough. Stop wasting your money on toxic candy that destroy our children's health. Join the Halloween candy revolution. Tricked by the treat is the healthy Halloween Treat initiative sweeping the country, bringing delicious, nontoxic treats to our children this holiday season.

[01:51:05] Female Speaker

Halloween last year was like the best Halloween ever. It was a really fun last Halloween. I don't think I could explain how good it was. I ate so much candy. Like I never got to do that. Like it was so fun.

[01:51:18] Female Speaker

Our most popular healthy Halloween variety pack is filled with kid approved candy made with clean ingredients, natural sugars, and believe it or not, options that support the immune system and promote healthy teeth.

[01:51:30] Male Speaker

In the past, my mom has been really strict about Halloween candy, but last year she wasn't because it had all good ingredients. I've never seen my mom happier on Halloween. I loved every piece of candy in that bag.

[01:51:42] Female Speaker

It's the perfect switch switch swap. And this year we've added 15% more pieces in every pack. Plus, every bag includes our beloved Switch Switch Adventures book, a magical Halloween story that brings the treats to life and builds excitement for the big night.

[01:51:56] Male Speaker

She goes on. Oh, really cool new adventures.

[01:52:00] Female Speaker

I don't even know how many times I read the switch which book to my little siblings. We all loved it.

[01:52:06] Female Speaker

The truth is, most people don't even know how toxic Halloween candy has become. Conventional candy is filled with GMO corn sirup, synthetic stabilizers, and even plastic. But we've partnered with incredible brands that use plant based coloring, real juice concentrates, and natural sugars that kids love.

[01:52:24] Female Speaker

Their sweet, their sour. There's chocolate. There's so many choices and flavors.

[01:52:29] Female Speaker

From irresistible chocolate to chewy gummies, fruity lollipops, and bubblegum, kids get the candy they love, and parents get the ingredients they want. Now that's a Halloween win.

[01:52:39] Female Speaker

My favorite the chocolate bar.

[01:52:41] Male Speaker

I'm so excited. I heard that there's going to be more like chocolate.

[01:52:45] Female Speaker

And for all you chocolate lovers out there and you know who you are, we've got something special. An all chocolate bag packed with clean, guilt free, chocolaty decadence. We've even jumped on the Swedish candy craze to indulge in this trendy European treat while knowing every ingredient meets our toxic free standards.

[01:53:02] Female Speaker

I can't wait to try.

[01:53:04] Female Speaker

Our mission goes beyond better candy. It's about creating a healthier future for our children. That's why half our proceeds support nonprofits dedicated to protecting children's health. And through October 2nd, you can support the mission and save 10% sitewide with our early bird sale. That means 10% off for all your rockstar neighbors who want to pass out the good stuff this Halloween treat. Our neighborhood PAC has over 900 pieces. That's more than four times the candy we offered last year, so go to tricked by the treat.com and secure your Halloween candy now. The more you order, the more you save. We sold out last year, and with even more candy in every pack and new products this year, we will sell out again. And don't worry, two day shipping is included in all pricing. So when your candy ships in mid-October, it'll get to your door fast and melty free. Join me and the thousands of parents and grandparents who are saying yes to clean candy. More magic and the Halloween our kids deserve. Order now at tricked by.com.

[01:54:09] Del Bigtree

I think October 2nd is tomorrow night, so if you want that 10% off, you may want to get on that right away. I want to thank my executive producer, Jen Sherry, just one of those people that is doing her part, as we all are trying to figure out, a way to navigate what Jen Simmons just described as a super toxic environment. That sucks. It does. Um, and we need a government that can, you know, start helping us with, you know, some of these industries that are poisoning us left and right. I am all about that. Uh, tomorrow we've been, uh, you know, having off the record. Every Friday night. Uh, this week we're going to be playing a great interview that I did with Neil Oliver. This is one of the great voices and storytellers out of Europe. He was a former archeologist who then got into talking about the land and the earth and travel videos, and then all of a sudden got sucked into Covid and said, what the hell is all of this about? It's a fantastic interview. Here's just a little bit of what we got into in that discussion.

[01:55:14] Neil Oliver, Broadcaster and Author

We are in a time now of flux and change and apocalypse and revelation, and the truth is being exposed. And, you know, we are our age. You know, we are, you know, we're of our generation. But it does more seriously beg the question, what becomes of the 20 somethings?

[01:55:31] Del Bigtree

That's what my kids. 17 I think about what's that world he's stepping into now?

[01:55:36] Neil Oliver, Broadcaster and Author

My eldest son is 20. My daughter's 22. My youngest son is 17. And I look on and I see that they are way more wide eyed and aware than I was at their age, partly because they're around their mum and I and they hear what we're talking about, but they're very much switched on.

[01:55:56] Del Bigtree

They don't believe the news. They don't. They've stopped. They're just like, it's all.

[01:56:00] Neil Oliver, Broadcaster and Author

There's vast swathes of what they're being told that they have already dismissed at their age. And I think that's very positive.

[01:56:07] Del Bigtree

Neil Oliver is one of those people that just blows your mind with how he puts his thoughts together. You see him give speeches, but in an interview like that, just to see how eloquent and beautifully he describes the world he's in, how much he cares about his children. It was like two dads really breaking down on what is going on in this world. I think you're really going to love that. It's available to you at highwire dot plus. Go and check it out and let everyone you know that we're not just delivering the Highwire. Now that they can tune in on Mondays to the download for really short, impactful moment discussing what's coming up in the week with Jefferey Jaxen. Then Friday's end the week with just a nice sit down discussion. There's some big ones out there. Andrew Bridgen is out there floating around and I am getting so many reviews on my David Eick interview. If you haven't watched that, you definitely have to check that out. I'm literally being stopped everywhere. People saying that was mind blowing. Um, to wrap all of this up, if I look at this show and all of the things that we covered, Ron Johnson had a hearing on Monday where people described, I don't believe, a total failure in the medical system. I think it absolutely, for some reason, was organized and put together to destroy people's lives. I don't know why. I'm still trying to figure out who is they. We have some sense. We've alluded to it.

[01:57:28] Del Bigtree

We get it. You know, an idea of maybe what was the agenda behind it. But the medical establishment lied to the world. They took away products that could have saved lives. They enhanced the death rate and made us afraid, which, as Denis Rancourt said last week, is perfectly capable of killing us too. If we have that much fear. It did it on purpose and it lied to us. And then we look at the mRNA technology. It's a terrible technology, um, one that, you know, we've got to figure out how to stop. And then we got into breast cancer where, you know, you know, all of the, as we know, all the media tells us test, test, test testing early. That's the answer. And yet we find out actually everything is increasing. We're moving in the wrong direction. Once again, mainstream medicine is wrong, but there's always individuals that step out, individuals that start speaking the truth and the beauty of social media and the beauty of new media networks like this on the highwire, is these voices are now being heard in a way that we've never seen before. And frankly, Robert Kennedy Junior as HHS secretary because of new media and the new voices, because one thing is for sure, the mainstream media that is owned by the pharmaceutical industry or is owned by mainstream medicine, mainstream agriculture, mainstream chemical. The mainstream is killing us. And so we're all doing everything we can to try and make a better world. And we're all thinking about our kids.

[01:59:03] Del Bigtree

And so I want to be really clear. We had a very, I think, insightful conversation. Doctor Robert Malone and I, and we talked about some people that are also involved in this conversation that weren't here. And I want to say, I know they love their children. I know they care about their children. I know they're passionate about this movement. And I know they're frustrated because children are dying every day. People are dying every day, whether it's from the glyphosate in the food and the destruction of their gut biome, which is leading to sensitivities and maybe vaccine reactions they wouldn't normally have. We are in a toxic soup. We have breast cancer and colon cancer, and it's just everywhere we look. We are We're under attack, and we want a magic wand that we can just swing around and say, there, we fixed it. And maybe some of us thought Robert Kennedy Jr was that magic wand. He's just going to go in and Donald Trump's going to set him loose and everything's going to change. I wish that was the case, but I never believed that that was actually the answer. If so, I would have stopped doing the Highwire and I would have told Aaron Siri, we're done suing. We don't need to anymore. We got the magic wand. We put Robert Kennedy Jr into HHS. Our problems are solved. They're over. I've never said that. I never believed that. And to be completely honest, I don't know how much Robert Kennedy Jr is going to get done in there.

[02:00:26] Del Bigtree

And it won't be for lack of trying. I want to let you know that I do talk to people on the inside all throughout, in different departments and what they describe as a man. They see taking slings and arrows and in blood, sweat and tears every single day. That is doing his best, trying to figure out how to get to the swamp, trying to get decent people to join him and stay with him and not quit while others are getting fired by people he has no control over. It's a very hard situation and I'm not forgiving it. I'm not apologizing for it. But what I have said from the beginning, the moment he was in there, is don't take your foot off the gas. Don't think that this is our only answer. The power is in we the people. And that's why I still love this petition, because it's making people think about what is not being done and how dangerous this mRNA technology actually is. But for all of those doctors and scientists that signed on to this important letter, I have a suggestion. Can we write a similar letter to the American Academy of Pediatrics who you actually work for and with? Can we write a similar letter to the AMA? Since most of you are doctors and MDS and you have all these letters behind your name, why are we going to the nanny state? Why is it always the answers? The federal government come and save us.

[02:01:48] Del Bigtree

The federal government. Look where that's gotten us. Why do we go to the actual agencies that are overriding and suing our HHS secretary and taking away ACip, and continuing to recommend the most dangerous vaccine product we've ever seen? And they're wearing lab coats, and they're one of you, and we can't tell the difference. Which doctor do we trust? Why is there no letter to the American Academy of Pediatrics? If you represent 60 million doctors, why not say all of us will walk away from this profession if you don't stop poisoning children, if you don't start looking at the science which is ubiquitous across the world, we as the doctors of the world that are seeing the problem are calling out our own institutions, our own hospitals, our own university systems that are lying to their students and lying to the people and the chemical companies and the drug companies and the American Academy of Pediatrics and the AMA and all the rest of it. That would be a letter I think would be really effective. It might be risky. You might actually have to really take a chance by being involved with that. I'm not going to tell you to stop criticizing Robert Kennedy Jr. We criticize him and what he's achieving all the time. We have lawsuits against HHS Secretary, but please consider what would happen if we really did withdraw all support. If we stopped the voice inside of our government that is making headlines and making those headlines, making the mainstream media of the mainstream medicine and ag companies, they're making them write headlines about injury and illness and, you know, toxic chemicals and vaccines and dangers, all words that were never said for over 40 years, and now they are.

[02:03:44] Del Bigtree

It's not the answer. In fact, maybe it's just a little nudge and a little help to the work that we need to do as the people. We the people are the answer. Our voices are the answer to every podcaster out there talking about it. You're part of the answer. Let's not tell people to give up. Let's not tell them to withdraw support from the only people that have ever done anything for them. Why don't we ask those people that we have thrown into the sewer, thrown them over the wall? Why don't we say, is there anything we can do to help? Is there anything we can do to help you move faster? What do you need from We the People? Maybe that's an approach we should also consider in all the things that we are doing. These are really important times. These are important conversations and the decisions we make. If we're going to push our chips in. Are we ready to lose them? Are we ready to stand for our children in the right way? Yes. Righteous anger is great, but righteous apathy is not. Don't give yourself a reason to pull out and give up. Give yourself a reason to talk. Spread the message and change the world. This is the Highwire. And I'll see you next week.

