

The Role of Propaganda on Mass Vaccine Rollouts and COVID-19 Perception:

A Special Interview With Ivor Cummins

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome, everyone. Dr. Mercola helping you take control of your health with interviewing another expert in the challenge of what has happened in the recent history with the introduction of the COVID-19/SARS-CoV-2 virus, and the SARS-CoV-2 jab. So we have with us today to dialogue on this and give us an update is Ivor Cummins, who doesn't have any formal health training, but he's certainly been well-trained in engineering and the scientific method, and a mind that can analyze very deeply, and rationally, and logically, and come to some common sense conclusions, which unfortunately, are not so common nowadays. So we need people like Ivor to help remind us of what the obvious is and receive the data and how to interpret it. So welcome and thank you for joining us today, Ivor.

Ivor Cummins:

Thanks very much, Dr. Mercola. It's great to be here. And it's great to just keep getting the message out on the facts, and the logic, and the science, and help people be informed.

Dr. Joseph Mercola:

Yes, absolutely. So what's your take on the rollercoaster ride we're riding?

Ivor Cummins:

How do you summarize? Well briefly, I've been eight or nine years in metabolic health research et cetera, and I have a biochemical engineering degree, and I've spent 30 years almost in leading problem-solving teams in corporate. So I had a lot of experience to do the analysis. But in March, my wife got worried about this SARS-CoV-2 thing. And I did a quick check and I found the Diamond Princess data. So I put a ceiling on the infection fatality rate, maybe around 0.2%, massively stacked towards people who were elderly and infirm, sadly.

Ivor Cummins:

And I told her no, that this has nothing to do with us effectively. It's going to be the equivalent of a bad flu, or severe flu season. And then I watched the lockdowns come in, which came straight from China. I watched as the seasonal problem in Europe collapsed as expected in April. And they didn't want to take the lockdowns out. And then they wanted more restrictions. And then they starting whooping about a vaccine. And I thought, "Hold on, this is a bad flu equivalent, essentially."

Dr. Joseph Mercola:

Well they've got a vaccine for that.

Ivor Cummins:

Yeah. And I kind of knew as well from the time from previous research, I don't really go into vaccines much. But I had a couple of papers from JAMA (Journal of the American Medical Association) in early 2000s, and it's quite clear the flu vaccine is very ineffective. And that's had 30 years or so of development. So I thought, "What are they thinking?" That in a year maybe, they can have a highly

effective one for this. And I just found it astonishing. And they then brought in masks in Northern Europe in the summer, and then I knew we're in serious trouble.

Ivor Cummins:

Because in Northern Europe, there was nothing going on. The hospitals were empty. The ICUs were empty. We were in the seasonal kind of trough. And they brought in mandatory masks. And everyone started wearing them. And they said, "Uh-oh, there's something huge going on here." It's very, very nasty. And people are falling for it. And then I stayed on it after that.

Dr. Joseph Mercola:

Yeah, that's crazy. So what's your take on the newest things? Well, what's your take on the vaccine? Why don't we go there and start with it, because it seems to me that many people believe that the sole purpose for introducing or releasing this virus, whether it's accidentally or intentional, into the environment, and it's clear from this point, unless you're irrational and psychotic, that this was a genetically, or gain-of-function engineered virus. It's a man-made virus. It's no way ever originated in an animal population, which interestingly had a good supposition initially because the virus, the SARS-CoV-1 and the MERS (Middle East Respiratory Syndrome) virus, two previous coronavirus infections that were challenging in the human population did come from animals.

Dr. Joseph Mercola:

So it wasn't unusual to speculate that this came from animals, but this one didn't. But anyway, going on, many people believe that this was introduced into the population solely as the pretext for introducing this vaccine to as many people as they can. So this, it seems to me, is the crux of the whole issue, the whole dilemma and challenge that we face, is how do we deal with this and what are the consequences, and how do we go about understanding?

Ivor Cummins:

Yeah, it's a really tricky situation now because I spent so long fighting lockdowns. We clearly know they're highly ineffective. They cause vastly more damage than they could ever save. We know that. And the mask, of course, was very sinister. The vaccine more recently I've looked into, and my problem with the vaccine is the kind of risk reward. So you might argue a risk reward for an elderly or susceptible population perhaps. But for people below 60 who are healthy, the risk of COVID is so low. And below 40 years old, it's just tiny for healthy people.

Ivor Cummins:

And we know now from the emerging Israel data, where we see the same infection rates in the vaccinated and unvaccinated for all age groups. And many other countries of empirical data, we know it's not affecting transmission. The original pharma companies did acknowledge it may not affect transmission. Mechanistically, it shouldn't really affect transmission. And the real world data said it doesn't. So the push to vaccinate, mass medication, is not based on any science really at all.

Ivor Cummins:

I mean, it's just based on a desire. And you've got to question that desire. What is the obsession with trying to get everyone vaccinated? And I feel that part of it is to do with profiteering and pharma influence, obviously. Part of it is to do with justifying a vaccine passport or permits. They're coming in for restaurants in Europe, insanely. And part of it as well, I think, is there's a fear that a control group existing, substantial, say 20%, 30% of people who are not vaccinated, the data will clearly show that the unvaccinated, unless they've got particular medical conditions, really are no worse off by not being

vaccinated. And they are not causing transmission. So I think there is a desire now to eliminate the control group.

Ivor Cummins:

Just like we saw with Sweden. Sweden did no lockdown, and it turned out to perform in the lowest extra mortality of Europe and the lowest third. So they were abused and attacked through all the media for months because a control group is dangerous. A control group shows that your medication or your lockdown ain't so hot. So I think that's another driver. A bit of desperation is coming in to get rid of the control group and just get everyone vaccinated, and then you can't see any signal anymore.

Dr. Joseph Mercola:

Yeah. That's a good point. I want to take off on that, because that's precisely, precisely what was done in the vaccine trials with Moderna and Pfizer. That's what they did. I'm sure you're aware of this. they eliminated, after a few months, they eliminated the control group under the justification that they couldn't afford not to give them this incredible piece of saving grace to protect them. But that is just reprehensible science. They eliminated it. But even so, even when they have a control group in many of these trials, it is a fake control group. It is not real.

Dr. Joseph Mercola:

So the control group, typically, is they give them another dangerous vaccine. And that's the control group. They don't give them saline injected with water, which is really easy to validate because normal saline injected into your arm is going to cause absolutely zero symptoms. Another vaccine, not so much so. So that's another strategy they use in their effort to eliminate the control group.

Ivor Cummins:

Yeah, there's lots of tricks in the book. And we've seen this. We saw it with chemotherapy. The reality was their first chemotherapy drugs, they did extend or slow tumor growth. But when you actually looked at the outcomes, they were kind of a damp squib. But they still looked at the slowing of the tumor, which later grew really fast, so they didn't get much change in the end. And they said, "Oh, this is the miracle." So it's unethical in the future to ever test a chemotherapy drug against this one.

Ivor Cummins:

So that was done in the '90s I think. So I was astounded when I saw that. But like you say, yeah, another vaccine is used as the control, which is simply not science. The control group is the center. The central pillar of science is the control group. And even if there is risk to a control group, you ethically have to accept that risk because it's so fundamentally crucial to have the group. You have to accept some risk there.

Ivor Cummins:

In this case, with a flu, a bad flu equivalent, endemic virus, the risk being accepted by the control group is almost nothing anyway. And they used young people. They didn't even test it on the people who needed it. I mean, the whole thing is kind of a sham. And you don't have to be a conspiracy theorist to say it's a sham. Basic elementary science has been inverted, turned upside down, macerated, flushed down the urinal. And that's without even getting into complicated stuff. It's crazy.

Dr. Joseph Mercola:

Yeah, it's the classic implementation of George Orwell's "1984," Orwellian doublespeak, at least a derivative of that, where everything they say is the opposite of what it is, the truth is. And sadly and

unfortunately, that's the point we're at. So it is beyond sad. It's interesting, another point on the control group is that I believe it's upwards of 40%, maybe even close to 50% in some populations, that have chosen to resist accepting the COVID jab. So that is the authentic and true control group.

Dr. Joseph Mercola:

And my speculation is this control group will wind up having a far lower mortality in the long run, because there are going to be consequences, side effects, that have yet to be observed as a result of this participation in what appears to be one of the largest experiments in human history, injections of hundreds of millions of people with this untested, unlicensed injection therapy.

Ivor Cummins:

Yeah, I mean people, most people don't realize it's under emergency use authorization, EUA. We had a guy in Ireland who went to seven pharmacies and he asked them the question, "What's the risk to my 20-year-old daughter from COVID? And what's the risk of side effects from the medication?" Supposedly to help with COVID. And they couldn't really answer. They actually are administering, and they didn't really know either.

Ivor Cummins:

And they pretty much all of them said emphatically, "Oh no, this is fully tested." "Yeah, phase three and phase four, yeah, yeah, yeah, yeah." And he told them, each of them, and showed them documentation, it's emergency use only. It's not fully authorized. And they were kind of surprised. So even all the people administering, they're just not aware of any of the facts, it appears.

Dr. Joseph Mercola:

Yeah. And if you ask to look at a package insert, and you unfold it, and you have this really large sheet of paper that just happens to be blank. There's nothing on it. There's no list of the side effects. And I think at least they ostensibly tried to warn people before they take this and have them consent, which literally is physically impossible to give an informed consent when you are censoring anything, every bit and piece of information that would give people a broader understanding of the true, what's happening, what is the consequences of consenting to this experiment.

Ivor Cummins:

Yeah, it's bizarre to be quite honest. And the reality is that the pharmacists in question, they had some idea of side effects. They thought it was one in hundreds of thousands. But the Johnson & Johnson leaflet that this guy brought in showed up to 1 in 10,000 chance of a serious clot in brain, lymph or spleen, et cetera. So they weren't even really aware of the contents of the leaflet.

Ivor Cummins:

The pharmaceutical companies, in fairness, have kind of covered themselves with capturing some of that data. But no one's reading the leaflet. And the people administering are just saying, "Oh here, sign here." So there's no informed consent because the person administering doesn't understand the scenarios, and certainly the person getting it doesn't.

Dr. Joseph Mercola:

Well, I would disagree with the statement that the pharmaceutical companies have captured the data. They've done precisely the opposite. Almost in every single case where a new drug is implemented, there needs to be a mechanism in place to capture the data, to understand what's going on, especially when this

is unlicensed. It's an emergency use authorization only under these emergency orders, authorization powers that they have, executive order powers.

Dr. Joseph Mercola:

So typically there's in place these mechanisms. And the only place that we have is this self-reported database of VAERS (Vaccine Adverse Event Reporting System). There is no mechanism. They intentionally excluded that. Because they knew what the consequences. These people are not stupid, they're sophisticated. They understood that there's going to be plenty of side effects from it. And in some ways, it doesn't really matter, other than from a propaganda perspective because there's no danger to them from the legal system. They were really careful to have implemented not only the protection of the 1986 Vaccine Act, Injury Act, that insulates them from any, all liability from these vaccines. But they had additional acts passed. There's no way they can be sued or held liable for any damages that occur from these vaccines.

Ivor Cummins:

Yeah, so they are completely exempt. And like you said, that goes way back. I mean, the VAERS database that you mentioned, it captures some, but it depends on the country. So a paper came out a week or two ago, and I think the journal then retracted it, not because of the content, or because the authors decided they made a mistake, just politically.

Ivor Cummins:

And the paper from these authors showed that in Europe, some databases are showing up to three to four per hundred thousand fatalities linked to the vaccine. And then some other countries are showing almost none. So it's clear that the country that records the most is doing the best recording. And they compared that four per a hundred thousand, which matches, I think, one of the American databases, to the six per a hundred thousand probable risk from COVID. And they made the point that the cost benefit here is kind of in the same order.

Ivor Cummins:

But absolutely, in Ireland, I have people on the inside of the medical system, and overwhelmingly, nothing's getting recorded. When people have a reaction, they come in, they have a problem, they send them to the emergency room. The emergency room just deals with it. No one picks up a pencil or a pen. I mean, that's just across the board. So I've heard the estimate that on average, the recorded issues, you might be able to multiply by 5 to 10 to get the actual. And that was from some professors I think linked to BMJ (British Medical Journal). That was not kind of way out there fringe. That was just acknowledging what you said, that the databases never capture most of the issues.

Dr. Joseph Mercola:

Yeah, there was a whistleblower with the Medicare, Medicaid system who was an insider with respect to analyzing these statistics. And that's the conclusion she reached. In fact, from her testimony, a lawsuit was filed, I believe, in Alabama, that in fact the percentage increase was 500%, or five times what the reporting cases were. So I think at this point, we're about 10,000 deaths in the United States. So that would be 50,000 deaths. And I don't know what the percentage that would come out to. I think it's probably close to 200 million injections now in the U.S.

Ivor Cummins:

Yeah. And there's the deaths that are associated. And a lot of people on the narrative side are trying to say, "Oh, well they're just associated with the vaccine, not causal."

Dr. Joseph Mercola:

But why didn't they say that when they were dying from COVID-19? That was just associated?

Ivor Cummins:

Yeah. Well, COVID-19 was within 28 days of a positive test. So if you had within 28 days of a flu test, you'd get huge numbers, in winter especially. Or of a rhinovirus test in season. So it was a meaningless measure. But now they say that about the vaccines. And the reality is that what goes completely against that is there was a lady, and it might even be the same whistleblower you mentioned. But she did a short report showing that the reactions are in the following week after the vaccine. There's a huge spike in reactions. And then they fade right down in the following few weeks.

Ivor Cummins:

So it clearly shows they are associated. Otherwise, you'd just see a flat curve of reactions over four or six weeks. But you can see from the curve, they're all happening within a week or two. I mean, my daughter is in college in the medical sphere. And a friend of hers, 22 years old, healthy, in February got a double shot of the Pfizer, and she had to go to hospital for five days. And the doctors dealing with her acknowledged, yes, this is a rare case of a reaction.

Ivor Cummins:

But guess what? A week or two ago, she came down with a flu-like symptom. She rang the system, and they said, "Oh, there's no need to test because you've been double vaccinated." But she got a PCR test, and she was positive. So she's positive with symptomatic COVID for the first time over the whole epidemic, following two shots like a few months ago, all administered properly. I mean, these stories are popping up all over the place.

Dr. Joseph Mercola:

Yeah, the breakthrough infections. And my guess is that they're just delighted that these are happening because they're using it as justification for more additional booster shots. Because obviously if it didn't work we need three, four, five, six to give you to make sure it works.

Ivor Cummins:

Yeah. Every bit of data that emerges is always going to be used to the benefit of the narrative side. And that's just the way it is because they hold control of media, control of politicians, so the twisting and turning and kind of fraud, it'll always be any data can be used to support the narrative. It's pretty sad, actually. And I'm not sure, to be honest. I have a couple of immunology people, super-hot, one in Hungary, one in West Coast U.S. And I defer to them on these things about mass vaccine enhancement reactions and all.

Ivor Cummins:

And they largely think that the vaccine, if anything, will probably cause more problems of that nature, as well as the side effects of autoimmune, et cetera, et cetera. It'll probably generate more trouble in the next season. But they don't feel it will generate a mega problem, or like some people have feared, this enormous wave of sickness. They think it'll be a lower level. But they acknowledge that anything that does happen, will always be twisted to justify more shots, more boosters, or what's happening now, blame the unvaccinated. We're going to see a lot of that. And Biden, I think a few days ago, I was quite shocked. And I'm not easily shocked anymore after the last year. Biden came out and basically kind of incited hatred against unvaccinated, quite directly. That's scary.

Dr. Joseph Mercola:

Yeah, well it's not surprising. I was reading an editorial in USA Today this morning. And they said, "Well, we've had enough carrots being offered." Now is going to likely be a federal policy that if you get the COVID jab, they're going to give you \$100. Pay you \$100 to get the jab. That is in addition to the other incentives that were offered like millions, in some states, multimillion-dollar lotteries were being used as a bribe to get this thing.

Dr. Joseph Mercola:

And literally \$10 billion, \$10 billion was spent by the government to advertise these vaccines, \$10 billion. It's insane. But anyway, [inaudible 00:22:08], they were saying, now listen to this, "We've had enough carrot. It's about time to get the stick out." So why don't we go down that route, and these COVID or vaccine passports, which is the obvious stick. And the restrictions, the eliminations, perhaps the inability to go to the grocery store and buy food unless you've been vaccinated.

Ivor Cummins:

Yeah, I mean it's getting super sinister. But we kind of knew last year with the mandatory masks and a lot of other crazy stuff that happened that we were heading towards a China, more China-like system. And there's a massive desire for the ID cards. And around 10 years in the U.K., a war criminal prime minister, Tony Blair, who drove the whole Iraq war thing, he's back at it in the last year. But 10 years ago, he tried to bring in biometric ID cards in Britain. And of course everyone said, "No way."

Ivor Cummins:

But it just shows it's been a long time coming. And the virus is the excuse to get what they want. And I'd say it's a control system for governments to have tracking, tracing and more control over citizens. And I'm sure over time they'll want to put on economic status, and credit history, and they'll have private medical records in an ID card. I mean that's abhorrent to me. That is just beyond shocking.

Ivor Cummins:

The really shocking thing is that people are falling for it. Like our whole freedoms and inalienable rights are being taken away on the back of what? And the reality is, and the data's clear as day. It's a kind of a bad flu equivalent, maybe like '57 or '68, not even as bad as 1957 because that one hit the middle-aged and younger also. So the life years lost were vastly higher, even if the number of deaths was not much higher.

Ivor Cummins:

But look what we're doing based on a severe flu. And I mentioned it earlier, but it's shocking. The Diamond Princess showed us with the people dying on a 3,700 person ship, the people dying were in their late 70s and into the late 80s. And the numbers clearly showed it was a severe flu equivalent. And nothing ever changed since then. And yet, here we are. We're going to give up fundamentals of freedom. I mean, genuine fundamentals. And everyone's lost sight of the fact of the true impact of the disease.

Ivor Cummins:

But that's a year of nonstop propaganda. In Ireland, it's 24/7 for the last 16 months. Literally every 15 minutes, all the evening TV shows and the main channels, they're all funded by government money for COVID awareness, and are all hammering out the narrative that SARS-CoV-2 is like bubonic plague, essentially. And that the lockdown is saving us, even though the data shows it has almost no effect. It's crazy stuff.

Ivor Cummins:

I'm still, Joe, trying to push the key points that lockdown is ineffective, like masks, and the severity of the disease is nothing like they're saying. And I'm almost hoping that if people can only grasp that, they'll realize everything else built on the back of it is built on sand. It's a house of cards. It's all insane, kind of sinister, totalitarian nonsense. But it's hard to convince people who are propagandized. They're practically psychotic now, the majority of the population.

Dr. Joseph Mercola:

I would disagree with the psychotic, but I couldn't agree more wholeheartedly with your previous comments, which I believe highlights the absolute essence of what's going on. You hit it right on the head, in my belief. And that is this propaganda campaign has literally been probably the most effective propaganda campaign in the history of the world, mankind. There is nothing that beats it because they've developed technologies, and systems, and social media platforms and control that they can hit you from every which way. And that literally is the most effective way to manipulate the population. You can't get better. It's painless, and it's very cost-effective.

Dr. Joseph Mercola:

So that's what they've done. And once you're brainwashed, literally brainwashed, you are immune to rational, logical thinking, and providing basics that you just highlighted. That the lockdowns don't work, that the masks don't work, it's the vaccine. This is not a dangerous virus. Because everything they've been told by their trusted sources says the exact opposite.

Ivor Cummins:

Yeah, it's a killer. And I'm sure you remember, and this is way back when the people were sharing the studies where it demonstrated that for a couple of months only, or maybe it was only around four or six weeks, if you propagandized a people, you've kind of ruined their reasoning. They just become like they can't see reason after that because their brain has been formed. And these were studies done years ago, but we've had 16 months. And I compare it to 1930s Germany. And I'm very specific. Some people get very angry about referring back to that period.

Ivor Cummins:

But I'm not referring to the Holocaust. I'm not referring to the '40s. I refer back to 1930s Germany, and Goebbels and the rest of them, they put a radio in every house, free of charge I believe. And they knew, "Once we've got a conduit, or a channel into every house, and we feed them what we want to feed them, we've got them." I think there was a quote from one of the Nazi party that, "Give me control of the media, and I will turn any nation into a nation of pigs." So these people were contemptive. They had contempt for the people. But they were very smart, and they pulled off, obviously, an absolute horror.

Ivor Cummins:

But now is a great analogy. And people get really angry if you compare it to that period. But it's a perfect analogy. Take over the media, mass propaganda for sustained periods, and then you can almost do what you want. I mean, the nonsense that they've come out with, so many times in the last year, people should just laugh at it. It should be a farce, a comedy. But people are not laughing. They've just gotten used to being fed umbilically from the media and the professors and experts. And no matter what nonsense they say, they just kind of take it on board.

Dr. Joseph Mercola:

Yeah. Yeah, and the 1930s Germany that you referred to was 80 years ago. 80 years ago. We've had exponential increases in technology, which correspondingly, exponentially increases its ability and effectiveness at propagandizing, brainwashing people more effectively. So that's why I say this has been the most effective propaganda campaign in the history of the world. And they've won, they succeeded. Pretty much, at this point in time, it seems that it's almost hopeless to convince anyone otherwise, no matter what data you show them, no matter if virtually everyone in their family gets the vaccine and dies from it like immediately. Obviously, that's not happening, and worst case scenarios likely never would. But if it did, they still would believe that the vaccine was safe and it was just a coincidence that they all died. That's how severe this brainwashing is.

Dr. Joseph Mercola:

And I've seen it in lesser scenarios where someone close to them, their family or good friend, dies obviously related to the vaccine. They say, "No, it's not. The vaccine is safe. It was some other thing that caused, some other aspect that caused it." And they went and got their vaccine jab, or their COVID jab.

Ivor Cummins:

For sure. And we've seen many examples here. We have an expert group in Ireland, genuine expert group with industry leaders, surgeons, doctors, legal people. And we've been working since last September. We've put out several papers. We've lobbied. In fact, we just did a panel interview a couple of weeks ago. It's released a few days ago. It's an hour long. But again, it has key people, six of us, and we go through the whole thing of what we're discussing. And it's very popular.

Ivor Cummins:

There's an Irish slant to it, but most of it applies to the whole world. And we just go through what we're talking about. And it's astonishing. You can see the six people who are top-level positions in multiple disciplines being kind of astonished as we talk. But we talk about the brainwashing as well. And there's no doubt. I think of the vaccine argument, which I never got into much over the years.

Ivor Cummins:

Yes there's anti-vax, very anti-vax people who you could call them extremely anti-vax. But the problem is there's also vaccine zealots on the other end. And there are a much bigger number of people who are unquestioning. Like any medication, you can't say that all hypertensives are safe and effective. You can say that certain ones are that have all the data in. But no one would expect to say a whole class of drug types are all automatically good.

Ivor Cummins:

But the vaccine is the exception. There's a vaccine zealotry, this obsession that once it's that class of drug, it suddenly cannot be discussed. And this has been brewing for 20 years. I've watched it, but I've never taken too much notice because it didn't really affect me, and I was in different areas of health. But now, it's come crashing down that 20 years of vaccine zealotry, and not allowed to question. That's been groomed.

Ivor Cummins:

So now they bring out one that's under emergency use authorization. It's absolutely appropriate to discuss that, to discuss the risks and the benefits. Of course it is. But no. You're not allowed to because it's a vaccine. So you just shut up and go home. It's shocking, isn't it?

Dr. Joseph Mercola:

Yeah it is. So I want to thank you for indulging me and dialoguing about the vaccines and the implications of them. And I might have another question down the road. But before we go there about that, I wanted to step back and really shift the conversation to things that you can do to improve your immune system, because that really is – anyone in natural health, and we've both been fascinated and passionate about natural health prior to this pandemic.

Dr. Joseph Mercola:

And we had to shift because that was the only thing that became relevant. But why don't we go back to the health perspective, which you are grounded in really well, and give us your take on metabolic flexibility, and I'm interested too. I mean, you mentioned earlier when we first discussing your wife. So I suspect she's metabolically flexible. And what you're doing to achieve that, and why it's so useful, and the value of doing that to improve and upgrade your immune response.

Ivor Cummins:

Yeah, absolutely, Joe. There's no doubt. Metabolic health is the center of everything, and immune health is inextricably linked to it. So interestingly, I interviewed Dr. Ron Rosedale, you're probably familiar with.

Dr. Joseph Mercola:

Oh, yeah, yeah. Just to give you a little background, I connected with him for many years. Let's see, 25 years now easily. I went to a lecture he gave in 1995. Was like 20 of us there. And he actually opened my eyes to insulin resistance and radically changed my practice. I've kind of diverged from him somewhat now because he got extreme on mTOR and protein restriction. And I just think he dove into territory that he's mistaken.

Ivor Cummins:

I actually had a little argument with him, but a gentle one because I have so much respect for him.

Dr. Joseph Mercola:

Yeah. Good guy.

Ivor Cummins:

And I interviewed him. But yeah, he kind of went hardcore on that, and I think he got too mechanistic. But yes, the protein raises mTOR. And yes, raising mTOR is bad. But the whole insulin access and IGE, I mean, there are so many other things that raise mTOR. And anyway, we won't go down that hole. But yeah, I agree. I think he's backed off from that now.

Dr. Joseph Mercola:

A nice hole to jump down because it's fun. And he's well-intentioned, he's just confused in my viewpoint. And I'm glad we're both in agreement on that.

Ivor Cummins:

Yeah. Well, the thing is, I interviewed him on this, and he was razor sharp. And 4th of April, 2020. Now, this is only when the thing was starting.

Dr. Joseph Mercola:

Yeah, yeah, yeah.

Ivor Cummins:

Slam dunk. So it's an hour-long interview. And basically, leptin resistance, insulin resistance. Leptin is a cytokine. It's intimately involved in the immune system response. If you are leptin- or insulin-resistant, then you will overreact in one sense with the immune system, the cytokine storm, and you will underreact in other parts of the immune system.

Ivor Cummins:

So we went through it all. And he made the point and I agreed with him that literally, if you knew SARS-CoV-2 was coming, you don't need to spend four or five months getting fit. You don't need to lose all the weight. Within days, your insulin and leptin levels will be collapsing if you just suddenly switch to meat, fish and eggs, no processed food, vitamins and minerals. Literally within the first day, your leptin will be falling fast and your insulin. And in a few weeks, you're going to be utterly more capable of changing a serious illness into a mild course of illness, or even of changing a death into just a nasty round.

Ivor Cummins:

And that was in early April, 2020. And I honestly thought, Joe, that this would be an opportunity to show people this. But of course, the thing got so insane, no one cared about the virus except vaccines and stuff.

Dr. Joseph Mercola:

Propaganda, the propaganda.

Ivor Cummins:

Propaganda took over. And it's almost poignant now to have those lectures. Back in April, we were bang on the money, as you well know. You know all this yourself. If you drop your insulin and leptin, and you raise your vitamin D, which will raise anyway as you lower insulin resistance, automatically, if you do all the stuff that we've talked about for years about cholesterol, insulin, fat, keto, low carb, all the stuff for longevity and health, you just apply essentially the same stuff rapidly, and you're going to collapse your risk from this virus. But no one was allowed to see that. In fact, the FDA (Food and Drug Administration) I believe last summer put in an injunction against a natural health website that was just talking about vitamin D importance. They told them, "You're not allowed to do that. It's not approved."

Dr. Joseph Mercola:

Yeah, I think I was one of the sites that they issued a warning letter on because of that. You can't make a connection that vitamin D and improving your health overall and your immune system is going to have any influence on getting this infection, or surviving the infection.

Ivor Cummins:

And on vitamin D alone, and I know it's associational, I did three short talks straight to camera with slides, again in early April, on the emerging data from Philippines and elsewhere. And it was clear as day that people over 40 nanogram, or 100 nanomole, who are metabolically healthy, and healthy ancestral vitamin D, had massively lower chance of severe illness or mortality, even when correcting for age.

Ivor Cummins:

It wasn't just that the old guys had low D. It was corrected for age. So it was clear as day that if you eat nutrient-dense food, drop your insulin and leptin, get healthy sun and maybe supplements, et cetera, and you get your vitamin D status up, you're going to go into that group that has vastly lower risk, and even sub-flu risk. But as you say, the censorship then came in hard, so it's hard to give it.

Dr. Joseph Mercola:

It still is in full force. They have not let up. If anything, it's getting more extreme.

Ivor Cummins:

Yeah.

Dr. Joseph Mercola:

Yeah, so it's-

Ivor Cummins:

Dangerous times.

Dr. Joseph Mercola:

It is. So yeah, thanks for sharing that. I guess I have one question for you, because we haven't had a chance to dialogue about this. I think we spoke at a conference about three years ago now in Nashville. And that was a chance to connect with you personally, which was great. That was pre-pandemic for sure. What I've come to learn, and I'd be interested in your take on this, is there's, and especially with you're very fluent with the literature on carbs and keto and such, that the perception that carbs or evil or dangerous may be misguided. And in fact, they can be really helpful.

Dr. Joseph Mercola:

But there's clearly a nexus, especially processed carbs, they're going to typically increase insulin resistance. But what I believe is a far more pernicious element of processed foods are processed seed oils, vegetable oils, that are rich in omega-6 linoleic acid. And it's this increase in linoleic acid percentages as a composition of your total calorie intake that is, in my belief, and I'd like to get your feedback on this, exponentially, and I am not being hyperbolic, I believe it's exponentially more dangerous than excess processed carbohydrates.

Ivor Cummins:

Yeah. Now, the exponentially, this is a thorny chestnut, Joe. I have to say this is a tricky one.

Dr. Joseph Mercola:

Okay, well this what we can dialogue without censorship.

Ivor Cummins:

Well, true. No, it's a tricky one because I'm finding it hard to come down with an emphatic answer, a definite answer. Like the refined carbs and processed carbs are really bad. And we know that from all the science. We know from huge amounts of science that the seed oils are a major problem. But actually answering whether it's 80/20 seed oil, or 50/50 refined, it's hard to say.

Ivor Cummins:

Some great people like Tucker Goodrich and Dr. Chris Knobbe, M.D. I interviewed him twice. And all my own research in terms of cancer risk, tumor progression, insulin resistance, visceral fat, all the stuff associated with excessive linoleic acid, it's just a massive body of knowledge, and it was suppressed. I mean, there were studies in the '90s showing mammary cancers in rats, a whole load of animal studies. And they were all done in the '90s. And then they stopped being done. And the reason was because they were saying these were heart-healthy vegetable oils. And the system didn't want people finding problems.

Ivor Cummins:

So I'd agree there's a huge amount of data to say, "Don't touch them." Serious problem. There's obesity studies in mice and in rats that are dramatic in terms of adipogenesis, or fat creation. There's so much science. But the problem I have is I've got an almost balanced hatred for refined carbs, processed food, and the effect of those on your insulin, and on your other hormones, and your gut, to blast up insulin and blood sugar. And then I've got what I said about the seed oils. So my cop out, or easy way out, is just to say, and I often say the devil's triad.

Ivor Cummins:

And the devil's triad is refined carbohydrates, sugars and seed oils. And those three make up most ultra-processed food. I mean, that's the cheap as dirt ingredients that they use to bulk up processed foods. So you kind of have to hit the triad. And it's hard to say. I mean, if a person gives up the seed oils, and eats loads and loads of refined carb, and drinks Coca-Cola and all that stuff for 30 years, they're going to end up in trouble probably. And if they have seed oils at a few percent of diet, not huge, and they eliminate all the others, the refined carbs, I wonder how bad would they end up? It's just a tricky one.

Dr. Joseph Mercola:

Yeah, yeah, yeah. So this is a great illustration of freedom of speech. Because we have some differing views. And you get to share your viewpoint and I can share mine. And then we let the reader, or the viewer, make up their mind. But this freedom is gone, essentially. We can only do this on a non-censored social media platform. Otherwise, it would be censored. So I've actually interviewed Tucker Goodrich and Chris Knobbe a few times myself. And actually, I'm writing a book with him on this very topic.

Dr. Joseph Mercola:

And I'll tell you why I've taken a more hardcore position. And whether or not it's exponential, I mean, I haven't done the studies. But that's my gut feeling and I'll tell you why. Clearly the level of percentage of body fat that has this linoleic acid in it, historically, pre-1850, which is essentially the implementation of industrialized food processing, was about 1% to 2%, 1% to 2%. Now, it's at 20% to 30%, 20% to 30% of the fat in the average human being's tissue is linoleic acid. Literally 20 to 30 times what it should be, 20 to 30 times.

Dr. Joseph Mercola:

And anything beyond this 2% in excess, it's a very sensitive threshold, you radically increase oxidative stress. And you create these very dangerous free radicals, which just decimate your cell membranes, your mitochondria, your DNA, basically almost all your important biological tissue. And it causes severe mitochondrial dysfunction and your ability to generate energy.

Dr. Joseph Mercola:

So typically, omega-6 fats, linoleic acid, are considered essential. I would challenge that because the only way you're not going to ever have enough omega-6 fats is if you stop eating completely for a long time, and say you had parenteral hyperalimentation, where you were being fed intravenously. Because if you're eating any type of real food, it's going to be in there. It's just almost impossible not to eat food and ever, ever, ever become deficient in linoleic acid.

Dr. Joseph Mercola:

So from that perspective, technically it is essential. But pragmatically, it is not. And if you go to levels that are beyond the 1% to 2%, or if you attempt to replicate our pre-industrialization, ancestral patterns of eating linoleic acid, you are going to need to exert an enormous amount of willpower and discipline

because it's really, really, really hard to do. You virtually cannot eat any processed foods. And even then, you need to avoid many ostensibly healthy food, like seeds and nuts. It's the rare nut and seed that is not loaded with linoleic acid.

Dr. Joseph Mercola:

That doesn't mean you can't ever have any, but you have to have low amounts of them. We're talking like not handfuls, like one, two, three of these. So the amount of – because it takes, must people don't understand that if you seek to eliminate this linoleic acid from your cells, it's like a seven-year process. It doesn't come out in a day or two, or a week, or a month. It takes seven years before you're able to, because the half-life is so long, because it's integrated into the cell membranes.

Dr. Joseph Mercola:

So that type of discipline is not going to allow anyone to consume those enormous amount of refined carbohydrates in any quantities. And actually, I believe once you're metabolically flexible, and we can dialogue about this, like we both are, then I'm convinced, absolutely convinced, biologically and from anecdotal experience personally, that excluding carbohydrates, healthy carbohydrates, not processed of course, even though that can be minimally harmful if done wisely, is one of the most foolish things you can do.

Dr. Joseph Mercola:

Because you need to have these. And I mean I would personally not go lower than 50, and many days I'm at 150, 200 grams of carbohydrates, typically from fruit. And that works just great. And I'm still in ketosis. And I've got very low visceral body fat. And when I tried going low carb, under 50 grams for extended period of times, I got unhealthy. I really did. So from that perspective, I think carbohydrates are healthy. If you want to indulge and engage with some unhealthy carbs, it's fine. The problem is that many people's perception of healthy carbs are in foods that also had this high amount of linoleic acid, so you're getting the damage from both. That's the challenge. So anyway, that's my take and view and why I am personally convinced that linoleic acid is far more dangerous.

Dr. Joseph Mercola:

Because even if you had those Cokes for 30 years, you could stop the Cokes immediately and there is no long-term detox, none, zero. You just have to get over the insulin resistance you created and that's it. There's no seven-year detox, none. So they're in and out.

Ivor Cummins:

That's a very good point, actually, that one. There's no doubt about it. And the healthy carbs, myself and Dr. Gerber in our book as well, we always say low carb, with real food carbs, maybe 80, 90 gram is fine. And then we kind of view the down to 20 and all as almost a medicinal intervention.

Dr. Joseph Mercola:

Yes, therapeutic [inaudible 00:48:49].

Ivor Cummins:

Yeah. And I'm kind of saying, “Look, there are plenty of benefits there.” If you have profound Type 2 diabetes, hard to get into remission, neurological conditions, and we know about the epilepsy.

Dr. Joseph Mercola:

Cancer, cancer.

Ivor Cummins:

Cancer, absolutely. So insulin down into your boots, glucose down, ketones high, and all that. But generally, low carb combined with fasting, and intermittent fasting, leaves you mostly in a keto kind of milieu. And that's ancestrally appropriate. We often got carb foods, natural ones, over the millennia. So try not to be too extreme. But use it as an intervention if you really need to push somewhere. So I'd agree with you. And it's a very good point about the longevity of these seed oils. And I remember Hyperlipid, that blog Hyperlipid?

Dr. Joseph Mercola:

Sure, Peter. Peter.

Ivor Cummins:

Oh Peter, yes, of course. Brilliant.

Dr. Joseph Mercola:

Absolutely. Love him

Ivor Cummins:

Ah, fantastic. He made the point about all the linoleic acid in your cells, and the long-term removal of it takes ages. But he said ironically, people who get cancer, and they have a problem maybe because of the linoleic, and then they lose a lot of weight and try and get healthy, they're actually flooding their system with all that linoleic right at the point when you don't want to. So there's kind of an irony to that whole thing as well, isn't there? Shocker.

Dr. Joseph Mercola:

That's why the age-old adage is an ounce of prevention's worth a pound of cure. And it couldn't be more appropriate in this light because once you get into really serious health issues, the actual process of reversing out of it can actually exacerbate the health issue. So that's why you want to be healthy all the time. You don't want to lead an unhealthy lifestyle and try to rescue yourself at the end, because it may be too late.

Ivor Cummins:

Yeah. And I myself, I mean I didn't mean to understate linoleic. It's and the devil's triad. And we have no vegetable oils or seed oils whatsoever, except occasionally if you take a sauce. So I'm extremely harsh on that. I have occasional nuts or seeds. But to be honest, very little. I'm more meat, fish and eggs primarily.

Dr. Joseph Mercola:

Yeah. My guess if you do an analysis for you, you're probably 5 or 6 grams of linoleic acid a day, maybe less. Which is a good, good target.

Ivor Cummins:

Probably.

Dr. Joseph Mercola:

That's a healthy target. Most people are 30, 40, 50 grams a day.

Ivor Cummins:

Yeah. And just one last thing on that, because I just thought of it. One of those rat studies actually made the point that ancestrally, we maybe had 1% or 2% in the diet of the linoleic. And then they actually looked at epidemiological data, and they also used rat studies. And they said they thought was a threshold, that once you go above 3% or 4% or 5%, the acceleration of tumorigenesis, or tumors in the studies, tended to level off. And they made a really interesting point.

Ivor Cummins:

That if the whole population, and at that time, they were around 10% of the diet, back I think in the late '90s. They said if the whole population is up around 10%, you won't be able to see the cancer driving effect in an epidemiological study.

Dr. Joseph Mercola:

Right, because there's no controls.

Ivor Cummins:

Because everyone's at 10.

Dr. Joseph Mercola:

There's no controls.

Ivor Cummins:

There's no controls. There's no 1% or 2% guys. They made that point, which is very smart for the '90s. But no one took any notice because the narrative was the vegetable oils are heart-healthy. Finish.

Dr. Joseph Mercola:

Yeah. Yeah, that's an excellent, excellent point. And I'm just thrilled that we can have this dialogue because actually, I think we both take something from each other and come to different conclusions. But it's our interpretation of the data, and everyone's free to listen to that and make their own conclusions. But the saddest commentary on this with propaganda is that that ability to listen to this type of uncensored dialogue about really important issues is evaporated, essentially.

Ivor Cummins:

Yeah. Corona, I know there was problems before, and 1819 Google changed the search engine so you wouldn't find anyone but Mayo Clinic and other nonsense. But corona really has changed the game. I never sensed censorship really before March, 2020. Maybe some downgrading in search engines, but nothing too heavy. But like now it's insane. I've got a strike. I got out of the strike. I got another strike. I'm only sharing government data. And I reference what I say. And I'm just barely keeping out of strikes on YouTube. Twitter's shadow banning. I get reports all the time from people, "I can't see your tweets. I see them for a moment then they're gone from the timeline." It's very dystopian and sinister. It's crazy.

Dr. Joseph Mercola:

Yeah, well we were an early adopter on that. Because I was censored off of Google in June of 2018. I was removed from search engines.

Ivor Cummins:

I remember seeing that Mark Sisson went down a factor of five or six. You went down a factor of 15.

Dr. Joseph Mercola:

No, no, no. We went down by 99.9%.

Ivor Cummins:

Oh, that much? That was Google [crosstalk 00:54:07]

Dr. Joseph Mercola:

Because the removed all – and even with that, we're still doing pretty good in the Alexa rankings, because we get I don't know, 15, 20 million views a month. But none of that comes from Google. Virtually zero from Google.

Ivor Cummins:

Yeah. Well, that was super sinister for sure. But it's just on steroids, obviously, since March, because anyone who says certain things now. And you know the killer, the WHO (World Health Organization) is a semi-private organization, unelected, with massive conflicts of interest and ties to pharma and other foundations. There's no question about that. They should not be allowed to dictate any country's policies, maybe advise.

Dr. Joseph Mercola:

Let alone the whole world.

Ivor Cummins:

Let alone the whole world. But the CEO, and I remember. I was stuck to the chair when I saw, I can't pronounce her name, the YouTube CEO, she came out and just said, this is in March, '20, "Anyone who says anything that conflicts with WHO, we'll take it down." Like that's like saying, "Anyone who conflicts with what Pfizer say, we're going to take it down." It's like, what?

Dr. Joseph Mercola:

Yeah, that's essentially the equivalent. Thank you for making that analogy.

Ivor Cummins:

Yeah.

Dr. Joseph Mercola:

Yeah. But it is. It is absolutely the same. It's identical. People just don't see it as clearly as you just stated it. But that's the truth. So getting back to the vaccine, because that really is kind of the issue on the plate. There are a number of individuals who – well, I wanted to talk about one aspect of it, which is widely discussed, it's typically referred to as ADE, or antibody-dependent enhancement. I like to refer to it as PIE, because I think it's more realistic. That acronym stands for paradoxical immune enhancement, because that's exactly what happens. It's a paradox.

Dr. Joseph Mercola:

You get this immune booster, so to speak, with this COVID jab. And supposedly, it's designed and intended to produce protective antibodies, but it doesn't. It produces – it doesn't produce the disease-neutralizing antibodies. It produces these binding antibodies, which instead of helping you fight the infection, actually make you more predisposed to the side effects and massive inflammation and secondary cytokine storms, so that kill you prematurely.

Dr. Joseph Mercola:

So this is well-documented in the early coronavirus true vaccine. Not mRNA vaccines, but true vaccine trial in animals done about 10 years ago, where they would give these animals the coronavirus vaccine. They were able to generate antibodies from adaptive immunity, enormously good response. All the animals got the increased antibody levels. The problem is when they re-exposed these animals to the actual virus, they all died due to this ADE.

Dr. Joseph Mercola:

So as far as I'm aware, these studies were not repeated with the mRNA vaccines, so we have no data. I mean, that's a big part of this whole challenge. There is no data. We're creating the data as we're going along. And even then, it's not even being properly collected. And it's radically manipulated and skewed to remove any collection of data that might distort the benefits of the vaccine, or not even the benefits, but the downsides, the disastrous side effects. So given all that, I'm wondering what your analysis of the data you've reviewed so far, and your prediction as to what might happen in the fall.

Ivor Cummins:

Yeah. That's a tricky one. Again, I haven't gone too deep in that, but I've leveraged my best guys I mentioned in Hungary and West Coast who are absolutely on our side of the house on all of this. But they're still pretty – they're unbiased though, and they go deep into the immunology. The general feeling is, and they're way ahead of me, so I just defer to them, that yes, there'll be autoimmune. Yes, there'll be side effects that are serious, the clots, the platelets, all of that. And yes, they're leaning towards an ADE-type phenomenon. But their belief is it won't be a huge explosion-type phenomenon. That there's so many hundreds of millions sent out already, even during seasonal surges, vaccines were deployed, which is crazy. But it's not like they were all done in the-

Dr. Joseph Mercola:

Yeah, never typically done in epidemic.

Ivor Cummins:

No.

Dr. Joseph Mercola:

You don't immunize or vaccinate during the epidemic peak. That's not a good thing.

Ivor Cummins:

Exactly. And I think the general belief is yes, elderly and more frail people, that powerful vaccine maybe knocked them off when they would have lived a little longer. And certainly caused trouble for quite a few people, but not mass. So their suspicion is it may exacerbate the next season, say in Northern Europe. The season is coming now. It may exacerbate it, but they don't fail in a huge way. But certainly there will be a hard-to-quantify element of that. How big will it be is very hard to call. So they're scanning the data. The Israel data's good, like I said. The comparative data between countries who did almost no vaccination and did a lot of vaccination, the curves are very comparable.

Ivor Cummins:

So all in all, the data appears to be saying, but it's hard to get it, as you mentioned. It appears to be a story of there's very little benefit, and no benefit to transmission, and very little benefit in terms of severity, it appears from comparing countries and what we can see. And also, it doesn't appear that there's very big negative, high percentage, whole population impacted effects either. It's kind of like that. But come the winter in Europe, we're going to get to see much better I think.

Dr. Joseph Mercola:

Yeah. Yeah, it's interesting because even though VAERS is far from a perfect collection of side effects from any vaccine, I forget the most recent evaluation, but I believe the last I heard the number of deaths from this COVID jab were 30 times higher, 30 times higher, than all vaccines administered together from the previous 30 years. Those numbers might not be quite right, but it's in that range. The number of years or the – but definitely, all vaccines combined. I mean, this is the most extraordinary, dangerous immunization that's ever been administered.

Ivor Cummins:

Yeah. And in a sense, to be honest, Joe, I'm kind of comparing it against the overall COVID impact. But that's a good point. Comparing against prior vaccines, of course, it may be way, way higher. But it's just even being much higher than prior ones, is it a big population impact that's going to cause mass ADE? That's a lot of fear people have.

Dr. Joseph Mercola:

Yeah. I'm kind of in agreement with you. I thought it might have. I thought, "They did it. They're going to kill tens of millions of people." But probably not. It's a slow destruction, and they may not need to do that. But they could accidentally do that because no one knows. No one knows. We are in completely uncharted territory. There's no way to predict the long-term consequences of this. They've never, never done any studies. And to anyone that says that they have, they'd be lying. They just haven't been done.

Ivor Cummins:

Yeah. I think they love the precautionary principle when slamming in lockdowns and causing 50 times the societal damage that they would ever save. They love the precautionary principle. But they apply zero precautionary principle to the medication. And it just shows that this is an ideology. It's not about science. Of course it was never about science. It's about economics, profiteering, control, like we mentioned at the start, getting in ID cards, probably digital currency will be coming in. They want the ID card to get everyone's metrics locked in for access. All of these bad things, they're all ideologies. None of them are scientific. And the roll out, mass roll out of a brand new medication that should have been emergency use only, where you might do the susceptible people above 60, you can make a logic for that.

Ivor Cummins:

What's happened is mass roll out, and now they're coming after the kids. I mean, you don't have to be anti-vax. You just have to be rational, to look at the impact of COVID, SARS-CoV-2, look at the vaccine data, such as you can see so far emerging, and the real-world empirical data of the country compares that show the vaccine's not doing much. And then look at what they're actually trying to do, vaccinate all the kiddies. And you just know it's completely perverse. Even if you don't have any strong feelings.

Dr. Joseph Mercola:

Well, you don't know, and that's the problem that you so well brought up earlier. You don't know because you are brainwashed.

Ivor Cummins:

That's it.

Dr. Joseph Mercola:

You cannot see it. It's right in front of your face. Your brain is so distorted and short-circuited that you can't see the obvious. It's shocking but true, shocking but true.

Ivor Cummins:

We have to accept reality. And I often say to people who are getting despondent, "Oh my God, they're doing this. They're getting away with this." I always say you have to be stoical. I fight the misinformation seven days a week. But if it turns out that the bad guys are getting dreadful things implemented, I refuse to let myself become despondent, or miserable, or want to give up. I just hardened myself over the decades that I will not be brought down by this, no matter how bad it gets. Stoicism, even if they get ID cards, and you're jabbed, and tracked, and traced, you still got to be the resistance. You still got to live. And you still got to oppose it, and stay healthy. Stay funded. Stay around to oppose it.

Ivor Cummins:

Look at the French resistance in World War II. Dreadful conditions. Dreadful. They had to sleep with the enemy, literally. If they were caught, they were tortured and murdered. For around a year or two, things looked absolutely grim, that they were not going to win. They kept at it, kept at it.

Dr. Joseph Mercola:

But you know what they didn't have? They didn't have such a successful propaganda campaign.

Ivor Cummins:

True. It was a much fairer fight.

Dr. Joseph Mercola:

I'm telling you. It was a much fairer fight. People's brains still functioned and worked. They are not working now. Not only do you have the propaganda campaign, but you have this 80% of the population eating highly processed foods, highly processed foods, which in no way shape or form is optimizing their physiology and making more predisposed to irrational thinking.

Ivor Cummins:

Yeah. With the Rosedale interview, and so early that was in April, we said, I think I said and he agreed 100%. I said, "Imagine a thought experiment, like Einstein used to do, a thought experiment to illustrate things. Imagine now, before SARS-CoV-2 hits Europe, for four weeks or five weeks before it, all the food supply is gone, but there's only meat, fish and eggs, and maybe some broccoli. That's all we have." Everyone would absolutely go crazy because they want their pizzas and their cans of cola.

Ivor Cummins:

But let's say that happened. And for four of five weeks, that's all people had. Well, what would happen? The weight would fall off them. Insulin and leptin would collapse. Vitamin D would start going up, even without sun exposure, because it's a marker of metabolic health as well. And by the time SARS comes along in five or six weeks, you're probably going to be 10 times less impact, if not more, just from that. Just from not being able to eat junk.

Dr. Joseph Mercola:

Yeah.

Ivor Cummins:

And it's crazy.

Dr. Joseph Mercola:

It is. So we've given people a lot to digest, to share your perspective on things, which is always useful. It's good to hear from someone else who's looked at the data and hasn't been propagandized, and is eating healthy, so your brain still functions. And many of the people watching us, their brain still functions. And they are not believing the conventional media. So thank you for sharing your wisdom. Now, how do people who want to find more information from you, what is their best strategy?

Ivor Cummins:

All right, well first, thanks, Joe, so much for having me on. And you've got a huge audience. And you're saving a lot of people from being brainwashed. I mean, way more than me I'm sure, vastly more. So that's fantastic. In terms of finding me, if you search engine, I won't say the G word, Ivor Cummins, my name, usually you'll pretty quickly hit my YouTube, which is the main thing. Though I have Odysee and BitChute now as well channels because-

Dr. Joseph Mercola:

Good, good, good. You're going to be censored eventually.

Ivor Cummins:

Yeah. And Twitter, of course. But my main stuff you hit by searching my name, because it's not a common name, see. You get all the stuff.

Dr. Joseph Mercola:

Perfect.

Ivor Cummins:

And that's probably the main thing.

Dr. Joseph Mercola:

Okay, well great. Well, it was good to catch up with you. And I thank you for contributing to the effort to help those who's brains are still working and not manipulated yet to give them information that they can make better choices. And that's what it's all about, understanding and seeking to identify the truth.

Ivor Cummins:

Absolutely. Thank you, Joe, so much.

Dr. Joseph Mercola:

All right. We'll catch up, hopefully, at some point. Thanks, Ivor. Take care.