



The Varied Dietary Roads to Health

Dr. Eric Gordon, M.D. interviewing
Dr. Daniel Pompa



Dr. Eric Gordon:

Welcome, welcome to another edition of Mycotoxins and Chronic Illness. Today, it's my pleasure to be interviewing Dr. Daniel Pompa. And it's gonna be a very interesting time. Doctor Pompa is a really renowned researcher educator. He writes wonderful, informative books, and today we're gonna cover, I think a lot of his work. I'm especially interested in his work with fasting, which some of you might wonder, like how are we gonna see into this issue, but especially cellular detox, and really most importantly, what he has really focused his work on is understanding the basis of chronic illness, the multiplicity of issues that are involved with it. So let's start off with having Doctor Pompa, but tell us a little bit about what got you into this field and what drives you.

Dr. Daniel Pompa:

I can tell you I didn't choose it, it chose me. I was functioning as this healthy guy with a thriving practice and I was racing bikes at the time, arguably the best time of my life, the healthiest time of my life, and then it wasn't like many people, and it's like the bottom fell out, and I didn't know what was going on, but you know, it started simply, it started with just general fatigue, so I thought I was over-training, and backed up and realized it's getting worse, all of a sudden it was headaches and then weird anxiety, and then I couldn't get to sleep and then I'd wake up, you know, I couldn't fall back to sleep, then I might've got wet and all of a sudden I was intolerant to foods which never happened to me, then I was irritable then bizarre things. I, you know, they go down at all, it's just, you know, so many



people are familiar with the symptoms, brain fog, I mean, I couldn't, if I walked down the street, I was riding 300 miles a week at the time on my bike and here, if I took too long of a walk, I'd be exhausted. So what happened happened? Well, that took me on a journey to figure out what the heck happened and how to get my life back. And it was a journey, it was a journey, but everything I learned in the journey is now I'm blessed to teach doctors around the world, really what I call a multi therapeutic approach to this, what's breaking down, what's wrong, and this is what we do to fix it.

Dr. Eric Gordon:

Well, that is, I mean, you know, I find that, you know, the people who've made this journey are the ones who really just have insights that really help us dig our way out. So, you know, when you look back, you know, what do you think were the hidden sources that really got you ill in the first place and what are the ones that you think most people should pay attention to, because what I wanna emphasize for our listeners is that you don't, I think I've said this before in these series, but you don't wind up with a mycotoxin illness because you get exposed to mycotoxins, okay? We are exposed to mycotoxins every day. It is your immune system shifts, something has happened to your body, and that's what we're talking about today is what has shifted in there and how to change that back, so...

Dr. Daniel Pompa:

Yeah, you know, I talked about it as a perfect storm, and if you remember the movie, George Clooney, right? The '80s "The Perfect Storm," I guess it dates us, several other people are scratching their heads.

Dr. Eric Gordon:

Yeah.

Dr. Daniel Pompa:

Perfect one. It was a great movie actually, yeah.

Dr. Eric Gordon:

I can't believe it's that old.



Dr. Daniel Pompa:

Right? It was in the 80's, late 80's, I guess.

Dr. Eric Gordon:

Okay.

Dr. Daniel Pompa:

All right, anyways, we're digressing here a bit, but, so the movie did a good job of explaining that, you know, every hundred years or so, you get three, literally, storms that come together in me. But because of that, you have a catastrophic storm where thousands die, it just, you know, wrecks everything in its path. Well, that's what's happening, that's what happened to me. But when people lose their lives unexplainably, it's a perfect storm, three stressors come together; physical, chemical, emotional, two chemical, whatever combination really doesn't matter. But you get three stressors and bam, your weakest genes get triggered, trust me, they do, and all of a sudden, the bottom falls out.

And, you know, I do use myself as the example, and to answer your question, you know, I think there's three big ones, causative factors, stressors that are so nasty that people either miss them, or they glaze over them, they don't detox correctly, they don't maybe even address it correctly, even if they find it, so we'll discuss all three. And really at different times, I had to peel back these stressors. And once we do get to the cause, empty the stress bucket as I call it, then our body can heal. And you made a great point though, it's everyone wants it to be about the one thing, oh, the mold exposure, you know, this exposure, that exposure, you know, it's not so simple, it really isn't.

But you know, in my case, I had a silver filling drilled out. I probably still had maybe eight on my mouth, who knows, I don't remember exact number, but as it turned out, it took me four years to figure this out, but when I had it out three days later, is when the fatigue started, I just didn't know why I'd never correlated, I thought I was overtraining like you said, you know? But the point was is that was overflowed my stress bucket. Right now I could say, oh, you know, why doesn't that happen to everybody? You know, that was my catalyst, the straw



that broke the camel's back, whatever you want to say. You know, no doubt I had been accumulating mercury in my brain for years. I wore contact lenses in the '70s, '80s and early '90s. And the number one adult source was the saline solution, and it had thimerosal, we were putting right in our brain, so yes, the fillings, the saline solution, I didn't get flu shots or vaccinations, you know, as people are today, which that would have been another potential problem, and yes, there was a time where I was eating tons of fish, I did it all, so mercury was part of my storm, you know, and yes, it was the thing that started. But I was also living in an old home at the time, which I realized had mold, right?

But to your point, I could have lived there maybe another 10 years and been fine, until I had this neurotoxic insult. And I was riding 300 miles a week, stressing physically my body, there was my perfect storm. And working ungodly hours, you know? So the bottom fell out, ultimately, you know, what did I have to do? I had to address these things correctly. There's one more missing piece to it, right? So I said, mold, typically it's missed, it's definitely detoxed incorrectly.

Heavy metals, I would say most people go, I might have heavy metals, but the big pitfall here is it's typically detoxed incorrectly. They use weak binders or strong IV binders, which are real binders, but they're used incorrectly, and like I said, it can make people worse. So the third one is hidden infections. Later, I discovered I had some wisdom teeth out, an infection build up in my jaw, and it was just crushing my immune system. You know, again, part of the perfect storm, you know, and I think these three things people miss, or they don't handle correctly. So there's a long answer to a very simple question.

Dr. Eric Gordon:

That was actually an excellent answer because I think it just brings up the other point that I always want to emphasize to people is that medicine is set up to find A cause B. Like there to be linear, I always say it's the bullet idea, you know, we're really good at fixing that and we want everything to fit that model. And by that, if you're listening to this program, your illness doesn't fit that model, okay? It fits this multi hit, I mean, and you can often recover, partially recover from one of those hits along the way, but not fully. And that's what, you know, and



that's why it's going, so talk more about that, about how important it is to make sure that you've gone back and really cleaned up the body. I mean, I thought--

Dr. Daniel Pompa:

You know, you said a great thing there, right? So people go, okay, they moved out of the mouldy home, and, you know, look, you know, I'm better, but I'm not better or it's not lasting, and now I have this and they just keep going on, because number one, they probably didn't really get these accumulated biotoxins out of the brain, which is where it really matters. And then they didn't deal with the other problems, so I always say that that cavitation, which is an infection in the jaw is we might have had a tooth pulled, or maybe it's a root canal, that may not be why you got sick, but what I have found dealing with people just like myself in the last 20 years, is that unless you deal with that now, you won't get fully well, and you know, that becomes an issue.

Now you might've had metal building out, whether it be lead, mercury, who knows what building up in you for years, but now all of a sudden, if you don't deal with that load, that neurotoxic load, now you don't get fully well. So once you become sensitized to one neurotoxin, you become overly sensitized to all of them. So we have to deal with them correctly, and you know, what I'd become more popular for was my cellular detox even before I became popular for fasting, and we are gonna talk about fasting I promise. But the cellular detox, really, I mean, in a nutshell, real detox has to happen, it's a cell, and that's the mistake most people make, right?

They've done colon cleanses, they've done saunas, they've done the 10 day cleanse, I mean, poopers as I call them, right? You know, the 21 day cleanse they got somewhere, their doctor gave them, it makes them poop a lot, right? I'm not against any of those things, I'm really not. The point though, is none of those things got me well. The real problem was my cells were toxic, and I had to upregulate what the cell should be doing every day that was broken because of my neurotoxic stress bucket overflowing, you know, but the point is, so what I teach is how to upregulate, and I have what I call my five Rs is a roadmap of how you upregulate cell function to really detox at the cellular level. And if you can fix the cell, you will get well. First you have to find your sources.



Dr. Eric Gordon:

So, just a quick outline of your five Rs, we'll dance back 'cause I have a lot more questions about your detox, but just a quick outline for the audience about the five Rs.

Dr. Daniel Pompa:

Yeah, I mean, R one is remove the source, right? You know, so I mean, meaning if you're in a moldy home, get out, or at least maybe do it correctly, you know. So you wanna remove the sources. Our number two is regenerating the cell membranes, you have an outer membrane to your cell, you have inner membranes. And those membranes, as it turns out are the most vital function of the cell, I mean, nothing passes in the cell or out without a good functioning membrane, it's called cellular fluidity and you can't detox a cell without approaching these membranes correctly, you can't have normal cell energy, you can't turn bad genes off unless you approach the cell membranes and fix them. It is critical, I teach classes on it, so don't ask the question. What's the one thing I can do, right? But I mean, just in a nutshell now, I mean, it's really is about specific fats and certain proteins and peptides, but the point is you have to address.

Okay, R three, to get through it is you have to deal with the cell energy problem, right? So, you know, it's vital. Again, if we talk about detoxing the cell, how possibly can we detox a cell if we don't have enough cell gasoline at 18, and mitochondria is disrupted, right? So, we absolutely need to consider every way, you know, that we need to restore cellular energy and that's hard for you, and reduce the cellular inflammation. And a lot of my fasting strategies and dietary strategies is really how I address R three and R four. And it's very, very important to downregulate the inflammation. And lastly is R five is reestablishing methylation. Methylation parallels glutathione, and it's, you know, when the cell becomes more and more toxic, methylation tanks and now bad genes get turned on, you can't detox normally without it. So anyways, that's just kind of a roadmap of what--

Dr. Eric Gordon:

No, it's a beautiful roadmap, and I just want it to, you know, it fits, you know, like it's interesting how the pathway goes, 'cause like, you know, in one of the things that I'm very



interested in is the cell danger response, which we talk about a lot, and that is that it's the mitochondria sensing the danger that turns down their energy production, it increases inflammation, you know, it's like a reaction, and so the way you're describing, and also tightens up the cell membranes and makes them a little more, less fluid. And so you're just doing a beautiful job of going, okay, these are the areas that need to be addressed, I mean, I just love the way you laid that out. So when you deal with like the cellular inflammation, where are you starting, any particular areas?

Dr. Daniel Pompa:

Yeah, I mean, I think we all start from the same area because look, it's not like we can control right away the toxins, right? We can't control, we can't do certain things right away, so therefore let's control what we can control. And that's one of the big drivers of cellular inflammation and that's giant, right? So getting bad oils that most people have in their diet that they don't think about, I mean, everyone's worried about gluten, but they're not so worried about vegetable oil, canola oil and these rancid oils that make their way right into your membrane and cause dysfunction for about three months. So we have to fix that, okay?

We have to change your oil, a good oil change, but you know, and I think, you know, there's multiple different diets, and one of my things that I talk about in my book is diet variation. I'm a believer in purposely changing diets, so I see where they are, and oftentimes it's just like, hey, let's just remove grains and sugar right now, just to, you know, decrease the inflammation.

And then, you know, maybe we just clean up their diet even more basic, but regardless of that, the diet is an evolution. I don't hang my hat in paleo, vegan, vegetarian, keto, I talk about all those diets, and I utilize all those diets, I even utilize carnivore diet. But it's the variation, changing the diet, that actually traumatic stress on the body, which creates a hormone optimization, creates a more diverse gut, so the thing that people are missing is the change in the diet happens to be the magic, not the diet, everyone's arguing about which diet. When we look at ancient cultures, they changed diet, they were forced to



change diet. The more I researched it, the more I realized the diet changes the magic, not the diet.

Dr. Eric Gordon:

Great, that's beautiful, that is just really, I mean, that is my experience, because I have patients who've done every guy in the book and as they make those, you know, once they clean it up, I mean, you gotta do like your first step, you gotta clean it up. Once you do that, I've often wondered why we could see that, like you know, this change, know a month, two months, there's like, wow, this magic's happening, yeah. And then they'll go to another one, and you know, it does mimic--

Dr. Daniel Pompa:

And you're right, you know, why these diet people pick on each other, right? It's because, you know, if you stay on any diet long, it will always cause problems, right? So your vegan, vegetarian diet long, it's gonna cause you problems one way or the other. If you're on a keto diet long, it creates different problems, it just does, right? It's like, you know, I mean, I can pick on every diet long-term but remember when you first change that diet, that's your diet, and by the way, that's people stay on it because it helps them.

Dr. Eric Gordon:

Yeah, they remember.

Dr. Daniel Pompa:

So that's why they're like, oh, this is my diet because it helped them, and they don't realize now a year later they have new symptoms because of the diet that helped them when they changed it originally.

Dr. Eric Gordon:

Though, right there, I think I just wanna emphasize, I mean, I always hope that people hear the important information 'cause I think that is golden, you know, 'cause, you know, about



an old, I remember, you know, back when macrobiotic diets, we can pick these, because and I said, they were great for three months, but you got sick if you kept on them.

Dr. Daniel Pompa:

It's true.

Dr. Eric Gordon:

You know, but you're kind of like bringing me to that next level of realization that, aha! It's the change up, it's allowing, so tell me more, so, I mean, I don't like, cause its effect on the microbiome is it's, you know, just the stimulus, stimulation,

Dr. Daniel Pompa:

It's all of it, but we'll start with what you said because it's true, right? The microbiome, you know, here we have a new understanding of the microbiome and everyone's talking about it, right? But what are people doing to really change it? They're giving people probiotics, right? You know, there's some benefits, right? But if it were just that easy, we wouldn't still be talking about it, right? So honestly, it's very limited, with all the new microbiome testing, really, that didn't do much either, okay, great, what do we do with that now? We thought we were gonna be able to tell people what diet to eat or not--

Dr. Eric Gordon:

Yeah a little too, sometimes too much information, yeah.

Dr. Daniel Pompa:

Yeah, but you know what? One thing we did gain from it was healthier people seem to have all this great diversity, unhealthy people seem not to, right? Well, how do we get more diversity, that if that matters for a better immune system and better brain function, well, stress the microbiome, that's what you do. So, you know, hormesis means that if we add a stress to this vitalistic human, you know, just the right amount of stress, man, we can really do some amazing, you know, benefit to that, or not enough stress won't change, too much stress, and you end up with a new problem, right? Exercise is a great example, if you don't



exercise enough or not at all, no benefit. Perfect amount, you feel it you're stronger, you're getting better, but then you don't change anything, and then all of a sudden it's not working anymore, or you exercise too much and you have a stress reaction that's not going to either. Okay, so if we change diet, what we know is that it can shift and stress the microbiome, it has to change, think about it. All of a sudden, now you're eating vegetables and you haven't eaten vegetables in a long time, maybe that's a bad example, how about this? Now, all of a sudden, you're eating just all this meat and fat, right? And now, I'm not used to that, so the microbiome has to upregulate different bacteria to create different enzymes, to create different, you know, hormones, et cetera, based on the dietary change.

Dr. Eric Gordon:

Yeah.

Dr. Daniel Pompa:

Every time you're switching your diet, you're forcing, stressing the bacteria, the microbiome to adapt in that--

Dr. Eric Gordon:

You're exercising your microbiome, I love it.

Dr. Daniel Pompa:

Absolutely, right, so like exercise, if you do the same exercise again and again and again, I promise you not only are you not improving, you're actually diminishing. So you do it, you hire a trainer and they go, oh, we're gonna do this today, next week, we're doing this, next week we'll do high reps, and you're going, oh my gosh, he keeps changing it to keep the stress going, so you keep adapting and becoming stronger, no different with the microbiome.

So I have strategies called feast famine cycling, where weekly we'll fast a day, we'll feast, and we'll feast and we'll fast, and we have monthly strategies and I have seasonal strategies, you know, of how even with fasting, throw in fast and throw in feast, and we can add stress. Or



change your diet, you know, different ways seasonally as we were, you know, kind of references.

Dr. Eric Gordon:

The general biome may have to change.

Dr. Daniel Pompa:

But excuse me, I got so excited about the topic, I choked myself, but some of the monthly changes are hormonally related, and I'll give you an example. This is something because I coached doctors, we discovered women before their cycle crave carbohydrates, maybe, just maybe, the innate intelligence is telling us something. But see women would take it, that's why I break my diet, that's why I reached for this, the chocolate, whatever it is. Maybe the body knows something, so we started purposely bringing in high carbs, healthy carbs, and very high amounts right before the cycle.

And lo and behold, magic happen, and then during the cycle, or maybe after, we either do some type of partial fast or some restriction, but what we've emulated is a feast and a famine. And lo and behold, because we now know that you need good carbohydrates to pump up insulin and insulin is needed for many hormone conversions like estrogen, like thyroid hormone, thyroid hormone go from T4 stored to an active form of T3, you need insulin. So therefore, so many people are not understanding that and they're low carb too long, you need variation. Feast famine is a way to do it, so hormone offers there as well.

Dr. Eric Gordon:

Well, you know, I mean, I just love that, you know, it's living with life, you know, I mean, again, where too many of our diet choices and too many of our, are still based like I said, the problem with medicine is we want A causes B, and we wanna do the same thing with the diet, realizing this is process, and we don't always understand every detail, but when we look, what you describing is what people do, I mean, it's always a good idea to look at what happens if you don't have the supermarket, you know, if you have to depend on nature to



survive, how would you be eating? And just the beauty of your idea is that it fits right in with that model of like, model eating is something that doesn't happen.

Dr. Daniel Pompa:

You know, it's true, you know, and our bodies are genetically designed to fast. You know, fasting is a stress, we're kind of talking now, now that we kind of have everyone understanding that stress can be good or not good, right? If we can cleverly use stress as a form of exercise and we go, oh, we got stronger. Well, if fasting is a stress, and it is, then can we use that to obviously fix the microbiome, fix the gut, or just harness innate intelligence during a fast and watch the magic happen, because the body heals during times of fasting, animals do it instinctively. If they're injured or sick, they don't eat, humans... We need to be taught sometimes.

Dr. Eric Gordon:

Well, I think most of us get the idea not eat when we're acutely ill, I mean that, that's true, like we call sickness behaviors, and it's kind of broad, but once you're chronically ill, it's hard to... Yeah, you adapt.

Dr. Daniel Pompa:

Absolutely, and you know, and again, when you're chronically ill, you remember the premise of hormesis, right? Now, if there's no stress, not good, the right amount of stress, too much stress, not good, so fasting can be too much, so you have to work fasting this new stress into what your body can adapt to. And remember if your body doesn't adapt, a good stress becomes bad, right? So we don't want that, but, you know, we're clever on how we use fasting strategies and, you know, five day fast is something that I taught back in the 90s, you know?

So I was healing to fasting before, you know, it was cool being some natural hygiene society guys that, you know, all they ate was vegetables, and I'm looking, they look catabolic and I'm like, I know it's not fasting, it must be their diet, you know, because too long and one diet. But we did resonate around fasting, and you know, when you look at every religion on the



planet, they disagree on everything except one thing, fasting, right? So there must be something here, but you know, I believe it does harness the innate intelligence. There's such an amazing intelligence that's just put it on us, that heals, but you know, we just have to harness it. Yes, we have to remove the interference, that was the first part of the conversation, but harnessing it is another, fasting can do that. When you look at the benefits of a fast, and when I look, you could fast for a day and there's some benefits, you can fast for 12 hours and there's some benefits, we call that daily intermittent fasting. But what's missing in the conversation today is the longer fast. And years ago, I was doing five day fast, and how do they end up at five days?

Because I realized it took people about three days before they felt good. You know, the first three days were hell because they were typically, you know, their cells were inflamed, not functioning, you know, they couldn't survive on fat, right? They were like, oh my God, I'm gonna die, I don't have glucose, and then day four would come and they'd go, oh, I actually feel really good and they're out in their yard, right? So I'd go, okay, if four's a good day, let's go one more day to five, that's honestly how I ended up at a five day fast. Now there's science around this, that five day fast there's magic, because by day four, you hit something called max autophagy, and I don't know how much you've spoken about this, but--

Dr. Eric Gordon:

No we haven't, it'd be good to talk a little bit about.

Dr. Daniel Pompa:

So autophagy, it is a natural way to detox. Autophagy means that your body's so smart and wants to survive, it would never eat your good cells or tissue, no, it's smarter than that, innate intelligence is smart. It's needs energy to survive, so it goes after your bad cells. They're called senescent cells, zombie cells, they live too long and they cause mischief, they drive inflammation, they recruit other cells to do nothing as well, they're like government workers, right? You're paying of energy and they're doing nothing, they're sitting around causing trouble. So that's what they had, and the older we get, unfortunately, the more of these we get, right? But when you're unhealthy, you have a whole lot. So how do we clean



them up autophagy? And the 2016 Nobel Prize was won by a Japanese gentleman who really brought this to light in a state of fast, your body eats the bad cells, the rubbish, the bad DNA for energy, and it takes these senescent old cells out. The point is though, is that, that happens about day four, a very maximum level. In my book, I talk about how to know when you're max autophagy, but something else happens magical day five, you don't just get rid of that bad cell, you know, your body's too smart for that. It stimulates a stem cell to replace it, and when you replace that cell, it's not now the zombie senescent cell, it's a vibrant young cell, is ready to work and wants to work and you know, if it's an immune cell it's ready to attack, unlike the immune senescent cell that doesn't wanna do anything. So now you're replacing bad cells with new cells, that max stem cell rise happens on day five.

Dr. Eric Gordon:

Wow.

Dr. Daniel Pompa:

So that's how we ended up five days. Now, I do a lot of water fasting and I have for many years, I teach a lot of partial fasting, which I have for years, which is, you know, maybe you eat like five, 600 calories, get protein under 20 grams, that's in definition of a partial fast. So you can eat a little bit and you still get some autophagy or you can just do water, which is still my favorite type of fast, because once I'm not eating, I don't wanna eat. But when I'm eating a little bit, I tend to wanna keep eating.

Dr. Eric Gordon:

Okay, that is interesting. And just one thing I wanna mention is that many patients feel that fasting would be too much, and what I have found is that occasionally yes, because you start to dumb and if you really can't detox, so we're gonna talk more about that, but don't be sure it doesn't hurt to try a little bit and see how you do, 'cause I've had a lot, I've been surprised by how many people... It just lets them realize, even though it doesn't cure, if you just do a little bit, but it lets you know, how much, what you've been... That your microbiome and your digestion, and your liver is contributing to how bad you feel.



Dr. Daniel Pompa:

You made a really good point though. One fast doesn't cure you, one fast you might go, oh my gosh, I mean, you know, I just was on a call with someone today, one fast and took their psoriasis away, are they cured? No, they still have some other things, right? Okay, it just happened to be, you know, that thing that helped them with that particular fast, each fast, you have a different level of healing. In my book, I talk about the importance of multiple fast, but you also made another good point. You don't just run a marathon, right? Who does that? You might finish, but you don't have a lot of bruises along the way, and your results will be great. So in my book, I talk about there's basically each chapter lead you to what you do before the fast, right? And it's really about leading your--

Dr. Eric Gordon:

Preparation.

Dr. Daniel Pompa:

Preparation. You know, and then there's options for people, most sick and challenged people that are listening, you start with just a partial fast and maybe it's just, you know, a day or two, and that's that where we're eating just less for a period of time, and we build on it. So it is different for everybody, but there's things you can do, a lot of my feast-famine cycling, where we start to just narrow down your eating window in a day, and I call it mitochondrial fitness. So in other words, you think of your mitochondria, that's where you make energy. When you're sick, they're not fit at all.

Well, how do we get them more fit? We stress them. Remember the stress for me is different than stress for you, So in my book, I teach how to add a little bit of stress to the mitochondria, to make them stronger, or it's called mitophagy where you get rid of the bad ones, bad cells don't adapt, and then the body will get rid of them. So we stress the mitochondria with feast famine, so we'll might go periods like half a day without food, see how you do, right? And then a little less, then a little less, and maybe a whole day without food. We're stressing the mitochondria a little bit at a time, mitochondrial fitness. And



seeing if we do enough of this feast-famine cycling, by the time we get to the fast, no problem, even for sick people.

Dr. Eric Gordon:

But that is so important because I said, you know, one of the things that really turns people off when they have a significant toxin load, is if they lose weight with a fast too quickly, and that's what I you to talk about, they will often be really uncomfortable, but what are the things... I just love the way you're nailing, you know, how important the mitochondria are at modulating what's going on in the body, you know, and just and remind people that stress, I'm just the basic thing, everybody loves herbs, well, most of the antioxidant herbs are pro-oxidants stressors and it's your body's response, so over and over again--

Dr. Daniel Pompa:

That's hormesis.

Dr. Eric Gordon:

Yeah, that's hormesis, that is it. And that's just an important--

Dr. Daniel Pompa:

Work because they're literally a little toxin and actually create a little stress.

Dr. Eric Gordon:

And so just to remind people, 'cause when people hear stress, stress, stress, oh, what you're talking about is really how to take care of yourself the best way, yeah.

Dr. Daniel Pompa:

I mean, you brought a good point of though, like in my book, I have something called the fasting trio. Where did this come from? It's three things that I have very sick people take when they fast, it's because I had a Facebook it's called "Fasting For a Purpose." And there's a reason why it was called Fasting For a Purpose because of my son and my wife came up with the name because we fasted him out of a jam, you know, the Bible talks about you



don't just pray, you fast and pray, when you're in some real deep, you know what. So prayer alone won't work with this one, we need to fast and pray, and that's where that page came from. Well, the bottom line is that in that group, you know, so many people are doing big group fast, you learn a lot. And when people, you know, dump a lot of toxins, we were like, oh, you know, let's try this, 'cause we have a lot of people to try with it, and then, you know, wow, that worked right. So it's, there's a protocol bind that I'd created for my detox, but by taking bind, it stays in the gut.

When you're fasting, a lot of the toxins get brought into the liver and bind to bile, and then that bile, it gets dumped in the gut and you just keep auto intoxicating, and, oh my gosh, I feel horrible, so bind acts as a catcher's mitt to pull it all the way out of the body and you don't auto intoxicate. Then another one called fastonic, it's a molecular hydrogen, which reduces a lot of the hydroxy radicals that get released for toxic people when they fast, and another product is cyto detox, which systemically just cleans out for people, but putting the three together when people are fasting can really mitigate a lot of that toxic.

Dr. Eric Gordon:

That's excellent, that's what I think people should remember and really try these because it sets where the do you get bitten by excessive zeal to get on that fast, and then you feel sick, and I really liked the bind because so many people don't understand that your body tries to hold onto bile because it's a very important resource, and so you reabsorb a lot of it, and if it's the amount of toxins that we are dealing with today is so much greater than the system was designed for, you know, that I think we get into this trouble, and that's why--

Dr. Daniel Pompa:

Absolutely.

Dr. Eric Gordon:

You know, using these things that will bind the toxins that are on the bile and not let the bile will be absorbed, is really kind of freshening the system, really clean you out. Glad that you've got something that helps that, 'cause that's a big problem. So when you're working



through, you know, you talk about cellular heal, just, I wanna hear your stories, each one of them is like lightening things up for me, so let me hear your story around cellular healing.

Dr. Daniel Pompa:

Well you know, when you look at why people get sick, I'm gonna draw something here, hopefully my pen can handle it. All right, so I'm gonna draw a visual for you because I think a visual is worth learning and it answers your question, but that my friend, is a three legged stool, not very pretty, is it? Okay, but think about why people are getting sick, and then you think about how we can get people well. Well, we know that certain genes are getting triggered, so in this leg, I'm gonna put DNA. Remember I said when I hit my perfect storm of stressors, it triggered a lot of genes. You may have got a thyroid condition, that gene was triggered, right? The old dogma was, oh, you just got it 'cause your parents had it or one of them. Well, not so simple, right?

These genes are triggered and turned on. But when we really understand epigenetics, number one, what's missing is we can turn these genes off, and there's strategies do that, it's magic. However, if you still have the stress there that turned them on, you're not turning them off, and excuse me, this leg, and we already discussed it. This is these three storms, right? The perfect storm of stress, okay? That is the stressors that triggers the gene. And we have to get rid of those, right? And that's where the detox comes in at the cellular level, and that's where getting out of your stressful situations all that's important. The last leg we talked about, I'll just write gut there 'cause it's a shorter word than microbiome.

But we know that the microbiome plays a big role today, especially with toxic people. So toxins and stress affect the microbiome, the microbiome affects the DNA. So you see every one of these legs are tied into one another, right? The stressor, the gene getting triggered, the microbiomes effect on our DNA and our genes, and then even the toxic stress on our microbiome. And a lot of people were trying to fix the gut today, but how do you fix a gut? If you have infection in your mouth flowing every day, it's impossible, right? Or mercury fillings, you know, that are dropping mercury in your gut every day, that's like trying to replace the fish in the river again and again and again, and the microbiology is in, you know,



20 miles upstream, there's a factory dumping mercury and good luck, right? It's you have to go up. So, okay, so this is how people are getting sick, right? Meaning that the three legged stool has an analogy, if one leg is not there, it doesn't hold up. So if one of these things isn't addressed, it doesn't hold up. So a lot of my cellular work is about turning off genes. And we talked about the five R's, so I kind of put that here, the detox, we're using real curators of binders correctly upregulating cell function, so it's a very different method of detox.

And then all of these ancient healing strategies, that diet variation, the feast famine, the fasting, that's really how we're fixing the gut. All of that is what I call a multi therapeutic approach, we're putting it together with all the strategies, if one of them is missing, you're not helping people today. So everyone wants it to be about fix the gut you get well, not so simple.

Dr. Eric Gordon:

No, I think you can see, I mean, this is, you know, what's happened over the last 40 years, is this the simple fixes did work that, I mean, most people, 'cause when I started doing this work, I mean, yeah, actually even in the mid eighties, it was easy in the sense that, you know, you cleaned up somebody's diet and most of them got better, you gave them a little fibroid and it just like put things back, and each decade we're seeing sicker and harder to help people, you know, and younger people, I mean, that's, what's really and then talking about what's really inspires me these days is that we see so many people who are in their teenage years and twenties, they have illnesses that we just never expect to see in young people, I mean, forgetting about autism which is above the roof.

Dr. Daniel Pompa:

Yeah, you're right, I mean, my kids are from 25 to 17 is my youngest, and you know, they say dad, all of our friends are on every one of them are on medications.

Dr. Eric Gordon:

Yes.



Dr. Daniel Pompa:

I mean, they have auto-immune, they have thyroid pumps, that didn't... When I was a kid, there was nobody that was taking medications in my classrooms, you know, every once in a while you have like someone that was on an inhaler and it was like, they were embarrassed and hid it because, you know, no one else was doing such things, right? You know, but today you're right, I mean, this is an epidemic, it's a pandemic, you know?

And now I wanna get your things shut down here. But think about the jab that people are getting today, what's this going to do? We're bringing in a micro RNA, forcing the DNA to produce a spiked protein, which we don't know a lot about, and then our body's producing antibodies to that, which we don't even know if those antibodies are gonna attack other tissue, or in past studies they did, you know, my gosh, where are we going to be? Where are we going to be?

Dr. Eric Gordon:

It's a difficult situation, you know, I mean, it really is. So, when we jump with both feet into a solution that, you know, I said I've always found vaccines to be difficult because I've seen where they worked and I've seen where they hurt, and I think it's the numbers of vaccine to is... My issue with vaccines is the, and it's often it's the insult, it's 'cause we're slapping the immune system, you know, we're not introducing a bug, but because we don't wanna get people sick, we don't give them the whole bug.

So we give them just a little piece, but then we have to give other things to tell the immune system to take notice, this is a big deal, 'cause without a big yell, your immune system isn't gonna react to everything 'cause we don't want it to, when get in trouble. And so it's, I mean, my big frustration, we don't want to go too much into COVID, but my big frustration is that we have so many therapies that can, if not prevent ameliorate, people don't have to be dying, I mean, I'm sure some people are gonna die, you can't save everybody but could do a lot, and we just have it, I mean, my website is shut down right in the beginning, because we wrote about, you know, using--



Dr. Daniel Pompa:

I stopped doing social media just because I was like, I'm tired of it, I'm, you know, shying out of, I can't speak it, I'm done, you know, so...

Dr. Eric Gordon:

Well, no, but it's difficult because I said, we don't like to go too deep into this, but my problem is both sides 'cause I'm in the middle, I'm friends with people who are, you know, to the point that it's a hoax and friends with people who like, you know, think the best thing that we've ever done is the vaccine, and, you know, there is reality different levels to both, I mean, 'cause it's just a--

Dr. Daniel Pompa:

I mean, it's real, I mean whether it's created, whether they let it go put all that aside and go--

Dr. Eric Gordon:

It's a problem.

Dr. Daniel Pompa:

Yeah, because of my philosophy, in me and my family we tried to get it right out of the gate, you know, built natural immunity and we're not in this, Yeah, I know a guy, There's some people that are in a group that, you know, yeah, you should avoid it, right? But we were the opposite, we wanted to get exposed, took me three different attempts by the way to get it, but I got it, I got natural immunity, you know, that was my approach from the beginning. My philosophy is, you know, there's nothing better than my immune system, nothing, and I'll do things to better, you know, what God has already done.

Dr. Eric Gordon:

Yeah, well, I mean, I think balance in our approach and you know, and I have seen it, I have that many patients, you know, that say, I think the vaccine is the better way because of their... And I have other patients who are so sick that the vaccine, because it may act, there



are issues with how it then stimulates your immune system, it's over-regulated for some people, and that's why we're seeing the reactions that we're seeing.

Dr. Daniel Pompa:

Everyone is, you know, if you choose to take it, you're in a phase three trial, I mean, so, nobody including me can tell you that it's safe, not safe for you because the truth is nobody knows, and that's the truth, and your doctor should tell you that.

Dr. Eric Gordon:

Oh yeah, I mean, that's totally true, I mean the first year out normally that would be the first year would be the phase two trials. Anyway, but before we go so we haven't burnt ourselves to that on that third rail, those people come from New York, that was the third rail was on the subway, that was the power, so you didn't want to touch that one.

Dr. Daniel Pompa:

Yeah, right, I got it, the third rail.

Dr. Eric Gordon:

'Cause it is, I mean-- I mean we're in this middle and I said I wish we could have a really good conversation about what we can do and just remind people that there are therapies that seem to be working well if people do get ill. Now, but probably the most important thing is to have a well balanced immune system, and that brings us back to what you--

Dr. Daniel Pompa:

Not in my presence.

Dr. Eric Gordon:

Yeah, no, exactly--



Dr. Daniel Pompa:

You know, on that note, you know, one of the early things I did a Facebook live on, it was, I forget who wrote the article, I'll probably think of it in a moment, but he said, "Look, if you look at the people, even young people who are getting sick from COVID, they all have one thing really in common, whether you're 80 or whether you're 35, they have a lot of immuno senescence cells." Now, what is that? You kind of have a little background here folks, but you know, what it means is you have immune cells that are living too long, remember the zombies that don't wanna work, yeah, that's true. So if you're 35 and you have for different reasons have too many of these immuno senescence cells, then yes, COVID could really knock you on your butt, right?

Okay, so then the question begs then, what can we do? You know, what can we do to better our immune systems, because we know that if we can decrease these immuno senescence cells, according to the scientists that wrote the article, man, we are going to basically be able to protect ourselves from these future ones that are coming still. Okay, well, fasting it's cheap, I got great news for you, it's free, right? Because I already went through the science, that's the easiest, cheapest way to get rid of senescent cells is fasting. You know, it's interesting because when I was into fasting in the '90s, the big criticism of fasting was it lowers your immune system, and it's like...

We know where they came up with that? Is because when you're in a fasted state, you have this massive drop in white blood cells. Here's what we didn't know that, we didn't know about autophagy, we realized that the intelligence the body was wiping out immuno senescence cells, you know, the bad immune cells, and that's why it dropped, you know, and then, you know, give it a month, you know, even two weeks and you have this beautiful back rise with fresh aggressive fighters again, you get the stem cell stimulation creating new immuno cells.

Dr. Eric Gordon:

This fits in with new book research over the last years, chronic fatigue in MS, you know, I mean, we're seeing the same thing where, you know, we don't have cause and effect, but we



do see that there there are increased levels of senescent immune cells, especially CD8 cells against Epstein-Barr virus. So it's not that the virus is causing disease, but there's a process is going on in your immune system where it's not because of these excess senescent cells that aren't functioning well, you're screwing up the communications, I mean, cause if your body is one big super communication, and when you have cells, especially immune cells, that aren't listening to the programming, to the back and forth, you're not gonna function well.

And I think, again, we have to keep remembering that we are a very complex communication system, and if you got old deaf cells, they're not like me, you can't hear, you're not gonna do as well in an emergency, you know, you're gonna take the wrong steps, and so you're right, I mean, fasting is funny because so many times I bumped into fasting and I have many patients who've gone to fasting clinics and I've done well, but what I'm hearing from you and what really is striking is that the ones who really were chronically ill, they never stayed well, because again, they did it as a marathon, not as a new way of retraining their systems, yeah, and really rebuilding, it was just, okay, so they got a bump, but not a real--

Dr. Daniel Pompa:

We have to emulate ancient cultures, you know, our bodies are set up to survive, you know, and if we utilize fasting as a tool, and you know, you don't use the tool the same all the time, and you can use the tool differently, and there's even within the fasting tool set there's different tools, right? There's daily intermittent fasting, there's longer fasting, there's partial fasting, you know, I mean there's many different types of fast, and you utilize... My advice to everyone is educate yourself in this area, it's a very, very powerful tool, remember it's a tool, remember to stress, if you overstress that it's not good, but if you don't stress, it's not good, you need the stress, our bodies are designed for it.

Dr. Eric Gordon:

Well, tell me more about where people, I mean, cause I say you've really excited me, I'm already planning because I love to eat. Okay, I'm one of those people like, when you go anywhere is where are we having lunch? Is my first question. But I have fasted here or there



and I do intermittent fasting all the time, I usually try to go at least 12 to 16 hours without eating, but, at least most of the days to be. But still I haven't been quite ready to like commit to a five day fast, so if I wanted to learn more about that and really prepare myself, what are some of the things that you have, some of the resources that you have for folks.

Dr. Daniel Pompa:

You can go to my book, it's not even on Amazon yet, I just kind of released it to my followers 'cause right now it needs to go through one more edit. You can get it, if you go to beyondfastingbook.com. So "Beyond Fasting" that's the name of the book, "Beyond Fasting." So beyondfastingbook.com, you can grab a book there.

Dr. Eric Gordon:

Okay, good, we'll make sure it's in our gift section, you know, 'cause I think that would be a real good beginning place. And so you can outline... The thing I'm really interested in is how to make sure that I can begin to think about the diet choices in a way... I mean, I just liked the way you built together fasting and changing diets, but it still sounds like there's a lot of moving parts that may be easy to you 'cause you've been doing it a long time--

Dr. Daniel Pompa:

Chapter three and four of the diet variation strategies weekly monthly, you know, that's all in there. You know, chapter one, I talk about, you know, getting ourselves to become more fat adapting, because if you go into a fast fat adapt you're gonna hit a top of you much sooner. So, but it takes you step by step each chapter, by chapter six, you're ready, you know, so...

Dr. Eric Gordon:

I'm ready for the vision quest, okay. I mean, that's so interesting 'cause I mean, that is the essence of the vision quest is actually is you know, that four days without eating.

Dr. Daniel Pompa:

Yeah, right, you know, and again, it becomes so easy, but you need a little mitochondrial fitness first, it walks you through.



Dr. Eric Gordon:

Yeah, well, I mean that is... So any tips just before we wrap up, any tips to, you know, as far as, I guess, if someone has never fasted and they just wanted to like, you know, dip their toe into this, you know, where would they start, what should they think about for that first foray?

Dr. Daniel Pompa:

You know, look, I mean, I think, you know, getting yourself used to, you know, in the state of fasting is a very important thing, meaning what you already said, you did, skip a meal, right? See how you do right? I mean, you know, that's a great place to start, skip breakfast, skip dinner, what do you choose, right? Whatever it is right through the night to be, you're gonna adjust automatically fast eight or 10 hours because you're sleeping, right? And then skip a meal and hey, you just did your first fast.

You know, and then go maybe a couple of days with just eating 500 calories. Now again, you can eat 500 calories, but if you ate a lot of the calories from protein, you're gonna shut down autophagy. So if you're a bigger person, you might be able to do 20, 25 grams a day, grams of protein and not shut down autophagy, but if you're smaller, it's probably more like 15 grams of protein. So that would be a fast feast, so do that a couple of days, you know, dip your toe in the water, see how you know... But that's a great place to start, get the book and it'll teach you more.

Dr. Eric Gordon:

Okay, you've mentioned you teach doctors, we have a lot of doctors listen because we have quite a very crew, do you have courses for doctors.

Dr. Daniel Pompa:

Yeah, Health Centers of the Future. So you go to HCF, which stands for Health Centers of the Future, hcfevents.com. You can get information, I do seminars, I'm doing another one in November, I just did one a month ago.



Dr. Eric Gordon:

Oh, great, great, great, 'cause it sounds like you've put together a very exciting piece of the puzzle for chronic illness because, you know, we all live agreed that the gut is the center, I've never been happy with our dance around it, I've always felt kind of lacked something, and I think you put a really nice light on it.

Dr. Daniel Pompa:

The premise of hormesis, right? That's what makes the gut.

Dr. Eric Gordon:

That really is, well, so I wanna thank you very much, it's really been a pleasure.

Dr. Daniel Pompa:

And now, finish rambling, thank you.

Dr. Eric Gordon:

Great to have you.