

Announcer:

Bulletproof Radio, A State of High Performance.

Dave Asprey:

You're listening to Bulletproof Radio with Dave Asprey. Today's episode is one that I am really excited to bring you, because, using ozone medically is what reversed the toxic mold poisoning that I had, going back more than 15 years. And I did it at home. And I've shown hundreds of people how to do it. I'm one of the voices talking about how this is a broad spectrum way of treating almost anything that's infectious. And it's something that's been used since World War I, even before we had antibiotics. And I wanted you guys to know about this because, if I get a cold, now, a third of colds are caused by the coronavirus family, maybe 20% of them. Or, if I get any other infectious bacterial thing, I use ozone before I would touch antibiotics, because I know what happens after 15 years of taking antibiotics every single month for sinus infections.

Dave:

This is something that is missing from our conversation about how to stay healthy, especially when things are not healthy out there. So, I have one of the world's top experts coming back on this show, a guy who actually treated Ebola with ozone therapy. And before we get into the episode with Dr. Robert Rowen, I want you guys to know, a lot of times, any conversation about ozone is getting taken down or censored right now for reasons that are beyond me. It's actually pretty horrifying. So far, podcasts have been relatively safe for that, but really, you should probably save this podcast because I'm really hoping that it stays online for you. With no further ado, Dr. Rowen, welcome back to the show.

Dr. Robert Rowen:

It is an honor to be back. Thank you, Dave.

Dave:

Well, you've got 30 years of experience as a doctor, and as people on the show know, I believe in learning from my elders and people who have more experience than me. And given that I'm not even a doctor at all, and I don't claim to be, I feel like I have decades of learning to have from you. And I've already learned a lot, because you're one of the people who travels internationally and teaches oxidative medicine, of which ozone therapy is one part of that. And maybe 50% of the show goes, episode 352, you were on talking about Ebola. But what I want you to do now, to share with people listening is, just, what is oxidative medicine? Why does it matter?

Robert:

Oxidative medicine goes back more than a hundred years as you said. Nikola Tesla patented the first American ozone generator, although it was in Europe beforehand. You know about hydrogen peroxide, everybody does. And then there's ozone, there's ultraviolet, and there's intravenous vitamin C. These all belong to a family of therapies commonly referred to as oxidative medicine. And it is a really natural therapy, most people don't realize that. Our immune cells, white blood cells, go after infection by making oxidants and tossing them at the invader. Now, if this didn't work, we wouldn't be here. And the invaders have never been able to get away from this.

Robert:

These molecules are called germicides. They're actually germicides antiseptics. Our cells make bleach.

Dave:

They do indeed.

Robert:

They make hydrogen peroxide, they make ozone, they make other oxidants. All of these are ox. What is an oxidant? An oxidant is something that takes an electron, grabs an electron, in contrast to reduction, which donates an electron. And oxygen is an oxidant, it takes electrons, grabs them. So, our bodies make these molecules in defense, throws them to bacteria, and it can destroy them on contact. An oxidant, a strong oxidant can punch a hole in the wall of a bacteria. And in the case of viruses, this is what got me so interested in Ebola. When the Ebola epidemic was coming around, I mean, having had 34 years now experience in ozone, at that time, it was about 30, 29 years with ozone, I said, "This should be an ideal treatment for Ebola," and I decided that I wanted to go and treat it.

Robert:

And we were able to get a personal invitation from the president of Sierra Leone, and I recruited Howard Robbins to come with me, because he pioneered the direct intravenous gas method. And at first, he said, "You're out of your mind, Rowen. I'm not going, I'm not going to die there." I said, "Fine, I'll go, I'll take ozone, I'll do your method." And he said, "No, wait a minute, you're not getting all the credit for this," and he changed his mind.

Dave:

But, I mean, it takes a little bit of faith in your methods to say, "I'm going to go into an Ebola hot zone, and I'm going to know that ozone is going to protect me." How did you know it was actually going to do that?

Robert:

Ebola, I did know intuitively, or, at least, I believed intuitively, but I also read the biochemistry. And Ebola, like many viruses, requires an amino acid on its surface called cysteine, C-Y-S-T-E-I-N-E. Cysteine is a sulfur-bearing amino acid. And the research said on Ebola, and on CMV, that the cysteine has to be reduced to be active. If it's oxidized, it's inactive. Research had been done on cytomegalovirus, where they oxidized it, and it lost infectivity. And when they chemically re-reduced it, chemically added the electron back, it regained two-thirds of its infectivity.

Dave:

So, you can use an extra free electron as an on/off switch for infectious viruses?

Robert:

It's an on/off switch. Exact. Now, the cysteine amino acid bears this whole hydro group, which I say, my analogy, it's like the fingers on your hand. Here are the fingers on my hand, on the cysteine, and it can open the cookie jar, plop in, get into your cell, destroy the cell, and replicate. Ozone chops off the fingers by oxidizing it. Now, how does my hand open the cookie jar? It doesn't. It can't. So, ozone, by oxidizing the... I mean, God was brilliant. I don't know, it's just a cliché in designing the body to make oxidants to take care of pathogens. That's, nature has done this for us.

Robert:

Our body hurls an oxidant at the pathogen, it oxidizes it, fingers get chopped off and it can't get in the cell. That's how nature has done it. These pathogens seem to be redox sensitive, oxidation reduction sensitive. This makes sense because, you know that acid-base chemistry governs the activity of enzymes. In fact, you can change colors of solutions by just slight variances in the pH, acid-base. Enzymes are critically sensitive to pH. The acid-base of the body, the venous pH is 7.4. Slight alterations can make you sick and damage your body. Redox is very critical too, and the medical world has ignored this. So, it appears that oxidizing the blood creates an environment that's hostile for the viruses and bacteria and gives you an edge.

Robert:

But that's not the only thing, what is the most important thing in healing? It is oxygen. It is getting oxygen to the cells. Bottom line in everything. No oxygen, no ATP, no energy. Cell can't repair, you can't mount a resistance. When you're facing an infection, the white blood cells consume 50-plus times the amount of oxygen acutely, then they do it rest. And if they don't have that oxygen, they can't perform for you. So, what does ozone do? Ozone is oxygen, it's O₃. The oxygen you're breathing right now is O₂. O₂ is not that active oxygen, it needs a spark. In other words, you can mix gasoline with oxygen, but without a source of ignition, nothing happens. You need a spark plug in your cylinder. Ozone carries that spark.

Dave:

The extra electron, because O₃ instead of O₂.

Robert:

Right. It's already activated. This oxygen is activated and will instantly oxidize, instantly. Or is the O₂ that's here right now, isn't burning up my shirt. It needs a source of ignition. Ozone has that source of ignition. Ozone has several effects. It has, first, it increases 2,3-DGP in red blood cells. Red blood cells are the trains carrying oxygen. Oxygen is the cargo. If the train doesn't make a stop at the station, and doesn't unload its cargo, it doesn't do any good. 2,3-DGP enables the red cell to dump its oxygen at higher pressure in your tissues, to get better oxygen diffusion to yourselves. Ozone does that.

Robert:

Ozone also improves red cell membrane flexibility, which is important. Red cells tend to get stiff with age, and your capillary is smaller than your red cells. So, the red cell has to fold like this, to get into the capillary. And ozone helps rheology, blood rheology. Ozone improves the negative charge on the red cells so that they repel each other, they don't stick together. Ozone increases nitric oxide. Men know what nitric oxide is about, it's a vasodilator, helps with erectile dysfunction. But nitric oxide is important in the capillaries themselves for vasodilation. Ozone increases prostacyclin, the most important vascular lubricator. Ozone seems to also increase the AV, arteriovenous O₂ difference. More arterial oxygen, less venous oxygen.

Robert:

This spread in here is the amount of oxygen your mitochondria are consuming. More spread, more consumption.

Dave:

And that's what [Dr. Frank] Shallenberger talks about with ozone therapy. He says, "Look, it makes mitochondria work better. And that's because, well, when they're working better, well, they suck more oxygen." Well, they do, because they're burning more of it because they're making more energy.

Robert:

Yeah.

Dave:

And in the context of coronavirus, I've dug very deep on what's going on. I've been in discussion groups with elite level people working on solving the problem, who aren't all public about what's going on, I think there's overwhelming evidence that it is damaging hemoglobin. And I say it's overwhelming because there's three different proof points that different groups have come up with that all arrive at the same conclusion. And so, if you're in an environment where you have less capacity to carry oxygen, how important would ozone therapy be in that environment, where literally people are getting little red spots on their toes because there's no oxygen there, and they're getting brain damage because there's no oxygen there, and cardiac damage because there's no oxygen there, and the mitochondria are freaking out and causing inflammation?

Dave:

What does ozone do? Is it because it's killing viruses? Is it because it's fixing blood flow? Is it because it's adding oxygen? Or because it's adding electrons? What is it?

Robert:

Let's continue with the Ebola story, and it'll fill in the gaps. As I said, Ebola has cysteine on it, coronavirus is rich in cysteine, rich. Articles are on this. The scientists are missing connecting the dots. It took a clinician, an ozone clinician to see this. Coronavirus is rich in cysteine, and the research says it has to be active cysteine. If it's not there, coronavirus isn't going to work, same with Ebola. So, it's antiviral. We're going to get to some more mechanisms there in a moment. What else does it do? Ozone modulates inflammation. If your immune system is like this, it brings it like this. It brings it into balance. If it's like this, it brings it into balance.

Robert:

These viruses are increasing interleukin 6 and other inflammatory enzymes like TNF alpha, tumor necrosis factor alpha. These are powerful cytokine's molecules that promote inflammation. Where there's inflammation, there's swelling. Where there's swelling, there's edema. Where there's edema, there's less oxygen, because there's much more for the oxygen, much more length for the oxygen to diffuse, and the tissues are starving of oxygen with this inflammation. Ozone modulates those cytokines and reduces inflammation. Silvia Menendez of Cuba, her team showed that ozone works well as dexamethasone, one of the most important synthetic steroids, one of the most powerful synthetic steroids, ozone works as well.

Robert:

So, ozone is reducing inflammation, modulating inflammation, delivering more oxygen, improving mitochondrial oxygen consumption, and ozone itself is toxic, kills microorganisms. Now, I have to explain that a little bit further. When you give ozone, ozone is so reactive, it instantly reacts with your blood or whatever it touches. Ozone isn't going to make it necessarily to all the way to your lungs or

wherever it is, but it creates reactive oxygen species called ozonides. And these still are oxidants, still. Weaker than ozone, but they're oxidants, and they're going to be more electron-seeking than the sulfur on cysteine. So, it still will have the capacity, in my opinion, to oxidize those residues and inactivate the virus.

Dave:

So, ozone enters the blood, in this case, we're doing blood ozonation, and there's other ways people can do ozone at home, the way I do it, but you go to an ozone therapist, they introduce it intravenously, the ozone almost instantly when it hits the blood, converts from ozone into O₂, and then some free radicals, but makes ozonides with the free radicals. And then those go through, and those are the antiviral particles.

Robert:

Yes. But let's eliminate the term free radicals, because it doesn't appear that free radical mechanism is how this is working. Free radical, by definition, means a molecule with an unpaired electron.

Dave:

And so, these are specific free radicals that are actually signaling molecules. This is, I think, what I got.

Robert:

These are signaling molecules, but they're not necessarily free radicals. Nitric oxide is a free radical. So, yes, there is one, but the ozonides, they might be peroxide, which is not a free radical.

Dave:

Okay, got it.

Robert:

It might be cyclic oxygen species. They don't have to be free radicals, but they're ozonides. They're oxygen-rich molecules that are highly reactive, and they are cell signaling molecules helping the cells talk to each other, activating them.

Dave:

If you had coronavirus and actually got the symptoms of it, which, if you regularly use ozone, you probably wouldn't even get the symptoms, I don't think. But, let's say you did get the symptoms of it, would you do ozone therapy?

Robert:

Instantly.

Dave:

Okay. How would you do it on yourself?

Robert:

Well, unknown what might come in my office, I'm doing prophylactic ozone. So, I do, I drink ozone water every day, I have a stethoscope, I get ozone in my ears by insufflation. And yes, I do believe it works, I'm doing it almost every day. And there's reasons why I believe it works. I take blood ozone, I take high dose blood ozone every one to two weeks, and I take rectal ozone as well. And when I'm sick, I double down, and then I'll take high dose blood ozone. And generally, if I do get sick, it's gone in a day. So, I'm doing this on myself on a regular basis. If somebody comes in sick to the office, we double down and do high dose intravenous ozone.

Robert:

And I am encouraging my patients and the public to do home ozone. And I have a wealth of information on my website, drrowendsu, S-U.com, that's my wife's name.

Dave:

So, drrowen.com, or drrowendsu.com?

Robert:

Drrowendsu, drrowendsu.com, and we have a wealth of information there on ozone, home ozone, and we also direct people to let you know that we're trying to do our civic duty. We no longer teach home ozone in our office, it was expensive nurse's time, and the patients had to pay a lot of money for the nurse's time. My wife and I made a one hour video on how to do it, and we donated it to ozonewithoutborders.ngo, nonprofit, Nancy George Oscar, we donated that video to the nonprofit, and they now are making it available to the public for a \$20 donation.

Dave:

Beautiful. And guys, this is nothing that Dr. Rowen is going to get paid for. There are a bunch of different guides you'll find online for how to do home ozone therapy, I would recommend Dr. Rowen's video, because it is entirely possible to do something that is unsafe. For instance, if you breathe ozone, it's really bad for your lungs, and you will cough like you've never coughed. And if you were locked in a room with it, you could actually kill yourself, although you would probably run out of the room because it's really unpleasant first. So, it is not for the lungs, but if you put it in your butt, if you're on my Instagram page, you probably saw my video where I actually was like, "Hey, here's how I do it." I think I hashtagged it, reverse fart.

Dave:

Yes, you put a little bit of ozonated air into your butt. The way that you would do it medically, is with an IV, which is what we're talking about. But then, the other two things that you mentioned there that, or three things that everyone can do if you have an ozone machine, is, you can go out there and make ozonated water, where you just bubble it through some water and then you drink the water. It smells like ozone, just don't breathe in while you're drinking it, and it systemically absorbs. And blowing it in through your ears with little stethoscope when you have a cold or congestion is pretty incredible what that does. And the systemic effects of doing it rectally are also very noticeable.

Dave:

When I first did this, I was trained by actually a dentist who had done ozone for many years, who's in his 80s, and had 20 years of clinical experience. So, I felt safe doing it, and I will tell you, it fixed my brain. I would not be recording this podcast right now, had I not figured this out 20 years ago, and said, "Wow,

I'm turning my circulation back on, I'm getting rid of a bunch of infectious Lyme and mold and God knows what else." So, I'm not saying this lightly, and I have Dr. Rowen on to talk with you about this, because he's got the science.

Dave:

And it is critically important that you think about this, and you say, "Wait a minute, I could go and I could go get some antibiotics, or I could go to try whatever drug for whatever," whenever you get sick, whether it's now or some other time. Or, you could think about it and say, "You know what? I have this machine, or maybe I've access to a friend's machine, whatever, and I filled this little bag with some gas, and I put it in a place that wasn't that exciting to put it, and magically, I got better." It's pretty much like that. Am I overstating my case?

Robert:

Slightly.

Dave:

Ah.

Robert:

Very slightly, very slightly.

Dave:

What did I miss? You might have to do it twice?

Robert:

Well, for now. First of all, rectal ozone works, the Cubans did most of their work with rectal ozone. It works. But rectal ozone doesn't seem to work as fast as blood ozone.

Dave:

Agreed. Blood ozone is best.

Robert:

That's all. That's all. You nailed it, blood ozone is faster.

Dave:

I think I've done a video with Dr. Matt Cook doing ozone dialysis where I pull all my blood out, filter it and put ozone back in. And same thing with Dr. Harry Adelson, when they do the bone marrow stem cells, they're actually using ozone on the STEM cells before they put them back in, to give them that extra energy to do their work. The thing is, it sounds crazy because it's like a pollutant is what people think of, but it is a signaling molecule, it's just critically important. And you did have success with Ebola. You were talking about how you and your friend decided to go down there, and tell me what happened, when you treated someone who had active Ebola with ozone therapy, how did you do it, and what happened?

Robert:

Five of five cases. Now, I will tell you what happened. We met with the president of Sierra Leone twice. We had been invited by him. And we had to go through certain ministers and the Ebola czar. And when we finally got to their Ebola czar, who was a military man, he said, "Well, what are you waiting for? Get out there." So, we went out to the Ebola treatment center. Dr. Robins had already left by this time, I remained. He had to go back. And we had already trained a lot of doctors in Freetown. And then I was taken out to the Ebola containment unit, and there were a lot of health professionals there, nurses and doctors, and then it was up to me to train them how to do this very simple DIV method, direct intravenous gas.

Robert:

Now, there's controversy in the ozone world about this method, but it's dirt cheap, it costs less than a dollar per treatment, because all you need is a syringe and a butterfly needle. And by the way, I think it's got advantages for coronavirus, which, if we have time, we'll talk. I prefer, I actually like that method. So, we're treating people and a call comes in from the assistant minister of health, to the military in charge of the center, "If you value your job, there will be no ozone at the center." That was conveyed to me immediately, and I felt like I was kicked in the gonads.

Dave:

And who sent that to you? That was the president?

Robert:

That was the assistant minister of health.

Dave:

And no explanation of why, even though you'd successfully treated five people and cured them?

Robert:

No, no, no, no, no, no, no, we hadn't treated them yet, we're training, we're training, we're training. 10 minutes later, the minister of health calls and says the same thing. So, the commander comes to me and says, "We've got to shut this down." And like I said, I literally felt like I was kicked in the gonads. And I lost it. I'm pretty cool-headed guy, I lost it. I said, "This is a crime against humanity. People here in this room are going to die." And no one disagreed. And one doctor did die, because, weeks later, he got Ebola and he was denied treatment when his test turned positive.

Dave:

With ozone, he was denied treatment.

Robert:

Yeah, he was thrown in the quarantine unit, and he wanted ozone, and they wouldn't let him have it, and he died a horrible death. So, let me tell you what happened, and I think we discussed this the last time I was on your show. One of the guys I was training, and I have a photograph of him, three weeks later, pricked himself with a contaminated needle. Within 48 or 72 hours, he was getting symptoms. He knew if he had tested himself and it was positive, he would be thrown in the tank and denied treatment. So, he asked us what to do, he got treated immediately and recovered immediately. I mean, Ebola

typically goes like this, and as soon as you start getting symptoms, boom, boom, you liquefy. He didn't liquefy. Soon as he started symptoms, he started getting treatment, he did just fine.

Robert:

And then we were able to get to four other people, three of whom had tested positive, and the last one was the female consort of the chief doctor in Sierra Leone who just died of Ebola. She begged him to get ozone and he refused one thing, ZMAb, monoclonal antibody, which is what the pundits are pushing for coronavirus. So, while it's thawing out overnight, he dies. She's placed under armed military, guarded her home, can't get out, no one can get in or out. She climbs over a razor wire fence and cuts herself to get to our group. She gets treated and she does well. When I wrote the article, I did not know at the time, she didn't tell anybody that she was symptomatic. Because if she had told someone, she'd had been thrown in the tank in the night treatment.

Robert:

She was already symptomatic with Ebola, she got treatment and did just fine. And I finally, more than after we published the article in the African Journal of Infectious Diseases, I got a photograph of a handwritten scrawled letter from her, thanking God for ozone and saving her life.

Dave:

It's pretty dramatic in that you can feel it when you're really sick and you get ozone therapy, it's like a light switch going on, at least, it has been for me. That was a few years ago with Ebola, but you just had something published in December of 2019 in Medical Gas Research, and you said, "We have-

Robert:

Medical Gas Research.

Dave:

Say that again?

Robert:

Medical Gas Research.

Dave:

Sorry, I said Medial, Medical Gas Research. And you said, "We have no reliably effective treatment for aggressive viral diseases like Ebola or viral pneumonia." And that would be a code name for a certain kind of virus named after a beer. And you went in this article in a lot of detail, medical detail, about how ozone therapy works. And you said that the main risk of this from all reports is 0.7 complications per 100,000 treatments.

Robert:

Isn't that amazing?

Dave:

That seems a little bit lower than Tylenol, isn't it?

Robert:

Much, much lower than Tylenol, much lower. And it appears to be the safest medical treatment that's ever been known.

Dave:

But that seems a little bit debatable. I mean, you could say that there's band-aids that are probably also pretty safe.

Robert:

I'm talking about something that's actually administered internally to the body.

Dave:

All right, there we go.

Robert:

All right.

Dave:

But it's along the lines of safety of like baking soda as an antacid sort of thing, where it's pretty innocuous. Intravenously, you can do things like embolism, people inject a lot of air into the blood.

Robert:

This is why we do not want people to be doing medical treatments at parenteral, meaning, a needle is a medical treatment. And I really decry that because you can get hurt.

Dave:

You can, indeed.

Robert:

Please don't do it.

Dave:

That said, I may or may not have a backup glass syringe at my house, alongside my ozone generator and my backup ozone generator. And yes, I actually do have those, and my two bottles of oxygen, in case one of them gets left on or is empty, because that's enough to treat my family, and frankly, enough of our friends as well, for any sort of bad thing that could happen. And I don't care if it's a parasite, a bacteria that's aggressive, or a virus that's aggressive. This is the most broad spectrum thing that I have. So, I'm not a prepper, but I live on a farm in a rural area, which means you tend to have tools and things like that. And we've used ozone on our animals. And yes, I am a farmer, a rancher.

Dave:

I've used ozone on myself, I've used ozone on my kids to avoid them taking antibiotics. So, they have intact gut bacteria still. Both of them have had times where there was very serious skin infections, with red lines spreading. They'd go to the hospital, get IVs, no. Two half-hour sessions sitting watching

Netflix, which they usually don't get to do, while cupping. In other words, I pumped ozone gas into a silicon cup over the infected thing. One of the most near them was on his leg, and, you know what? The swelling went away, the color went away, and it healed just fine. I've also had multiple skin infections. Same thing, you cut yourself, you scratch yourself and you can tell when it's bad, you don't need Neosporin anymore, you just do this, and it goes away.

Dave:

So, I just, I want people listening to understand, this isn't just for coronavirus, but, I am not that worried about it, because I know that I have access to this, and I feel like this is one of those things like, would dream of a world where we can all grow our own food and we can all have distributed power generation, and we're a little bit more self-sufficient. Ozone at home is one of the most cost effective, most broad spectrum, most useful things you can do. Oh, is there a problem with your water supply? Oh, yeah, you can clean your water with ozone. I mean, it's like a Swiss Army knife of a thing. So, I'm and just completely happy fan of it, and there's several companies that make ozone equipment out there. And I don't know if we want to go into promoting one company versus another.

Robert:

I don't want to do that.

Dave:

I don't either, just saying there's lots out there.

Robert:

Our website has information on this, and there's others. I'll mention three companies, that's all. Just mention. There's Longevity Resources in Canada, there's Promolife in the United States, and there's Simply O3.

Dave:

Yep. Those are the three that I'm familiar with. They're all good, as far as I know, and I have gear from two of the three, and the other one sending me some. I have no promotional agreement with any of them right now, and that's not the intent here. The intent here is, you guys should have ozone therapy. Talk to me about medical gas. One of the things that surprised me 20 years ago, I went on to Craigslist and I bought an oxygen cylinder from the estate of someone who had emphysema. And I spent 20 or 30 bucks. And then I went to get it refilled, and, Oh, my God, it was like, I was like I was a terrorist.

Dave:

I went into the pharmacy, "What do you want oxygen for? Medical ozone?" And said, "There's no such thing, go to a different pharmacy." I finally asked a doctor, and doctor said, "Oh, no, I can't write a script for that." And I'm like, "What is going on here? It's just oxygen, and I can buy welding oxygen." So, I went to the place, this must've been somewhere in California, and said, "Where do you fill up your medical tanks?" And they said, "Right there." "Where do you fill up the welding tanks?" "Right there." It's the same oxygen.

Robert:

It's the same oxygen. That's correct.

Dave:

So, now you can buy welding oxygen and you get a little regulator that lets it work like medical oxygen for this. And that is what I do. Why is there such a control system placed on just stupid oxygen?

Robert:

Why do we have the pharma paradigm method that we have right now? The problem is oxygen is a prescription, medical oxygen is a prescription. Welding oxygen is not, it's the same source. I have to use medical oxygen.

Dave:

Well, because you're a licensed physician.

Robert:

I have to use it and I will. Industrial tanks are not as cared for as medical tanks, number one. Number two, when they fill an industrial tank, they don't wash it out with oxygen. So, if the industrial tank goes empty, now it's got room air in it, and then they put oxygen in with that dead space room air.

Dave:

Ah, if it was empty. Got it. Yep.

Robert:

All right. A medical tank, they put oxygen in, and they washed it out with oxygen, to make sure there's no dead air in there.

Dave:

They obviously flush it really quick.

Robert:

Exactly. So, there are differences. But for doing water, for doing rectal, for doing ear, et cetera, I just can't see, I, professionally and morally, I can't see any issue with this. The issue is legal. And my patients can get a prescription from me for oxygen, for home use, because it's an inappropriate part of their treatment. And if they ask for it, they get it. Medical oxygen costs more than welder's oxygen, but not that much more.

Dave:

What I did, this is way back in the day, is, I also went on to Craigslist and I bought an oxygen concentrator. And these make about 95% pure oxygen that you can feed into an ozone machine, which is absolutely not recommended for any blood related things. And it's less ideal for rectal because that 5% that's not oxygen is nitrogen mostly, which can make some nitric oxide. And it is what I used when I was recovering, because it was what I could get without a prescription. Now, how risky is it to use an oxygen concentrator? These things run 500 to 1,000 dollars and they'll make all the oxygen you want.

Robert:

If you were making ozone water, I don't think it's that risky. And yes, you will get some nitrogen oxides, but if you get them in water, I'm not that concerned about it, because we do get nitrates in our diet. I'm not real ecstatic about doing it rectally. But, if anybody is using an oxygen concentrator for making ozone for injection, really, really bad news, and I know of problems to let you know.

Dave:

So, that should not be done. If you're listening to this, going, "Well, hold on, I'm overwhelmed," you would need to get an ozone generator, and they run 800 to two grand, somewhere in there, you're going to need some tubing, you're going to need a little bag to fill up with the ozonated air, and you need a little tube that goes into your butt. That's pretty much it. Maybe the little stethoscope where you can put some air. And if you want, and the source of oxygen, which is either a welding tank with a medical regulator, you can buy those online from all three of those companies, you can also get those, actually, it's probably the only place you can get those, or you can use a concentrator, if you're just making the water, but not for the other ways.

Robert:

The other thing you want is a flask to bubble water and make water.

Dave:

That's right. And usually, when you order the concentrator, you get one of those from the three companies. And what that is is a glass stopper and cold water works better. So, what I ended up doing, when I was really into drinking ozonated water, which I don't do a lot, and don't take your vitamins with it, vitamin C cancels it out, I would actually get a one gallon jug and I'd have a little bubbler inside that. So, I'd have a gallon of ozonated water in the fridge and I would just drink it whenever I wanted to, and you feel a rush when you're doing it. It actually works. This is one of those, I'm going to call it home remedies, but with some tech, but it's more than 100 years old now, at least, 102, and probably more.

Robert:

Dave, let me share this with you. I went back to Africa just a little over a year ago. I had a patient, an African man who came to me for prostate, I injected his prostate during the two weeks he was here with ozone, he did great. In our discussions, his wife is a Polish nurse, who was... Now, European nurses are much different trained than our nurses. They are very active in what they do, and have a lot of discretion. She had read a lot of my stuff on ozone, she had read a lot of other stuff on ozone, and she taught herself how to do ozone. Now, this is Guinea, a really poor country in Africa, and she was doing on really poor people, just ear ozone and ozone water, and in certain cases, rectal ozone, and she was seeing some stunning results.

Robert:

That's why I had to go check this out. Ear ozone. And I had been doing ear ozone, and I believed in it, but she taught me a really nice method of doing it, that I liked a lot, and it's on the ozonewithoutborders.ngo site. So, people can get that, where you use a syringe, and slowly, just slowly push the syringe gas into the ears.

Dave:

Without the needle though, just the syringe.

Robert:

No needle, just a stethoscope. Pretend this is a stethoscope, and it's hanging like this. When you push the syringe in slowly, it goes in slow enough into your ear, that it reacts in your ear and nothing escapes. This was mind-blowing to me.

Dave:

Oh, because it's going in really slowly. Interesting.

Robert:

It's going in really slowly, and I've had my wife come up to me to sniff it, and the ozone is reacting in my ear. So, I've got a whole syringe, 60 to 100 cc's of ozone going into my ears, over about maybe five, six minutes, and you can't smell anything coming out. So, it's all being absorbed and reacting in my ear. It's turned out to be a fabulous treatment.

Dave:

What I've been doing is, if I need to do ozone in my ears with the kids, if you have a cough or a sore throat or anything coming on, we always do that. But I just put them in front of a door, I turn on a fan, and then we run a 16th of a liter per minute through the ozone generator into their ears. But you definitely would smell it if you weren't blowing it out the door. So, you're saying in even a very small amount. These are things that you could do almost anywhere if you just have access to the ozone. And frankly, if you were, oh, I don't know, in an apartment building somewhere that was under quarantine lock down, if someone on a floor has an ozone machine, you can make an awful lot of ozone in little bags for everyone on your floor, and it would be just fine.

Robert:

The first doctor who contaminated himself with ozone, felt like God spared his life because of the ozone. And although he was under orders not to do the DIV treatment on the Ebola patients, he had a machine, and he spirited in ozone in bags and ozone water to the patients, and the mortality at the center dropped from 60% to 25%. This was reported in The New England Journal of Medicine, and no one knew why.

Dave:

It was a miracle. Too often I've seen that there's a mindset that happens in science and medicine in a lot of human existence, where, that can't happen, therefore, it didn't, even though, clearly, it did, but it's inconceivable. And so, because it's inconceivable, you don't conceive of it and you just, you write it off and you push it under the rug. So, I'm happy that you could share why that happened. And I'm definitely frustrated where we are now, where we're chewing up our economy, I went on my last business trip and I said, "Well, I didn't know as much a few weeks ago as I do now. I'm less concerned now that I understand so much more about what is actually doing in the body. And all of those are hackable pathways. Everything we know that it does, there's an obvious thing and only a few of them are drugs. Some of them are, most of them aren't. Ozone is a major thing I do."

Dave:

I took my whole suitcase, put it in a trash bag, and I filled the trash bag with ozone gas. And you know what? Whatever was alive on there wasn't alive when I opened that thing up, including the contents of

the bag. So, you could actually sterilize everything. And in my house, I'm working on remodeling. We're actually making a closet that is airtight and has a vent. So, when I come back from a trip, airplanes are just nasty environments no matter what, I'm just going to put whatever I was wearing, and whatever my luggage is in the little room, flip on the ozone generator, and just basically decontaminate, knock it out. When I go out to my local community, it's actually good to have bacterial communities around there, but I don't want whatever the heck they do on airplanes. It also breaks down toxins.

Dave:

Things like pesticides and all that, also get destroyed by ozone, not necessarily in the body, although it might, but externally, it breaks down any volatile chemical. So, I feel like this should be a part of our life post-pandemic. What are the things I'm really hoping the pandemic does for us is that it forces ozone therapy into our consciousness as one of the things, oh, you might take some aspirin, you might do some ozone, you might get your temperature. It's just a normal thing. Now, I'm going to ask you this question, you have decades more experience than I do, am I just too optimistic?

Robert:

I think, ultimately, it will happen. Ultimately.

Dave:

Where is it going to happen first? Is it going to happen in Europe? Is it going to happen in South America? Is going to happen in Africa? Or is it going to happen in North America?

Robert:

Medical ozone will probably happen in Europe first.

Dave:

Okay. Germany, most likely?

Robert:

Italy, Spain. It's been in Germany, but it's funny, ozone got its start in Germany, but it's pushed aside by mainstream. They're doing ozone actively now studies for COVID in Italy and Spain and getting phenomenal results.

Dave:

What about China? I mean, China was the first that I saw to do vitamin C, which has a very good reason for being used, and you wouldn't obviously do it with ozone at the same time. But, do you think China is doing this? Have you heard anything about it in China or Japan?

Robert:

I have. As soon as COVID broke out in China, I contacted the Chinese embassy in Washington, I didn't waste any time, and I sent them the information that I had on hand. I did not have my article published yet, but I had drafts of it, and I sent it to them. And they said they would pass it on to Beijing. Nothing happened. I do know people in China, there is a lot of ozone in China, and I do know people in China who are doing it, and they've had good results, but not publishable results. So, it is being done in China.

Spain and Italy probably will be the first to get something published, but I really wanted to be the first to get it published here. I did so bad, but that's fine if they do it.

Robert:

Now, in terms of the population having it, I think you're going to see that here. Because here in the United States, we have a very repressed medical system, and there's a strong alternative community, and they are aware of this, and they are getting ozone machines and they're doing the things that you suggested. And I understand that these companies are selling machines like hotcakes, and people are benefiting thereby, because they can protect themselves. So, the population, the small but strong alternative population in this country is protecting themselves with this, while the mainstream is totally ignoring it. And you can't get this into the mainstream press, I'll tell you.

Robert:

Howard Robbins had somebody from the mainstream press, very interested in publishing on ozone, was going to do an article, he called up Howard the next day and says, "I can't do the article." Howard says to him, because he's a friend, "Tell me the truth, did they tell you to kill it?" He said, "Yes." And I had an experienced reporter, award-winning reporter for a major New York paper. She brought it to them with all kinds of good stuff in the midst of the pandemic, and they refused to run it. She was shocked. While people are dying.

Dave:

There's something just strange about that, but unfortunately, you really can't patent this kind of treatment, and locking it down is tough. And it's funny, I read a really interesting piece without getting too political, it was a piece about guns. Now, I grew up in New Mexico, my parents had a share in a gold mine. I would literally walk around when I was 12 years old with a rifle over my shoulder, just to go hiking for a whole day, because that's what you did when you grew up in the middle of the desert and there's no one around. And so, I don't have any issue with them, but there's a lot of gun violence in the U.S.

Dave:

And so, people are saying, "Oh, we should ban them, we should not ban them." I'm not even going to get into that. But the article, I wish I could cite its author's name, he said, "Look, there's a half-life of guns, and this is why it doesn't matter if you ban them, guns lasts for, at least, 100 years. So, you don't have to stop letting people buy them now, there are so many of them out there, that they're just going to be there." And the reason I bring this up is that there's a half-life for ozone generators, and it's probably 40 years if they're a good one.

Dave:

In other words, if you have an ozone machine, you can use it many, many, many times. And it doesn't really matter if it's popular or if it's not popular, as long as it works, and as long as you've got it and you have access to it. So, I look at this and say, "All right, all we need is a critical mass of people who have these things, and at that point, it doesn't really matter if some bureaucrats says, "You're no longer allowed to have an ozone machine," because you already do, and because, as a virtue that you're able to take care of yourself and your immediate local community. So, half-life, not of the zone gas, but half-life of ozone machines is really high.

Dave:

And that's why if you get one, and you say, "Well, I get to have it for 20 years," the cost per year is less than one doctor visit per year. And it's just, it's so important, I'm hoping that that's how ozone wins. Because, every year, a few more people get an ozone machine, and a few more people know about it, and they don't stop knowing about it, and they don't stop having machines. So, we will win over time, I was just hoping you were going to say it'll happen next year.

Robert:

It could happen next year if we can get to the right people. And yes, I do know people, and they've actually, I know someone who actually got my material into the hands of the staff of the vice president. So, we have it, but we haven't heard anything back.

Dave:

Well, all right. Man, I find politics to be obnoxious like the smell of too much ozone. And it doesn't matter which side, I'm like, I don't like tribes, I stay away from them. But, there was a recent statement about disinfectants, which, okay, we just talked about a chlorine, or HOCL is another chlorine-like substance, or hydrogen peroxide, which our immune cells do make. And then he said, "What about bright sunlight?" Now, for people who are listening, if you guys read, a lot of you guys have purchased Super Human, my anti-aging book, just came out a few months ago, I write about, very specifically, ozone therapy is an antiaging treatment, and I write about UV blood irradiation, with all the scientific references, with discussions about what it does to the lining of your arteries.

Dave:

Newsflash, the COVID virus is infecting the endothelial lining. And so, wait, UV blood irradiation, which, okay, if you just don't want to die of cardiac or coronary disease, you might want to take care of your blood vessels. That's why it's in my antiaging book. But, I'm going to ask you about that, because you know a lot about ultraviolet blood irradiation, which is the other side of what Trump said. He said, in fact, instant bright light, what should we do? I was wondering when I heard that, did someone put something in his hands, that talks about these, because those are both alternative therapies, well studied by the test of time.

Dave:

And in this case, UV blood irradiation, I know because I had to write all the, I did all the research for my book, from 1920 to 1950, this was FDA approved, it was commonly used before antibiotics, and then it fell out of favor, but it still is restorative. Can you talk about what it is, how you would use it clinically, and whether you think it's relevant? Now, I think I do, but I could be wrong.

Robert:

I would love to. Thank you. Trump hit a grand slam and the press, they were fighting for it.

Dave:

Oh, I was laughing.

Robert:

Yeah. And the public are not aware, because they're ignorant, because of the controlled press, that he did hit a grand slam. So, I mentioned that in the Spanish influenza epidemic in 1918, British physician, Oliver, halved the death rate of viral pneumonia with intravenous hydrogen peroxide. That's a disinfectant. Ultraviolet's a disinfectant. In this country, predominantly in this country, there was the Knott Hemo-Irradiator, ultraviolet blood irradiation. Lots and lots of articles were published on this, from the late '30s through the '40s. And by the way, I published an article on it. I published a review article called Ultraviolet Blood Irradiation Therapy: The Cure That Time Forgot. If you go online and type in Ultraviolet Blood Irradiation Therapy, Rowen, The Cure That Time Forgot, it will take you to it.

Robert:

I summarized all of the American literature and the German literature at that time on it. I wrote this in the early '90s. The American literature included a case series on virus diseases, including polio, but also including viral pneumonia. 15 of 15 cases of viral pneumonia in the 1940s recovered with ultraviolet blood irradiation, 100%. So, there's disinfectant number two. And then I go along with Ebola, with disinfectant number three, ozone, and we got five out of five cases of Ebola fixed, and probably, and more followed. So, what happened to ultraviolet? Ultraviolet was curing bacterial sepsis, all kinds of infectious diseases.

Robert:

The authors back at that time, Miley, I think Christianson is another one, they were so astounded by the effects of this, that they went to pains to describe the recoveries of hopeless cases, including septic cerebellar infarcts and other things. People walking out of the hospital, when they should have been, they would be dead today with this, and they recovered. And a whole series of articles was published on this, and then it disappeared. And there's probably politics why it disappeared. And if you want to hear it, I can share with you what I know.

Dave:

Sure. I think listeners would love to know about this, because what we're talking about here are well-proven, safe, broadly effective things that are pushed out for expensive things with lots of side effects. And I don't think it's in our best interest. I've personally had my blood irradiated and I developed superpowers, but that's a different story.

Robert:

I want to see you fly. That's not why you're called bulletproof? All right, in early 1950, this is what I'm told by the son of the inventor, Emmett Knott was the inventor. His son was the manager of the company, and he was Emmett Knott Jr., I think. And he died a few years ago. But I talked to him, I met him, and he said that Morris Fishbein, who was head of the AMA-

Dave:

That guy ruined so many good things. He was the founder of the AMA, actually.

Robert:

He went to Knott and wanted a piece of the company, and Knott wouldn't give it to him. And there's reasons not to like Morris Fishbein. So, he told the owner of the company, Knott Sr., "I'm going to destroy you." And he did. They fabricated an article in 1952, that went against scores of other articles on ultraviolet. Just one article. And between that and the fact that antibiotics were coming out at that time,

pills that at that time were effective, the company's sales declined dramatically, and by the early '60s, it went out of business because of pills. Now, Knott's son still was alive, James Hutton, a nature path in Arizona, had one of the few remaining Knott machines.

Robert:

And I went and visited him in Sedona one time, I got to see the machine. He had actually cured some cases of hepatitis C with it, and Knott's son, people tried to get to Knott's son, and he just resisted and resisted. He said, "If I'm going to do anything with this, I want it in hospitals." But because Hutton was using it, Hutton was able to get to him, they warmed up, and Hutton got the remaining machines that were closeted in a garage for years and years and years. And other people had already gone to the FDA and got documentation to the FDA that proved that this machine was in interstate commerce before 1975, when the FDA gained jurisdiction over devices.

Robert:

So, this device is grandfathered, it's lawful, it's legal, and it can be used, the few that remain, and it's incredible, this machine is incredible. And it is the granddaddy of ultraviolet devices that are out there today. It's the gold standard. Now, there are other devices out there that may work better or worse, I'm not going to say, but my standard still is the Knott machine. And I like other machines. There's companies out there, go there now. But this is ultraviolet blood irradiation therapy. They were curing staph disease, staph like MRSA. Well, they didn't have MRSA back then, methicillin-resistant, because at that moment, they didn't have methicillin, but it's still staph, and they were curing it. And it's published. And they were fixing asthma, they were fixing osteomyelitis, even botulism comma, there's an article about botulism coma that was published.

Dave:

What it's doing apparently is just fixing mitochondria throughout the body. Oxygen gets to places it wouldn't go before circulation improves, and I guess there's an alkaline shift from it as well. And it's funny to me that you mention Morris Fishbein. Because, the founding of the AMA is a really ridiculous story. This guy went around and basically asked all of the medical innovators of the time, "Give me a piece of your company or I will destroy you." It's a straight up mafia thing. And so, clearly, ultraviolet blood irradiation was, it was taken out. The other guy who got taken out was a guy named Royal Rife, and who's the father of a radionics. Basically, using EMF, a very gifted guy. In fact, some of Tesla's work might have been Rife's work actually, before Tesla had it. There's historical accuracy to that.

Dave:

And literally, the same smear tactics were used on Rife. And Rife was doing amazing work. I had a Rife machine years ago that could do things that were very noticeable, well, I'll put it that way, but most of Rife's equipment was smashed, his lab notes were burned. I mean, it was a full on, "I will destroy your company and your technology, if you don't give me a piece of it."

Robert:

There was others, there was a guy, Dean Shi, who had a light society treating people with light, plain visible light. They burned his books.

Dave:

So, if you think that the people who tell you you have to have a permission slip to buy a chemical or buy a device are working in your best interests, the history of the organization, man, it's tied in with propaganda, post-World War II, and basically, some evil shit. This is why it's a fundamental human right to have control over your own biology. It's not about medical freedom and all that stuff, it's actually much deeper than that. It's your biology, your body, your right. It's one of those things where no one should be able to tell you that you're not allowed to do whatever you want to yourself, even if it's stupid. It's not the police's job, it's not your doctor's job, and it's not the government's job. And it's not your mom's job, unless you're under 18.

Dave:

In that case, it's your job to assess those things, choose your expert if you want to, and then do what you want to do. You know all these things, I think I'm just sharing that with the audience because that's one of the reasons, by accident, important. If you know a little bit about how stuff works, you can say, "Hey, I'm going to choose this route with this practitioner." But, why do you need permission to do that? You don't, it's your fundamental right. Do you think we're heading in a good direction from that? Are people just going to wake up and say, "Oh, I do have a right to this, or I'm just going to try these things because they're cheaper or they're more effective"? Or, do you think that we're all getting more brainwashed? You have a much better history of watching the changes than I do. So, I really want your truthful assessment there.

Robert:

There's a war right now, and now it's turning into a hot war. I got a law passed in Alaska, I was the first in North America to get a law passed protecting unconventional medicine. And it has spread to several other states. Fortunately, California is one of them, and our board is respecting the law. But we have draconian interests, pharma, which, in my opinion, owns the country. And I believe the same people that own pharma, own the press. And there is a war right now because pharma is failing, antibiotics are failing. The war on infectious diseases is failing. I often, when I give talks, and this is for your viewers, I will hold up this 100 dollars federal reserve note, and I offer it to the first person who can name me a synthetic petrochemical pharmaceutical that cures a disease. Leave out antibiotics, just leave out antibiotics.

Robert:

Name me some other synthetic single drug that cures a disease. No one's been able to claim this. Pharma medicine has failed, and the only way that it can stay in power is through forced control, government-granted monopoly, which is essentially what's going on. Many people are waking up, and I think COVID is helping them to wake up, because they're seeing that what's going to come down on them is a forced vaccine. And the literature on coronavirus already says, from 2015, when they made an identical virus in Wuhan, they made an identical virus. Not this virus, but essentially identical. That article said that vaccine therapy didn't work on the animals, nor did monoclonal antibodies work. So, who knows what's going to happen here with viruses?

Robert:

Bill Gates is trying to keep us all in our house, until a virus comes out, and then we get lined up and injected with something that could derange the immune system. So, I think when this actually comes down, you will see something turn hot, where people are going to refuse this, and then it will remain to

be seen, what the government and Gates and other people will do to further restrict this, if we don't receive this vaccine. Which, according to Gates, he wants to put chips in it as well.

Dave:

What if it actually worked?

Robert:

That remains to be seen, that's going to take a long time to find out.

Dave:

Oh, it is. And so, I'm one of those weird moderates where I've had very negative reactions to vaccines, where I couldn't move my arm for a few, actually for almost a month after I got one in my 20s. And that was not positive. At the same time, if I could get certain types of vaccines that may not even exist yet, that would do very specific things to my immune system, my immune system is a disobedient little bitch. And if I could do some things, I would be very happy to turn off this excessive ability to respond to these things and all that. I want control of my immune system, and I have no issues with using a properly tested, properly created, properly customized vaccine to modulate my immune response.

Dave:

I would say, sure, you show me the evidence that it works, test it properly. I just know that it takes a long time to do that.

Robert:

Even childhood vaccines have not been tested properly, you know that. The controls are poor, this will take a long time. But you said, let's say that it works, Dave, there's no vaccine that's absolutely safe, and every vaccine will have a potential for deranging someone's immune system. So, do I want to be that Russian roulette player, when I have a therapy ozone that will give me wild immunity? Do you understand what I mean by wild immunity?

Dave:

Oh, yeah. You can actually make your immune system work to fight off just about anything that's out there, building superhumans, being highly resilient. I'm just, I'm saying, don't throw the baby out of the bath water. Even Dietrich Klinghardt was talking recently, he was like, "Maybe they'll make safe vaccines one day. And if for anyone out there who's, if you're an anti-vaxxer or you're anti-pharma, look, some drugs are useful. They actually are. Pharma is not bad. And I know I'll piss off both sides, some vaccines probably are useful today. I can tell you the tetanus vaccine I got was pretty good because I actually had real tetanus with lockjaw, going to the hospital, you die in 12 hours if you don't have it.

Dave:

It would have been nice if I'd had the tetanus vaccine, but I'd ran out. But I didn't want all the other crap they put in there either. So, it's a nuanced situation with vaccines, and you can't throw them all out, you can't say that they're all harmless and good either, because that would be stupid in either direction, and the same thing goes with drugs. So, you have to pay attention. Liquids are not good or bad, it depends what the liquids are and what you're doing with them. And injections are not all good or bad. And so, that's why we have experts, that's why we have doctors, that's why we have guys like Dr. Rowen. So, if

anything I just said pissed you off in either way, you need to go do some deep breathing exercises and find a therapist. Because this is not an emotional decision, it is simply, "Do I have the right tool for the job and the situation at hand?"

Dave:

And I'll tell you right now, the most broad spectrum tool there is in my mind is ozone. But I wouldn't throw out anything else that I might possibly get benefit from at some point. I don't know, I feel like I'm lecturing to someone who knows a lot more than I do, but this is more for people listening. What do you think about that perspective?

Robert:

Your wisdom is spot-on, and it's absolutely spot-on. I do use some drugs, not a lot, but I choose wisely. And vaccines, and I'm in agreement with you, I want a safe vaccine. And right now, I'm not convinced that the childhood vaccines are safe. There's aluminum in them. Do you want to inject an aluminum?

Dave:

I've seen all the studies on aluminum, I have big concerns about aluminum. I also wonder, what would happen if you got rid of all the aluminum, all the other crap? They would cost a lot more, and if you did that. And if you did genetic testing ahead of time to see who's likely to have more Th1 or Th2 immunity, there's probably some good arguments for doing those even. But the fact we haven't done all that work is a big problem. So, I don't want to go into vaccines because people are so tribalized and politicized about it, and it is simply ignorant to say, vaccines are all bad, or vaccines are all good. It is accurate to say, people will misuse any type of technology, at least, some people will, to give themselves money or advantage, and that medical technologies have been misused that way.

Robert:

Dave, I am not anti-vaccine, and I've said that repeatedly on my Facebook page, I am anti-forced vaccination.

Dave:

Yeah. Isn't that a Nuremberg thing about forced medical? It's kind of a war crime to do that. So, anyone who is for forced vaccination is for war crimes. I'll be pretty clear on that one. I think you and I are in alignment on that.

Robert:

Yeah.

Dave:

What did I not ask you about this? You have such a wealth of knowledge and experience in treating things that are supposed to be untreatable using technologies, that are apparently endorsed by the President.

Robert:

Well, as far as ozone goes, it's not just for infection. I use it in joints for like degenerative joint disease, and my results with knees are well over 80%. We've lost very few knees to the surgeon.

Dave:

My very first introduction to ozone therapy was way back when I ran that anti-aging group in Palo Alto, and we had this probably about a 400-pound obese woman come into one of our meetings, and she was on a walker. She couldn't walk without a brace on both arms, or on both arms, because both of her knees were shot. And she had gone, and what surprised me, she actually saw you. Were you up in Santa Rosa at the time? Yeah, it was you that she saw. So, she came in and she showed us her X-rays of her knees, and then she had several treatments with you and came back six or eight weeks later, and showed her X-rays. Number one, she was walking without her walker, number two, you could see on the X-rays that there was cartilage which hadn't been there.

Dave:

And I was just like, "This woman... And I've had three knee surgeries, so, I know a thing or two about cartilage and pain in knees. And I was just like, "This is a Miracle," with a capital M, that was what sparked my interest in ozone all those years ago. This had to be 20 years ago. So, thank you, A, for healing her, but you're the guy who made me know about this, which is why I met Dr. Gallagher, who's probably a name you know, he's the guy who taught me ozone. The dentist.

Robert:

And you can see videos of literal miracles on my YouTube channel. I have a YouTube channel, RobertRowenMD, all one word, go to that channel, I have about 500 patients up there, 400 patients, and you'll see things you couldn't believe. You have to see it to believe it.

Dave:

All right. That was one thing we didn't get into. But Prolozone and the ozone therapy for joints is a big thing because it's anti-inflammatory. And I've also had that done. You're a wealth of knowledge, and I think a lot of people don't recognize how impactful what you did in 1990. Vieira graduated from high school by the way. And in Alaska, the first state in the union, in order to get a protection for people who wanted to practice medicine the way that they saw worked, versus the way that they were being forced to by a trade union. So, congratulations and thanks for doing that because you really sparked off a movement there, that now has spread to a lot of states where doctors have the ability to actually treat patients the way they want.

Dave:

And every doctor I've ever met wants to do that. All of them chafe under a regime that forces them to not do what they think is medically necessary. So, thank you for that.

Robert:

Thank you. It's a human right, I saw it then. It's just a basic human right. My ability to treat you for what you need, is a human right for you.

Dave:

Dr. Rowen, thank you for your three decades, three and a half decades of work using these, I'll say, little known but well-researched and well-studied methodologies, and thanks for standing up and saying, "Hey, this can help us right now." Full alignment with you and your work has had a big impact on me. So, thank you.

Robert:

Thank you, Dave. Thanks for having me back again.

Dave:

Of course. Now, your website for people who want to get this, A, the full transcript and everything we talked about, all the links will be on daveasprey.com, but you can go directly to drrowendrsu.com. That's, drrowendrsu.com, and that's S-U, not S-U-E, and that'll get you most of the stuff. And the other one was, ozonewithoutborders.ngo, which has your video.

Robert:

That has the video of how to do home ozone. And my YouTube channel, if you're not a believer in ozone, if you just can't believe it, go to the YouTube channel and you'll see things that are hard to believe.

Dave:

It is real. And I get pitched all sorts of weird stuff that doesn't work, holographic whatever, and I reject the vast majority of things that I see. Ozone therapy has stood the test of time in my life and for the last 100 years, it's the real deal. Thanks again. And if you guys liked the show, I'd appreciate that you should save this episode. I really hope it stays online, and it probably will because this is a really big show. But, some of my other friends have not been so lucky. And you probably know what I'm talking about, shows I've been on out of London, that have really been targeted after they had some very controversial people on.

Dave:

It is our right as human beings to talk about stuff, and when large companies decide that they can selectively prevent us from talking about things that they don't like, we're in a bad situation. One of the things you can do for that is also think about what search engine you use. I have started using a search engine that now allows me to actually get the results I'm looking for. Because starting about six months ago, when I would use the normal search engine that we've all used since they took over the world, I stopped seeing results for all the stuff that I looked for, peptides, ozone therapy, all the things for anti-aging were disappeared, and all I could see was Medline and Mayo Clinic, I didn't even get PubMed results anymore.

Dave:

Now I use DuckDuckGo. And funny enough, they will show you everything I see, and vice versa. Because they actually rank the pages, instead of trying to figure out how they can manipulate what you think. So, DuckDuckGo is my new search engine. And I'm not saying any of the other search engines are good or bad, all I'm saying is test your results, and if you get what you're looking for on that one, which is what I do, that's when I tested it, that's what I'm using, simply because it works better. Shift your brain to what works best to give you what you want, and that works for your medicine, it works for your oxidative therapies, it works for your social environment, it works for everything you do, and even more so, the podcasts you listen to. Thank you for listening to this one, and if you like it, leave a review.