



DRPAWLUK PAIN SOLUTION SUMMIT

Dr. Pawluk: This is Dr. Pawluk. This session of the Pain Solutions Summit is about foods that you should avoid that are amplifying your pain. Basically, we're going to talk about foods and the relationship of foods to pain, inflammation, whatever sorts of things that the food can do to make your problem with pain worse and I have with with me today an extraordinarily, distinguished guest who is as old as I am, relative to the practicing medicine. We both graduated, I'm going to reveal my age here. You already put it in your bio, so I can do this. We both graduated in 1970, so that makes us 50 years in practicing medicine approximately.

Dr. Mumby: Absolutely.

Dr. Pawluk: Now, Dr. Scott Mumby is distinguished and that he's done a tremendous amount of work in alternative medicine very early on. He's already recognized early on the vanguard of alternative medicine and he's written a large number of books. He's made a lot of contributions to alternative medicine. One of his key books that we're going to focus on today will be from his, an information from that book cause diet wise, he's written numerous books beyond this. And you'll see, we'll talk about that a little bit later. So without any further ado, I would like to introduce them. Dr. Keith-Scott Mumby, tell us about yourself.

Dr. Mumby: Yeah, well, Hi Bill. Thanks for the invitation. I'm really looking forward to this. Yes. What can I say about myself? First of all, like you are qualified, an ordinary doctor. In fact, I say extraordinary things from time to time. You probably know, but people would come up to you, say you're a real doctor, meaning, you know, did you qualify properly? And I say, sure, I'm real. You can touch me. I'm absolutely real. I went the conventional path and in Britain you have to have a bachelor's in medicine and a bachelor of surgery. It's about the equivalent of the American MD. But if I say I jumped the fence real quick, and by the early seventies, I was doing all kinds of different things. And as you said, I was part of the sort of pioneer spirit back in the late seventies early eighties. There were probably only about a dozen of us full time around the world doing actually food allergies and what we called in those times we call clinical ecology.

Dr. Mumby: You know, how your environment can make you sick. Food was just one of those things and it was an extraordinary awakening for me. You know, I had a lot of colleagues, you know Bill Crook, you probably remember Ted Randolph, they all got into this because they were sick. You know, they had terrible migraines and someone showed them that that could be a food allergy or they had arthritis and someone showed them that could be, so they became converts. Now that wasn't for me. I was 100% healthy or as rocking and rolling and enjoying life just being a boomer basically. But I read a book by a man called Richard Mackarness in 1976 I think it was published. It was called, "Not All In The



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Mind" and he was a psychiatrist and his point was that people get getting sent to him because they're all, you know, in a crazy, it's all in your mind.

Dr. Mumby: There's nothing wrong, we've done all the labs and there's nothing wrong. You can't have this pain. I mean, this is what doctors say, isn't it? Sometimes they, you know, they never say, Oh, we screwed up. We can't figure this out. They just say, there's something wrong with you. You're crazy. We sending you to see a psychiatrist so hence this book, not all in the mind well I read it, and most colleagues just simply looked at it and thought, this is bonk and tossed it. But I read it and thought, wow, this could be amazing. So I tried it. Bill I put a patient, an asthmatic patient on about six or eight meds severely, you know, a respiratory cripple, essentially put him on a diet. And within a week all his symptoms are gone. He'd tossed all his meds and I was converted. Nevermind him. And I've often wondered, to this day, you know, what would have happened if my first trial patient had been a failure?

Dr. Mumby: But as it was, it was a miracle recovery. So I delve deep and I became knowledgeable and expert back in the 80s, for example, I made medical legal history when a court or British crown court accepted my evidence that food allergy couldn't make a youth violent, murderously violent, you know, he'd tried to strangle his stepfather and he was, well, he pleaded guilty in the end but he was given a conditional discharge and the condition was that he'll stick to their Mumby diet, which he did. Well, you know, I have not heard from him for 20 or 30 years, but it was a real success. So, you know, I went on and on. Now you'll know this in my city early on, they food allergies, they used to call it Mumby jumbo. Within 20 years, the British health service was buying my allergy formulas for national health patients.

Dr. Mumby: So I went from quack to being respectable in less than 20 years. Now in medicine, that's a meteoric rise as you know, it takes 50 years to even persuade everybody to use anesthetics. So that's what that, and then latterly I got involved in all kinds of things like electronic healing devices, microcurrent therapy, alternative psychology, you know, there's nothing that I'm not curious about and interested in and if it works, if it helps, I will espouse it. So in a nutshell, that's me. That's how I got to sit in front of you but my strong suit, my long strong suit is still food allergies, food intolerance, and the way the foods can really mess you up. You know?

Dr. Pawluk: Well, it's interesting that you talk about the food allergy that way, and this is not in the pain topic, but I had a similar experience with two children came to see me who are jabbering away. I mean they were yakking away and they were looking at me. They were engaged and so on, incomprehensible, incomprehensible. So I tested them for food allergies. All we did is IGA and IGG food testing, and they came up positive for dairy,



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eggs and gluten got off those foods. The teacher calls, the mother said, what did you do to these kids? They were cogent. We can understand them. What did you do to them?

Dr. Mumby: It's so dramatic at turn, isn't it? You? It doesn't always but when it's dramatic, it's really dramatic.

Dr. Pawluk: Well, clearly we now know that they had allergic encephalitis. That's what happened. And then they were fine for a while parents started backing off and they reverted right back into their jumbo.

Dr. Mumby: Well, it's sad, isn't it? You know, when people learn the truth and then they won't even stick to it. You know I had a top medical expert in my city, you know, he's Mr. Big and very famous and he came to see me quietly. He wouldn't let anyone know, but came to see me for his migraines and it, long story short, it turned out to be apples. So he went away. Happy. Six weeks later he telephones me back and said, well, let the migraines be back. What do you think happened, doctor?

Dr. Mumby: You know what the question Bill? I said, are you back eating apples? Yes. I couldn't really accept that apples could possibly do that. I mean, that's how even top intellectuals and clever doctors just don't get it. Of course he stopped apples again and these migraines disappeared forever. But he'd probably learned an Apple a day, keeps the doctor away the day caused him severe migraine in this case. And that's a point we want to meet while we're talking Bill, is there any food can do it to any person and pain is often the issue, not always. There can be other troubles like hyperactivity and you know, brain allergies and hyperstimulation. But pain is a very common one I have to say.

Dr. Pawluk: So let's talk about your experience with food and pain.

Dr. Mumby: Well, okay, well let's lay a bit of groundwork here. We're talking food allergy or food intolerance.

Dr. Mumby: I don't think it really matters. I mean there was a long argument about that, but my definition for this, the sake of this discussion and your listeners is just some food allergy or whatever you call it. It's just something that person shouldn't eat because it will hurt them with, they do now some kind of toxic inflammatory or immune response or whatever is stirred up will result in inflammation. And you know, inflammation equals pain and pain equals inflammation, right? So if you, if you're inflaming something, somewhere is going to go wrong. So it depends which part of the body maybe is perhaps a bit early to jump in. But if I say this concept of target organs, I'm sure your listeners will get it, but whatever part of it doesn't matter what the allergy is, you know, it can be milking completely bananas. It can be peanuts.



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- Dr. Mumby: The symptom depends on what part of the body is attacked. So if it hits you here, you get a migraine or you get a high productivity, ADD, ADHD. And so if it attacks your skin, you get eczemas and hives, you know, urticaria for detects your joints, you get arthritis, colitis when it attacks your guts and asthma when it attacks your lungs. So we call these target organs and it's a very crucial concept. And as I say, it doesn't matter what the allergy is, it's what part of the body. But there are certain places like the head is good for migraines, joints, fingers and turtles and things, knees, typically that's an arthritic process. You know, anyone with arthritic type pain should always investigate. The possibility that a food might be doing that. And there's things like regional pain syndrome, you know, advanced and complex regional pain syndrome.
- Dr. Mumby: Very often it's not complex at all. It's a milk allergy person gives it up, pain goes, you've seen it. So you know it's, you know, it's very dramatic at times. In fact, it can almost be silly, dramatic, you know? I mean, I had one gal, she was 63 she had migraines almost every day. Well, every week in our last year and one severe migraine for just about 60 years and I found it was dairy. No more migraines. Do you think she was happy? She was not. She was angry as hell but nobody told her that it could be a food allergy. And I kind of sympathize I think I'd have got in a rage to 60 years of misery and nobody even suggested the right solutions.
- Dr. Pawluk: That's not connected to the rest of the body after all, is it?
- Dr. Mumby: No, no, no. Nothing to do with me. What's down there? Yeah, those were great days. I must say. There's a lot of names in the hat now, but you know, still a lot of modern people that are speling on about food allergies, food intolerance, they don't seem to, you know, they say, Oh I've done that. You know, I've done casein and I've done gluten. It wasn't a food allergy. And they don't realize the extent to which food can be the problem. I mean, even even lettuce Bill, I had one girl she had 20 hard years of severe colitis, blood and. It turned out to be lettuce and only lettuce. That's the one food that did it. Well of course she was, you know, she was sick so she ate healthy salads cause they're good for me and lots of lettuce and tomatoes and she was killing herself. I said, come on, girl. You know, he'd be fine with the burgers and fries that you shouldn't be.
- Dr. Mumby: Okay. I mean, I was joking, but I did say that. But you know, you wouldn't think. Now most people are gobsmacked when I say that. But you know, Robert Atkins for example, he was well aware of the trouble caused by lettuce. Not surprising. It's in a family called a compositae, which includes mustard and crest and you know, quite strong, flavorful things. So lettuce is nowhere near as innocent as people think. So you've got to be alert, you know, you've got to consider all possibilities and any food can do it to any person. It's just that some are common on than others. Yeah, dairy is very common. Wheat is



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probably the commonest in an adult. Corn is probably the commonest in the kid, but it's different for everybody.

Dr. Pawluk: Well, related to what you're saying, I had a comparable experience with a young six year old, five or six year old child, had daily headaches for probably about a year and nobody could figure this out. So I tested her with IGG food testing and we tested for 96 foods and lo and behold, she came up positive for the citrus family. Not one citrus, the citrus family, a number of citrus foods cuther off on those foods, gone.

Dr. Mumby: Yeah. Well, you know, the citrus family isn't that, you know, I put people on an exclusion or elimination diet and we have to exclude citrus. You know it's fairly common. Orange is surprisingly common and people just, you know, well, it's the fruit, it's healthy, it's got vitamins C and people don't understand. Most food is toxic. The another reason we can eat well, why there are so many billions of people on this planet Bill, it's because we discovered fire. We can see this is not going to be a welcome message for the rural food people, but we discovered fire so we could cook the food so we could render it less toxic and that, and so, you know, given, you know, square kilometers or hectares could support 10 times the number of human beings because all that food that's potentially poisonous, we can now cook and eat it.

Dr. Mumby: And that was a big, you know, big breakthrough. But the truth is most food is toxic. You know, I mentioned that, that book, "Not All In the Mind" Richard Mackarness, he said that if cabbage had to go through the tests the drugs have to go through before they fit for him, the cabbage would not pass. And carrot has a nerve toxin in it. Like it's an organ, a phosphate, you know related to nerve gas toxin, it's called carotatoxin. Alright, the levels are not high. But you know, if you are juicing and drinking carrot juice all day long, you might find yourself half paralyzed and not be aware of where it's coming from. You know, so the idea that food is always innocent is a bit naive and I know you know that, but you know, we've got to teach people that.

Dr. Pawluk: Well knowing what we know, as long as we've been practicing medicine, you stumble on things over time. Not that we're all very smart, but you've got to listen and watch, right? You've got to observe and you've got to ask the questions. So the question is how can we test for foods and whether they're a factor, how do we find out that a food is a factor?

Dr. Mumby: Well, first of all, you've got to raise your index of suspicion. But I would say 90% of illnesses are worth exploring this way. I'm not saying everything is a food allergy, but I'm saying it's a good place to start. You know, if you, you've got this, this origin of the problem, this etiology, this etiology, and included in that soy milk allergy, it's easier to give up the milk. You often get an instant result. So it's a great place to start. And if a



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person is having any kind of trouble that's persistent, you know, the doctors can't really solve it or they're giving you a chronic meds, meaning the symptoms always there, but they give you a meds to try and relieve the symptom. Well, I mean, that's no use to anybody. That's not a cure. You know, taking a treatment for life is not a cure.

Dr. Mumby: So if you find yourself stuck in that position, and it should be the first thing you ask yourself, could I be reacting to food? It's not rare. It's about 85-90% of the population and react significantly to food. Let me just digress a minute by the way, a book I wrote in 1986 I said that, and I was interviewed by the BBC world service in London and they obviously didn't believe me. So they sent an account, a roving microphone down onto the streets of London, and they were stopping people and asking them questions and they stopped 20 people, 18 of those admitted they've got a food allergy. Some of them didn't even think it was a food. You know, I eat chocolate, my joints swell. Of course that's not a food allergy is it? Or you know, onions give me a headache. But that's not a food allergy is it?

Dr. Mumby: Well of course it is. If you ask the right questions, people very commonly admit and are aware that they react to something. So it's very common. So it's worth looking at. And the simplest way if you want to try for your listeners is to, is to try an elimination diet. Now, the one I used to use was basically what we'd call it, the paleo diet now, right? We used to call it the stone age diet or the caveman diet. You probably remember that. In fact, the BBC Christen me the stone age doctor once, because I was famous for this diet and I used to say, well stone age, it's not fair. I've got a few gray hairs, but I'm not that old.

Dr. Mumby: But you know, another way we can describe it as the Hunter Gatherer diet, you know, what did man traditionally eat before all that, what I call farmer foods, you know, dairy foods and grains, sugar, tea, coffee plantations, all these things. Those are all modern foods but traditionally we were Hunter gatherers. Just picture it. You know, somebody wandering through the forest or across the Prairie. And they would, they would get some berries and some seeds that could occasionally dig up roots. If they got lucky, they'd catch an animal or catch a fish and they drink water. So that's pretty well the stone age diet. Now it doesn't suit everybody, but it suits most people. Most people will dramatically improve their health if they do that. Now, obviously not if you're allergic to red meats. For example, you know, the caveman diet is pretty raw with red meat foods and blood and some people like that.

Dr. Mumby: So not everything suits everybody. And as I said lettuce could be a problem and we'd allow lettuce. We think, well that's just a vegetable. Go ahead and need to do. It's probably safe. But if you feel better, then you've got clear coat ringing evidence that you do have a food allergy. And what the mistake a lot of people make is think, well that's



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okay. So they go back to eating the ice cream and the cookies and the pastas and pizza, they never ask themselves which food. You know, if you give up 20 foods and feel great, it doesn't mean all 20 were a culprit. So you know, what we do is reintroduce things one at a time, carefully using what we call a challenge test and see if you get a reaction enough or all your arthritic symptoms have gone and you have a slice of bread, nothing happens.

Dr. Mumby: You're down a half pint of milk. Oh my God, the pain's back. Within an hour you've got a very, very clear signal that your body doesn't like dairy products and it's a major influence in the joint pains that you're experiencing. So we call this elimination and challenge your dieting. And for anyone that can't get to an expert, I mean obviously you know, you've, you've got skills, you can help them along. But the average person at home is gonna talk to a doctor who said, food nutrition has got nothing to do with it. You've got arthritis, you know, so if you're doing it yourself, then you need to some kind of manual or, I wrote one, you mentioned it called diet wise. It's just a self help book. It's what you can do for yourself. So I don't spend much time on the lab tests and so on, but a skilled doctor that you would know that, but a person doing it for themselves.

Dr. Mumby: How do you do it? Well, you know, you follow an elimination program, you follow proper challenges and well if you, if you've go on an elimination diet, it's only three things can happen. You feel better, you feel worse. You feel exactly the same. Each one has a different interpretation. But even if you feel worse, Bill, it's good news. In a way. It means it must be a food. You've changed your diet and you know, I feel really bad. It must be something you're now eating more of, so maybe you've started eating more fruits or more red meats or whatever. So if you follow the signals and clues, it's just a little bit of detective work. And I guess that's why they call me the allergy detective back in the 1990s it's just, you know, keeping notes that didn't know it couldn't be that because of that.

Dr. Mumby: But there are some traps I want to go on and talk about that. If you're willing, we'll talk about the hidden or masked allergy because that really confuses people and rightly, Yeah, sure. I'll ust go ahead. Okay. Well, I don't want to crowd your conversation.

Dr. Pawluk: It's part of our discussion. Very important.

Dr. Mumby: This was, this was probably one of the biggest discoveries in medicine in the latter half of the 20th century. Didn't get billed as such because not enough doctors understood it or recognize what was happening. But it's the key to hundreds of millions of people feeling sick. Food is hurting them, but they don't know that it's hurting them. Why is that? It's because of this effect that we call a "hidden allergy" Bill. You can eat the food often and nothing happens. You know, you eat it for three weeks, no migraine, and then



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in the fourth week killer migraine comes on and you think to yourself, well, it can't be milk right? Milk all last week and I didn't have a headache or wheat.

- Dr. Mumby: I had bread every day last week and no headaches. So this is a wrong thinking because in fact that's how it works. If you eat a food regularly and repeatedly, it kind of goes in disguised. It takes about four days for food to transit the bowel. So if you're eating the food at least twice a week or three times a week, it means there's always some down there inside the gut. So when you eat some more, nothing much necessarily happens. Just the same deal as yesterday and the day before. And occasionally we get breakthrough symptoms of course, but that's why we call it a hidden allergy. And sometimes it goes a step beyond Bill where the person is starting to feel rotten and if they eat the food, it will relieve the symptoms. So it's kind of masking the disease. So long as you're eating the food, it's okay. Now, the most familiar example across for everybody's coffee, everyone knows as long as you drink six cups a day, it's fine.
- Dr. Mumby: But if you stop, you get a killer headache. It's that same mechanism. You know a person is using the coffees, some sort of subliminally taking a dose to keep the headache at bay. The person's learning, they can relieve the symptom. So masked allergies are very good expression for that particular type of reaction. Hidden, or masked allergy. And of course it's, it makes things very confusing. You know, you can be eating the food all the time and not relate it to your symptoms at all. And that's why the elimination diet is crucial. You give up a whole bunch of foods and see what happens. The most logical thing of course. And we are in a day in and an age now of intermittent fasting Bill, the most logical thing is, you know, just give up all foods if your symptoms go, it was a food allergy, but that's a bit strenuous, you know, I don't recommend that.
- Dr. Mumby: Sometimes it's very tough for a person to get back onto any food. They seem to react to anything. And of course there's certain people like diabetics and schizophrenics for whom this would not be a good idea, but you give up enough to feel, well now a colleague, I don't know if you know Doris Wrapper, if you remember, she's retired now, great gal, pediatrician. She used to talk about the eight nails in the shoe trap. You know, if you've got eight nails sticking up in your shoe, it hurts and you're limp. And if you pull three nails, you're still limp, you've got to get all eight nails and then you don't limp anymore. That's the secret to elimination dieting. You've got to get enough nails out that the symptoms will go. You feel good. And by the way, and that's where I got started on anti-aging stuff.
- Dr. Mumby: You know, back in the 70's and 80's people were coming back, you know, two weeks later, I feel terrific. I feel 15 years younger. And my brain is so alert and vibrant, just like when I was a young teenage, you know, people were getting very excited. So that was the beginning of my journey into anti-aging things and a realization that nutrition was,



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was crucial, you know? But anyway, what was I saying? Oh yeah. So you know, giving up enough things to get a result is really the key. And if nothing else works, you could always try a fast, I mean, a lot of people try fasting for different reasons these days. I don't know what you're doing, but I'm doing the two, five, you know, two days a week. I hardly nibble a handful of cashew nuts and things, but to otherwise hardly anything for two days.

Dr. Mumby: For some people that could reveal, you know, the, the real truth. And another circumstance where it might happen is a person, you know, they get a tummy bug, they get gastroenteritis, they get diarrhea and vomiting. They can't keep anything down at the end of four days that week, they feel terrific because they've unmasked all their allergies, all the food is gone, their guts empty from end to end. And if it's ever happened to a person, you know, any of your listeners has ever had that phenomenal, they should know that it meant something. But there was nobody there to advise them. If you feel good after an episode of diarrhea and vomiting, it means and colonics is another one. You know, if colonics work for you and you feel terrific, don't go on doing colonics. Just tell yourself, well that means there's a food. You know, I've keep flushing out foods, I want to know what that food is. And if you stop the food, you don't need the colonics. You won't have the symptoms. So it wouldn't suit everybody, I guess. But you know, I'm more concerned about the patient than the colonic therapist in this situation. Yeah.

Dr. Pawluk: Well. So go back to something you talked about. Well you know, as we had a little discussion beforehand, you have something called the "overload model" .

Dr. Mumby: Yes. Now that's very important and something else I want to say too, and I know you know this, but you know, we learn all that stuff from patients. We just listen to what they're saying and they'll tell you everything you want to know. And almost none of this is in textbooks, but you know, patients will tell you over and over and one of the things that emerges, if you do a proper encounter with a patient and spend maybe an hour getting to know them. What are they doing? What's their life like? What are their stresses and strains? What are their challenges? It becomes obvious that modern people as it were very overburdened and overloaded and we have many factors that may be contributing to ill health, I think. I don't think anybody, unless you've lived on the planet Zed for the last 20 years, will be unaware.

Dr. Mumby: We're worried about, you know, 5G or 4G for that matter. Cell phones and EMS. We worried about that. That's an overload factor that itself can cause symptom, atrocious food because food is vitiated. It's lost all its nutritional properties, but it still has its damaged properties as I've been talking about it. Actual mental stress, you know, which can be, you know, divorce, redundancy, financial worries, all those things some



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examination coming up, all of these multiple factors can overload a person. Chemicals is another one. We mustn't forget. We are all living in a very toxic world and large numbers of chemicals that are hitting us and polluting us. You know, I worry about organic food Bill so-called. I mean, you know, you've got your certificate that says you didn't use pesticides, but what, you know, what's coming out of the sky, you know, there's Chinese power stations, pollution sweeping all across Western America now every time it rains you get dumps on your beautiful certified organic crops.

Dr. Mumby: So that worries me. And you know, there's, there's no question because if you do blood levels and so on, everyone's got two or 300 pesticides and pollutants in their bodies. So all these factors amount to an overload thing. And the model we like to use is that of a barrel with lots of taps ripping into this barrel. Sooner or later the barrel is going to overflow and that represents the symptoms. You know, whether it's your migraine, your arthritic pain, your rash or whatever, the overflow is symptoms. Well to be able to get to stop the overflow. In other words, stop the symptoms. All you got to do is turn off one or two of the faucets. You don't have to turn them all off. You know, food is a great one because it's instant and easy within 24 hours. That's one of the overload factors gone.

Dr. Mumby: If you start eating organic, that's another major of a load factor that's gone. I'm on record with the BBC as joking. Divorce could be a good allergy plan, you know, just get out of if it's that stressful, you'll feel better. So in whatever, which way you reduce the, the overload that's dripping into the barrel. Eventually you'll switch the symptoms off. And that leads to a very important sort of Scott Mumby saying, if you like go, which is you don't need zero allergies to get zero symptoms, you just have to come back to within the threshold that your body can manage. You know, our bodies are brilliant at coping. I don't know how they cope with, but for most of us, somehow it copes and some of them lucky people it doesn't. But you know, if you reduce the demands on your body, then your body can get into healing mode instead of stress and reaction mode and all kinds of good things can take place, you know, healing things so that overload or barrel model is very crucial. I believe it's nature's number one healing secret. I published a little booklet with that title. "What is nature's number one healing secret?" You know, in doctors don't heal nothing. It's arrogant. Doctors think, Oh, I fixed that. No, no, no. Nature fixed it. You set the stage. If you're smart, you'll just get out the way, which is not modern medicine as we know it. But.

Dr. Mumby: Getting out of the way. He's crucial and nature does the healing, you know, she wants to heal and she's brilliant at healing and the best skilled physician can do is set the stage and say, well, you know, we don't want that. You should get rid of that. Stop doing this. And then nature in her glorious wisdom will fix it all for you. It's rather wonderful. It's very inspiring.



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- Dr. Pawluk: I use a similar analogy. I said that doctors pull their punches. So if you go to a doctor for an antibiotic, then what does the antibiotic actually do in the body? It kills the bugs. But what heals the body from the infection? The infection is more than just the bugs. The infection is the bugs interacting with the body growing too much and causing damage. That's the infection. What do we, in medicine do to heal the infection? Zero. No, nothing. We cross our fingers say go home and heal yourself.
- Dr. Mumby: Yeah. And of course the simplistic minimalist thinking is the antibiotic. Did it, Fixed it. You know, it wasn't, it was the whole mechanism that fixed it.
- Dr. Pawluk: It gave the body a fighting chance. That's what your saying.
- Dr. Mumby: Yeah. Yeah. I mean that's a bit like what I was saying. If you take some of the stresses out, or pull the load back a bit, then your body can cope. And you know, maybe, maybe we should talk a minute about that Bill, about the sort of threshold values, you know, because I mean, we know that say a peanut allergy, a person has the tiniest amount and it's rushed to ER, adrenaline will, you know, will they survive it or not? But that's very dramatic and not very common. You know, the typical food allergy is this mast, you know, sort of cumulative allergy. The more you eat, the worst the reaction gets, I forgot what I'm saying.
- Dr. Mumby: What's the thread of my thought? Oh yes. Yeah. So with something like a peanut allergy, the IGE mediated severe, anaphylactic type reaction is rare. More commonly the person will react according to the dose. And everyone's a bit different. So someone with a wheat allergy might be able to eat a slice of white bread, but if they eat wholemeal bread, it would make them ill. Because there's much more wheat in wholemeal bread and there is in a white loaf slice. So everyone has their different thresholds. Now it can be that, you know, it needs two or three allergens. The example I use often is somebody who's allergic to chocolate and milk and cats and you know they have a chocolate milkshake. They go in the, in the loft where it's all dusty and stroke a cat and they sneeze. I say, well, gosh, I'm allergic to cats.
- Dr. Mumby: There's too simplistic. You know, if they hadn't had the chocolate milkshake, they wouldn't have reacted if they weren't in the loft, but they were out in the backyard, they wouldn't have had the reaction. So it's a cumulative thing. So you get these cumulative values, what eventually it will push the person over if it's a bad allergy and it'll push them over immediately. So the person learns not to do that. You know, like shellfish or throb reasoning. They just don't do it anymore because they come out in hives and it's unpleasant, but often they're cumulative. Now it can be cumulative instant, all on the same plate at the same time. You eat the food and you go, ah, or it



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can be overtime. You know, you had a bad food and you know dinner one evening and then another bad food at breakfast, another one at lunch and one, you know, I'd come to your hives already, carrier excema in the afternoon.

Dr. Mumby: So that's a sort of cumulative going over the threshold. And the other way it's relevant is that often your threshold will shift, particularly under times of stress. So you know, examination or family quarrels or a viral illness, you know, I have people that can tolerate a certain amount of X, Y, Z, but then they go, they have a viral episode, they have a nasty flu attack in weeks later. They can hardly tolerate anything. The tolerance of foods has dropped dramatically and it takes a long while to build it back up. So all these factors make it very complicated, don't they? And I'm not surprised that really took a long while for it to come to light because doctors are always looking for very simplistic solutions. You know, the germ theory of disease, tuberculosis is caused by the tubercle bacillus. And that's the end of it. It's not, you know, it's caused by poverty, malnutrition, stress, unrequited love and all those things.

Dr. Mumby: The Victorian novelists knew exactly what made you die of TB and it wasn't just the tubercle bacillus. You could have it for years and nothing happened. But your girlfriends stood you up. I said, I can never marry you. Please don't dock my daughter again. The guy croaks with tuberculosis in no time. So these complex multiple factors make it interesting, shall we say. You know, it's interesting and there is nothing is that simple doctor just wish it was.

Dr. Pawluk: Humans lot prefer things to be univariate. It as an only one variable involve a equals B or a causes B.

Dr. Mumby: Yes. Yeah, exactly. And a customer, you know, medicine is messing around in the wrong pool. You know like the, one of the common analogies we use is like mopping the floor because the sink is overflowing because the faucet is running, you know, and they keep mopping the floor and it's still more overflowing.

Dr. Mumby: It's still not the floor that's like treating symptoms continuously. The sink is overflowing and wetting the floor. What's the point? Just go and turn off the faucet and this thing will stop overflowing and you don't need to mop the floor. So that leads to my pretty brutal definition of a cure. And there's no, no treatment, no symptoms. If you're taking meds on a regular basis, it's a failure by definition. You know, you should take it for maybe a week, then finish, gone, you don't need it anymore. But if you're, you know, taking antidepressants or tranquilizers or analgesics for years, decades by definition, it's not working, otherwise you just wouldn't need the meds anymore. So that's a pretty tough message to get over to people as well. That, you know, illness can be self limiting. Modern medicine, as you know, is erected on the fact that, well, it's all done.



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Dr. Mumby: You know, you're busted, it's over. You're never going to be well again. Your body's, you know, screwed up bits of busted. We'll have, we can fix that. We can keep you going until you die. That's a crazy comic look at health, isn't it? I mean, health is vibrancy and energy. You know, I have a saying, if you can't, if you don't leap out of bed in the morning, bounding with energy to get the day's work done and yay, let's go, then you're sick. You're not healthy. I mean, you may not be terribly sick. You're sick in a degree and you're not healthy, that's for sure. You know, that's not wellness. You should leap out. You have more than enough energy to get through the day. That's the crucial thing. And that's a good monitor whether you're healthy or not.

Dr. Pawluk: I want to go back to a point you made earlier and here's a point I make the patients as well, they are a little bit of this food may not be a problem. A little bit of that food may not be a problem and you're a little bit of that food may not be a problem, but altogether, you know, one plus one doesn't equal two it can equal 10 or it can equal a thousand.

Dr. Mumby: Yes. Synergy. Oh, what's it called? Potentiation, isn't it? That's a two plus two equals 11 or 15 or something. Yeah. Yes. And that's, you know, that's absolutely true. And we don't really understand the synergistic workings of food like chemicals or something. 80,000 chemicals I think currently in production but we've no idea how they interact with each other. And it's the same with foods cause foods are really quite complex. You know, there's huge amounts of like that the lectins in there and phenolic compounds cause I mean of course some of them we choose like coffee, we choose caffeine as a pharmaceutical drug but we choose that.

Dr. Mumby: But you know, some of them like certain mushrooms for example, it's got weird chemical thing that would send you a bit silly. So a little bit of a lot of things can cause you a lot of trouble. But one of my sayings or mottos that help out with patients, they're like, it is what you do wrong and now, and again isn't the problem. I'm sure you know this, what you do around you can get away with. You know, I'm not saying nobody should ever eat ice cream, although has he dropped dead? It's just not true. You can eat ice cream, you might feel it after you did and wish you hadn't. As long as you don't do it more than once a month, a couple of times a year, it's not a problem. It's what we do wrong on a day by day by day basis that destroys health.

Dr. Mumby: And I think people have to get hold of that, you know, all the propaganda about, I mean, there's certain foods that I wouldn't eat under any circumstances. It's just, what's the point? You know, foods that are loaded with sugar, sugar is complete miss director and it seems good, but it's actually very disruptive but you know, we have choices and you



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know, occasionally making an unwise choice just for a bit of fun. I don't see that as a problem. It's what you do wrong every day that wrecks your health.

Dr. Pawluk: It's the straws on the camel's back. The camel's gonna to carry all those straws every day. Right?

Dr. Mumby: Yeah. Aspects of it. Yes. That's another good use of metaphor though. I like that.

Dr. Pawluk: Eventually it's going to have to take some off or it'll fall over. What do you mean by a masked or hidden allergy?

Dr. Mumby: Well, I kinda tried to explain that before. If you're having it often enough, then it doesn't reveal itself. You know, there's always some in your intestines.

Dr. Pawluk: It's hidden among other things as well, right?

Dr. Mumby: Yeah. Well, I mean, hidden in the sense it doesn't necessarily declare itself. You know, a person might say, I wonder if I'm allergic to milk. I know I've drank a glass of milk. Nothing happened. No, I'm not allergic to milk. That cannot work as a test because you've already got milk in your system and all you're doing is adding more milk. There's nothing, you know, what you've got to do is get rid of milk from your system and it will just take one food. But it never works. As I said, that's, you know, the eight nails in the shoe. So doing it one food at a time, very rarely worked.

Dr. Mumby: But you know, you have to give up milk, let your whole body flush of all residues of milk and when the last of its past from your bowel, if milk is causing the symptom, the symptom will go away, which is good news. But then this is challenge testing really is what I'm talking about. Now. When you drink the milk, you will get often an astonishingly severe reaction. This was first discovered by a guy called Herbert Wrinkle. He was a bit before our time. He was a contemporary of Ted Randolph but he was a doctor. You know went through med school and he used to, supplement his income by doing photographic work in the dark room. And he was from a farm in Idaho and his folks would send him eggs. That's all they sent him, eggs, eggs and more eggs, crates full of eggs and eat, you know, 50 or a hundred eggs a week to keep the protein going and have terrible [Inaudible].

Dr. Mumby: Right. And he describes working in the dark room, you know, with his hands in the wet mix and leaning back sort of strings of snot running from his nose to the floor. And that's how bad the [Inaudible] was. And then one day there was a rail strike, no more eggs. And guess what? No more Qatar, it all vanished. And so this is one of those stories, you know, sorry, I just hit my mic. That's one of the stories of the right mind in the right



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place at the right time. He thought, ah, I wonder if I could be allergic to eggs. I know i'll eat a couple of eggs and see what happens. So he ate two eggs and passed out unconscious. So he, you know, he was a very clever man. Put it all together, right? This is, we now understand this.

Dr. Mumby: It's called a mask allergy. You eat the food every day. You can't see any connection between your symptoms and the food, but you clear the food and then challenge it. You get a Savage reaction. It's not always, I mean, I don't want to frighten people, but you know, it can be astonishingly. You know, the person might get a three or four day migraine that has been in bed groaning and crying with the food that they've had every day for the past 20 years, or you know, 30, 29 days out of 30. And they'll ask themselves, how on earth could I be eating that food when it's this bad for me and not know? Well, that's, that's the mechanism. So that's why when we're doing challenge testing as it's called, but you've got to avoid the food and you've got to be strict. This is not like a slimming guide.

Dr. Mumby: You know, you can have a teeny piece of chocolate cake. It won't matter. You'll still lose the patterns. In this case, it won't work because if you don't absolutely clear the wheat, the colon, the sugar, the dairy, the eggs, whatever from your system then you don't get a necessarily, shall I say, reliable response. You might, you know, I mean, if you, eat a couple of eggs and feel really bad, then you've got a message. It's good, your body's told you something. But to be really sure of the message, you've got to make sure it's unmasked first. And one of the things I wrote about in my book was the way animals will look at this, you know, we all know animals, you know, they'll sniff and they'll lick it and think not eating that, you know, they're wise.

Dr. Mumby: So what do humans do? They look it and they eat it anyway and they think, Oh, we should have. Humans are crazy like that. But you know, all the signals are there. If you learn to listen to what your body says, let me give you an example. Another example. If you ask people start asking people what I was going to say, when peeling potatoes, who the hell peels potatoes these days? Anyway, if you've got an innocent housewife who knows her work and she will peel potatoes, sometimes the person will say they sting. It stings my fingers, you know, it really hurts. And you say, well, why are you eating potatoes now I'm thought of that? Well if it's stinging your skin, it's not going to do any good down there is it. So you know you can get simple clues if you just listen and pay attention to what your body's saying.

Dr. Mumby: And by the way, I should bring it back to pain because one of them, one of my famous cases in the sense it was, you know, full front page newspaper spread all over Britain at the time was a girl who had severe arthritis and when we are talking pain, so I should bring it back to the main subject. She was in severe pain and basically faced with life in a



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wheelchair. Husband was told he's going to have to give up work to look after his wife in a wheelchair. She can't walk crippled with arthritis. Long story short, it was potatoes, it was only potatoes. She gave up potatoes, she could walk. All the symptoms went, tossed her walking stick and the way she became famous at the point of climbing a mountain with some cameraman and newspaper journalists and things, she'd beat them to the top and she had her picture taken.

Dr. Mumby: Not not a big mountain. You know, 3000 foot British mountain not at a 14,000 foot American one but you know it was, it was manageable for her. But the point is she was supposed to be in a wheelchair and here she was storming up a hill side and beating the fat over fed and obese, bloated journalists to the top and she never had pain again after that. So it's very crucial to pain if you're in pain that you figure out, could this be one of the causes because I'm willing, I don't know what all the other experts you've got Bill, but I'm willing to take on a bet that it's going to be number one for most of your listeners that are struggling with pain, it's really got to be well worth looking at. I mean, what's the alternative? You know, life of painkillers or endless, endless massaging and endless, you know, colonics and things.

Dr. Mumby: Back to my definition of a cure, which is the symptoms are gone and there isn't any more treatment. You don't need to do anything. Just stay away from the food. And even then, you know, listen, there's good news because if this kind of allergy, we call it a cyclical allergy, right? The fixed allergies, what, like peanuts, you know, you have one peanut and you're dead and 10 years later you still have one peanut and your dad, it never, never changes. But these cyclical allergies as we call them, this is the typical mask allergy. And the more you eat, the worse it gets. But if you stop eating it, the allergy will settle down. So after a couple of years, it could be as little as three months, a few months off the food, then you can eat a little and you won't react at all. So long as you keep it to a certain level, you know, within the threshold I was talking about.

Dr. Mumby: And I like in this really to a fire, you know, you can dampen the fire down to sort of glowing embers and that's, that's fine, that's comfortable. But if you throw fuel on, you know, as you start guzzling the food in large amounts, again, pretty soon it will all blaze up again and you're back where you were. So it's a kind of cyclical comes and goes allergy. But again, it's good news. Meaning if you're careful and you're intelligent about it, you don't have to absolutely strictly avoid the foods for the rest of your life. It's just not required.

Dr. Pawluk: Although I'm wondering whether, like if you do have an immune reaction to a food, I said often the Genesis or food allergies starts with a leaky gut, right? It gets into the gut wall, creates immune complexes then go wherever they want to go. So unless you cure



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the leaky gut so that food never gets back into your body again, and that circumstance you will probably not react. When can you, when does the leaky gut ever heal?

Dr. Mumby: Well, it's a kind of cyclical thing. You know, if you, if you stop inflaming your gut by eating foods that are paralyzing and inflaming your gut, then it will heal. So it's not a leaky gut anymore. And as I said, as long as you're, you know, within sensible margins, you can have a little of the food, you know, occasional ice cream one do any, you know, if it's an anniversary dinner or something special talking and enjoy, but just don't try and eat a quarter of ice cream. It's gonna put you in bed.

Dr. Pawluk: It's volume and repetition. I know we talk about IGG allergies for example, immunoglobulin G allergies are often delayed allergies. You eat the food today and you react three days later.

Dr. Mumby: Yes, yes. And those are the buildup reactions. And the answer to that, as you know, is rotation dieting where you make a deliberate plan where you don't repeat things often because you're going to end up in trouble if you do. But, and remember the key, the key time period is four days. That's about how long unless you're a constipated person, it's about four days to transit your bowel. So if you eat the food once every fifth day, there should be no cumulative effect. And that's not too big a burden to bear is it to be able to stay healthy and well, it's just don't guzzle the food repeatedly and endlessly as we do.

Dr. Pawluk: I think that's a really good piece of advice. Well you go back to paleo man, paleo man was constantly alternating the diet, right?

Dr. Mumby: That's right. Well, even in our lifetime, come on, you know, you and I are both born about the same time when we were kids, foods used to rotate, you know, tomatoes would come on stream in late spring and you could eat them through summer having a wonderful time.

Dr. Mumby: They were gone by fall. Now you can have a tomato every single day of the year from somewhere in earth. They'll ship in tomatoes. So yeah, it's a daily food. Almost everybody has tomatoes on a daily basis. But nature used to force this rotation. You know, you'd have these spring crops, your summer crop, your fall fruits and so on. And it was very good for us to do things that way. And again, nature knows what she's doing. She's got it off. We get out. It's just that humans don't listen and they think they know everything and they're smart. But repetitious eating is the danger. So you, and here's another problem, which is people often don't recognize what they're doing. You know, wheat turns up in bread, cakes, biscuits, pastry, pizza, muffins, pasta, even in whiskey, you know, one of the challenge tests, it was a bit cruel, but I did try on the recommendation of a friend once I put two or three patients on a fat, you know, an



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exclusion and said, now when you suspect wheat say have a double scotch after five days take and it'll put them in bed because it's a severe reaction.

Dr. Mumby: You know, the fair on Randolph used to call alcohol, used to call it jet propelled food allergy. You know, it would just go woosh at you because of course, alcoholic drinks have food ingredients and whiskey notably has grains. And I amuse people by saying to me is analogist there's no difference between a slice of bread and a glass of whiskey. There was the same grains plus yeast very different effects. And one's fun and one's not so fun. But if you think about it, they're essentially the same thing. So that can confuse people as well. They're not realizing how repetitious their food is. It all, colon is even worse of course, cause it's used in manufacturing and it's in just about everything you can think of. Not even as high fructose corn syrup, just as powdered fluff. You know, they like to sell you calories and fluff carbs because it's cheap.

Dr. Mumby: So it turns up in a lot of foods and that's a very good argument for avoiding manufactured food. You know, you want to know exactly what it is you're eating well, make sure you can recognize it on the plate, otherwise don't eat it.

Dr. Pawluk: And that's why we need to be looking at food labels.

Dr. Mumby: Yes, yes, absolutely. Well, then I've got better advice than that, I say don't eat anything with a label on it. I mean, all right, that's being simplistic. You know, they have to put labels on everything, including, you know, packets of apples and packets of strawberries. I understand that. The less labeling you go for, the less likely you are to be tripped up and the less vulnerable to manufacturers. Dishonesty, you know, there's a thing now saying contains no MSG, but if you look at it, you know, it's modified vegetable protein and this, you know, all different forms that we know are glutamates in some form or others.

Dr. Mumby: So avoiding manufactured food is one of the best favors you can do for yourself anyway. But you know, back to my overall message, which is the whole foods organic, healthy whole foods can do it to you if you happen to be allergic or sensitive or hypersensitive to those foods.

Dr. Pawluk: There's a lot of talk these days in conventional medicine about people eating peanuts on a regular basis. A small amount, small dosing.

Dr. Mumby: Yes, yes. That comes and goes as a fashion. Nobody thought of that years ago, but I can fill in a little bit anyway. I mean I don't do what the conventional doctors do and, but I see what they're doing. In my day. We used to do an intradermal kind of testing, not the scratch or prick tests. It was actually evolved by a guy called Carleton Lee from Missouri



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and it meant giving serial dilutions of inelegant until he came to this sort of switch off effect.

Dr. Mumby: Well, it was very interesting actually Carlton Lee notice that sometimes when you give a person a shot, a symptom would come on. You know, I mean I've seen it, like for example, I found a guy who has epilepsy was caused by wheat because I gave him a shot challenge shot of wheat and he's prodromal symptoms of epilepsy came on. He said, Oh well I'm going to have a fit. I'm feeling so we're giving them weaker dilutions and at a certain point it all switches off. So we called that in the neutralizing dose and you can actually use that as a therapy, but people take a drop under the tongue that can give them some shots. But really for kids it's just as simple and simpler. I mean, and just as good to put drops under the tongue just before you eat it. What kind of kill their reaction enough for you to be able to tolerate some of the food anyway.

Dr. Mumby: But you know, we used to have the person take this on a daily basis, so they'd take tiny, tiny doses under the tongue. And of course, you know, it was scoffed out as quackery. But you know, if you look up now, sublingual immunization therapy, SLIT, or SLIT the millions of returns now on the internet. They're all doing it. 30 years ago I was called a fool and a quack, but it worked. So they are now, they've now discovered it works. So they're using it as therapy. Frequent small dosing. Subliminal dosing is one of the best protections you can get against an allergy because it's kind of the mass effect deliberately. You think about it, you're sort of making yourself exposed to peanuts every day or frequently, usually every day, so that when you meet some peanuts, then the reaction will remain a hidden or masked effect so you don't get the symptoms.

Dr. Mumby: So that's the explanation for that. And it's a fantastic therapy, you know what I mean? It's wonderful and that it's not just helps, but it's also a diagnostic. You know, like for example, a kid who had epilepsy, if he ate anything from carrot family, would you believe healthy family foods? No. All of those, you know, the celery, parsley, celeriac, dill. There's a whole family of foods with fronds like the carrot, you know, the greenie fronds at the top. If he ate anything from that family had severe epileptic reactions. If you avoided them completely, you never needed drugs and never had any more foods. So again, there's no, you know, you can't draw hard and fast, you know, these are healthy foods, these are anti inflammatory foods. These are, it's not that simple. We're all different. And in the end, the only thing you can do is ask your body and if you ask it the right way, like I've been describing, your body will usually help out real good.

Dr. Mumby: It'll make you really ill, you won't be in any doubt, don't want to eat that again. And that's how I came to write my book. In fact, the other self help book "diet wise" and I think, you know, people if they want to know more, should read it. Basically, I can't, I'm not just plugging it for sales, but I know of no other book of that power and quality and



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capability because it's, you know, based on 40 years clinical experience. And I was taught by the very best Richard Mackarness, Ted Randolph and you know, Bill, what Bill Cruz was more contemporary than a mentor. We learned our stuff in those days. And I learned it from patients. Like I was saying, you just listen to what the patients are saying. They will tell you time and time. I can't tell you about the number of people that walked into my office, a moment of bringing in a kid and said he was fine until he had his measles vaccine.

Dr. Mumby: The next day he looked a bit funny and from then on he went down and now he can't talk. By the time you've heard that 15 or 20 times, you know, something is going on. And I was the first person actually to point this connection out in writing back in 1983 it just recurred and recurred. How these measles vaccine, he relaxed, they used to call it in those days they called it disintegrative psychosis, which is a pretty horrible term as you can imagine. But in a sense it's not wrong. You know, the child just simply collapsed psychologically and intellectually into somebody completely unresponsive and antisocial, who just of didn't get it as it were in life. So disintegrative psychosis, we don't use that cruel term anymore we use the broader term as you know, autism spectrum disorder. But those who are at the far end are in big trouble.

Dr. Mumby: It's a very, very sad condition and of course it's often it's, it's messing with the immune system, isn't it? Even, you know, that we, you know, we dump on the immune system with these vaccines and then wonder why the kids now got asthma and eczema and all these allergic type conditions. Well, you know, that's why if you disturb the immune system, you're likely to end up with allergies. So a lot of these kids did really well. I mean, you know, the kids. I was listening to the very earliest examples that anyone I think was finding and noticing almost all did well. You know, they changed their diet. I mean I had one Irish part who was only four years old when I saw it, but he could get extremely violent. He was so strong as a four year. He literally, and the parents begged me to believe it was true that he ripped a door off its hinges and they had to literally screw down some of the furniture because he would just smash it up.

Dr. Mumby: He was so strong when he got into, you know, a brain inflammatory rage. In his case, wheat and milk were the two main ones and he ended up being the lineup. He went to a normal school. Eventually it was, you know, way behind some of the other kids, but he was capable of normal schooling. So he made a dramatic recovery and lots of these kids do. Again, it's back to that on burdening and the barrel that we were talking about. You know, if you just take something out of this barrel so that it doesn't overflow anymore. And that could be chemicals, it could be stealth viruses and you know, parasites and pathogens as you know, all of these potential overload factors. If you just thin them out one by one, so there isn't much left pouring into the barrel, then there isn't any overflow from the barrel.



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Dr. Pawluk: Well, you mentioned sugar. Some sugar is bad because everybody talks about this, that it's inflammatory.

Dr. Mumby: Yes, they are highly inflammatory stuff and it's the basis of really all heart disease, diabetes, obesity, diabetes, obesity. There's no question of its toxic potential and the food industry knows that because they worked hard to cover it up, to hide the papers that they know prove that it's not good for us. And you know, you've got to wonder where it's all gonna end. But you know, everyone has really got to give up sugar to be healthy. You've got to give up sugar.

Dr. Pawluk: And when I test for beet sugar cane sugar frequently is an element in the testing, right?

Dr. Mumby: Well cane sugars in the grass family. It's in the grains family, the graminacea. So it's related to wheat and corn and beet sugar of course is in a different family.

Dr. Mumby: It's a root and yeah, I found what you found. Sometimes a kid will be allergic to one sugar and not the others. So you can make some recommendations, but still the best recommendation is done, eat sweetened foods. Listen, if you stop all sugar and sweetening after a couple of weeks, a carrot tastes really sweet. Carrot is loaded with sugar. It tastes like candy. Once you've stopped sugaring your foods and eating cookies and chocolates and things. So it's just really, and it's the same answer I suppose, to stevia and artificial sweeteners. Why would you do that? You know, just train your palette not to demand sweetness anymore. It's so get used to it. You know, within a couple of weeks you will find if you take a spoon of sugar, you would go there. You know, what did you use to love it? It's very easy to change your palette and it's much healthier than using sugar substitutes.

Dr. Pawluk: Well, the food have clearly engineered us to be addicted to these foods, right? That includes salt and sugar.

Dr. Mumby: There's, I saw paper once where, you know, the same reward centers in the brain as morphine and opioid receptors are the sugar receptors. So it's exactly like having a morphine hit. I mean, you don't go off your head like with morphine, but the point is it's, it's attacking and locking onto the same reward centers. We all know how addicted morphine and heroin can be. So sugar is highly addictive, very, very addictive. And they know that. That's why they put, they put it in hams in bread, yogurt, everything they can squeeze sugar in. They'll put it in so that people think, Oh, this tastes wow this is very delicious. And it's really not delicious. It's just sugar.



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- Dr. Mumby: And we could possibly have withdrawal reactions to ship from sugar, just like we do with the opioids.
- Dr. Mumby: Yes, some people do. So maybe they find it very tough going for a time, but it's still, it's gotta be done.
- Dr. Pawluk: Well, now sugar is thought to be the problem because it's inflammatory. So we want to talk about this inflammatory versus the high inflammatory versus low inflammatory diets?
- Dr. Mumby: Yeah, well, I mean like I've been saying all through for any person, any food can be inflammatory, but there are standard foods that are bad. You know, the chances are it's going to be trouble and wheat and corn and dairy are the top three foods. Sugar is the top additive without any question an MSG probably select those five if you like. They're the main core of the problem. If you eat like a Hunter gatherer, you probably won't do so bad so, but the ones that you react to, ultimately it's all going to be inflammation, isn't it? It's an immune response. Your immune system is going to jump on it and try and quench it and dampen it down. And it's that attacking phenomenon we call inflammation is the problem. If you get a sore throat and a strep throat, your body will go bring inflammation to bear on the problem.
- Dr. Mumby: And within a week it's gone. You know, that's what's supposed to happen. But what if somebody keeps reinoculating in this strep every week. So then as you cleared it up, somebody gives you the strep back. So you keep on and on and on taking the treatment. I mean, you can see the silliness of that, but that's what we're doing with inflammatory foods. You know, you add this inflammatory sugar every single day, so every day your body's got to try and tackle it and disable it, which we call inflammation. Inflammation is a good mechanism, except when it continues, then it becomes very, very destructive. It's the basis of organ damage and aging and all those bad things, you know?
- Dr. Pawluk: Now an inflammatory diet is, or an anti inflammatory diet is not necessarily an alkaline diet.
- Dr. Mumby: No. Well, listen, I got to tell you, I don't do this alkaline thing Bill if you do, you teach it and just leave me out of it. But I'll tell you one of the problems I've got, and I don't know if you're familiar with the work of Emmanuel Revici, but he was a genius. And you know, without going too deeply into all his discoveries, although I think it was Einstein said he deserves about seven Nobel prizes, you know, he completely reinvented the periodic table. So it was like he's a genius. But what he found was that the people with cancer fall into two hearts without getting technical. If you go alkaline, one half will die rapidly and



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the other half will help him recover. But you don't know which half you're in. You've got to figure out, you know, there are some tests, you do urine tests in the afternoon and in the early mornings, but just to randomly alkalize as if that's the solution to everybody's problem could be very dangerous.

Dr. Mumby: It could get you into a lot of trouble and it can certainly kill you quickly. So I don't teach that at all. But you know, where it started for me was back in the 70s where we noticed that whenever anyone had a food allergic reaction, they would go acid. You could test their saliva and test their urine and watch them go acids. So we asked them to take alkaline salts. That was a mixture of sodium bicarb and potassium bicarb and it would often, you know, have the recovery time. So just to give them an alkaline, it would recover from an allergic reaction. The acidity was caused by the allergic reaction. So if you didn't have the food, you didn't need the alkaline. So I don't teach that as a model basically. And as I said, there are certainly hazards. If you're trying to alkalize to beat cancer, you'd better know a lot more about it than you.

Dr. Mumby: You're being told by some of these websites where they just said, eat alkaline for one thing. What is an alkaline food? You know as well as I do the most foods, they've got acid alkaline, you know, it is inside the molecules. You can have an option in a hydroxyl and acid, all on the same molecule it's difficult to know what foods is when they get around that by saying, ah, well it's when it's burnt and it's down to the Ash stage. If that's alkaline, it's good. If that's acid, it's bad. It isn't that simple. It just isn't. So I don't feel comfortable answering much on that score beyond what I've said.

Dr. Pawluk: And also my perspective as well is that the kidneys are, you know, stabilizes the pH very rapidly and constantly.

Dr. Mumby: Yeah, it's gotta be within such an arrow band, otherwise you die. So what are you doing? If you alkalize, you're stressing your kidneys, you can after workout to get it back to where it was. And one of the dumbest things of all is all the food goes through your stomach, which is about minus two acidity, pH or two acidity. It's really, you know, burn holes in the carpet. If you were to just suck out stomach acid and drop it on the carpet, you burn a hole, that's how acid it is. So what does that mean when your food has to pass through that powerfully acid environment, but then it's an alkaline food. It's good for you. And the whole thing, you know, to me doesn't, it just doesn't stack up basically.

Dr. Pawluk: Well, and you need that acidity in order to be able to kill the bacteria in your food, new viruses, bacteria, fungi, whatever. To leach it to leach out the minerals from it to break it down into smaller components that the small bowel can handle. Right? Make it alkaline. Make the stomach alkaline is odd.



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- Dr. Mumby: And all the good. Yeah. And I tell you, it was one of the things I spotted years ago. What's one of the most famous health remedies that you can possibly think of or anybody in his grandmother? It's a cider vinegar, which is acid, but everybody knows cider vinegar is a wonderful cures Anything from boldness to impotence. I'm kidding. But you know what I mean? Cider vinegar has got a famous reputation and rightly so because it does affect the pH of your interior but you know, it's acid. So on that illogical alkaline theory, it shouldn't do any good at all, should harm you. And in fact it's very effective remedy. So the whole thing is such a model. I would never advise anyone to just alkalize and say, figure out what foods are good for you, which aren't.
- Dr. Pawluk: Well, in a sense, the acid in your stomach is doing what you said about cooking. Yes. Breaking that food down so that it's not going to harm you anymore.
- Dr. Mumby: Yeah, yeah. Well it's, I circle around this constantly, Bill, it's back to nature, knows what she's doing. Don't fool around, just leave her to get on with the job. You know, whether a food's acid or alkaline, it's irrelevant. If you eat it and you get a migraine, you shouldn't be eating it. I don't care what kind of food it is or what pH either at the beginning or at the end, it's just don't eat and that's, you know, that's my model for healthy diet and healthy nutrition.
- Dr. Pawluk: That old ad, and I don't know if it's that old, but the ad used to say lead, follow or get out of the way. And in terms of the food, you have to know when to lead, when to follow and when to get out of the way.
- Dr. Mumby: Exactly. Yes. That would be good Allergists motto as well. Yeah. Great. Doctors motto anyway.
- Dr. Mumby: Let's not harm. Yes. Any final thoughts? Any final suggestions or recommendations for resources?
- Dr. Mumby: I do hope that the folks will take what I'm saying seriously and not just have a chuckle with me, you know, but realize that foods potentially can be very harmful and the only way you're going to find out is take a look, you know, you're not going to find that by just reading a book or reading a website. Yeah, yeah. Very interesting. You're only gonna find out by experimenting and challenging yourself and seeing what your body likes and it's different to everybody else as a body do. I really strongly urge people to do it and if I can have a plug, my book just one time though, but I called it. "diet wise", you know, it tells you what to do. It's a self help book specifically and you can get it at dietwisebook.com on my main website. It's all free. The thousands of pages of you know, free resources. It's alternative-drcom. So it's [www dot alternative dash](http://www.alternative-dash.com) that's hyphen



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Thousands of pounds. I've lost track of how many pages

Dr. Pawluk: After 50 plus years of knowledge and wisdom.

Dr. Mumby: I wouldn't say I was knowledgeable as I am now, but I'll go for 40 years with, I was an idiot in my younger days.

Dr. Pawluk: Knows more than most other people.

New Speaker: I think. it was George Bernard Shaw or it might've, no, it was George Bernard Shaw said youth is wasted on the young and it's such a waste.

Dr. Pawluk: That's true. We want to live longer, so we have to get rid of our food allergies so we can live longer and stay healthier.

Dr. Mumby: One of the best anti agings I know. Eat right. You know,

Dr. Pawluk: You're, you used to be on a board called what doctors don't tell you.

Dr. Mumby: Yes, yes. Lynne McTaggart sir, a friend of mine, I treated her daughter once many years ago. She's gone stratospheric now, of course in the subconsciousness sphere, but she does a lovely job with that magazine. And what doctors don't tell you. And I might have been on the side. Well, I'm not sure if they're not asking me for any scientific advice for a number of years now. So, I'm not sure if I'm still on the board, but I certainly was.

Dr. Pawluk: So that's a magazine. I just looked at it before I came on the air here with you and that's, it looks like a very interesting magazine.

Dr. Mumby: It is fascinating the stuff that they come up with. Yes. And she's been doing that for, you know, 20 odd years now. She does it with her husband, his name Bill, I think. Anyway, they're, they're a great team, you know, a great publishing team.

Dr. Pawluk: So that may be another resource to look at. And I like these kinds of resources because they're British.

Dr. Mumby: I think it's I got to be careful how I say this, but I think he couldn't rely on the trustworthy initially British more than an American kind of bullshit if you like. Sorry. That's the first time. Kind of bluff bluff people and baloney them and sort of try and, you know, get them to accept what you're saying regardless of the truth. Whereas in Britain,



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we liked to try and print it and say as we see it anyway, we may be wrong, but we don't deliberately off things like the pharmaceutical industry does here.

- Dr. Pawluk: Well it's a different perspective. So that's always valuable to do and it's basically still alternative medicine. And again, it give you a sort of a British perspective on alternative medicine. Yes, we're proud of that. I'm naturalized American nerve, but you know, I'm so glad to have come up.
- Dr. Mumby: Through the ranks in Britain and made my mark. I think I, you know, I didn't single handedly but made it played a major part in altering people's perceptions in the 70s and 80s about food allergy and what it could do. You know, I do television, I was on television so many times. I lost count with fascinating stories, you know, wonderful healings and cures almost miraculous. You know, like a kid who had muscular dystrophy, you know, the Duchenne Muscular, it affects boys and by the time they're 12 are usually dead, certainly dead by the time they're 15 and the first sign of weakness is they can't walk upstairs. They start pushing themselves up on their hands. I found a kid loaded with food allergies, talking about the food allergies, and he recovered. Now that's not possible except that it did happen. It did. So that was my beginnings of learning about epigenetics. You know that what you do will switch genes on or off. It doesn't matter. You've got a horrible gene. If you do the right things, you can turn off the bad genes and turn on good genes. That's another whole interview in itself. Better stop there.
- Dr. Pawluk: With his Duchenne muscular dystrophy, you actually were able to reverse the muscular dystrophy just by doing the food out.
- Dr. Mumby: Yes. And it's all documentary. You know, he was videoed running alongside his friend's bicycle and he went to Edinburgh, the capital of Scotland, where there's a big Memorial. There were 360 odd steps. I forget exactly how many, but he climbed to the top and got a certificate. Now he came to me when he couldn't even get up three stairs without using his hands. So, pretty dramatic, you know, that kind of thing. You can't argue with, you know, it's not a saying, well it's just, you know, they believed it out them. So that's good. You can't fudge it like that. It was a dramatic change.
- Dr. Pawluk: So the end of this story, the end of this time that we spent together is that we need to acknowledge that food beyond the traditional concepts of inflammation and so on. Food allergy is a major cause of problems for people. And maybe some of your aches and pains are not, especially if you didn't have a fall or a bad injury, if maybe your aches and pains may have something to do with the food that you're eating from, not from an information perspective. Well that's part of it, but from the fact that it's allergy. But I want to come back to this last point. There's this argument because when people go to their allergy doctors or they go to their conventional doctors who do IGE testing, they're



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told you don't have an allergy to food. So people define allergy in the medical community very narrowly to IGE testing. And if it's not IGE, then it doesn't exist.

Dr. Mumby: Right. Well, that's actually ultimately baloney. The person that first defined allergy was a guy called Clemens von Pirquet. He was a Swiss pediatrician and he said, it's an acquired, altered, specific reaction and that's all, that's all he said it was. He didn't know about the immune system. He never heard of antibodies, neither did anybody else at that time. But acquired means, you know, you're not necessarily born with it. It comes on you. It's specific. So you can be allergic tomatoes but not bananas and so on and altered from the rest of the population. You know, you get asthma. If you eat tomatoes, nobody else does, or very few other people would have the same reaction. That's all he said. Now, what came to light in the decades after that, and I mean decades after, was the immune system. And the fact that that plays a part, but they take, they turn that around to say, unless it has an immune component, it can't be an allergy to which I say baloney, but I wouldn't even bother getting involved in the academic arguments.

Dr. Mumby: You know, all the person needs to know is will this food suit my body or not? The actual mechanism by which he hurts you is in a sense irrelevant. It could even be just toxicity, as I said, some foods that you as poisonous, you know, we know the obvious ones like hemlock, you know, psilocybin mushrooms, and if you have too much, you're going to hurt yourself. We know that. But almost all foods have components in them that are potentially toxic to humans. So it's back to the same story. Idiosyncratic. You can't generalize and say, you must do this. You can't do that. These are the problems. These are safe. It doesn't pan out that way. So if I've gotten that message over, I feel it's individual. Yeah. And it's been a very enjoyable discussion. I'm pretty pleased to have an airing like this.

Dr. Pawluk: Thank you. I appreciate you airing. We're glad to have you on air, sharing your wisdom and all those years again of learning and it never stopped.

Dr. Mumby: No, no. Lifelong learning. Yeah. Yeah.

Dr. Pawluk: So this will be the end today for this particular discussion. I hope you enjoyed it. We'll pick up on Dr. Scott Mumby's information on his website and his diet wise book.

Dr. Pawluk: Enjoy the rest of your day, everybody.

Dr. Mumby: Thanks for having me. Bill.



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