

THE WORLD'S LEADING ENTREPRENEURS AND PROFESSIONALS
ANSWER THE **BIG QUESTIONS** TO HELP YOU IN
HEALTH, WEALTH, AND SUCCESS TODAY!

THE **BIG** QUESTION



JOHN PARKS TROWBRIDGE M.D. AND LARRY KING
AND OTHER LEADING ENTREPRENEURS AND PROFESSIONALS FROM AROUND THE WORLD

THE BIG QUESTION

*Ask the right questions and the
answers will always reveal themselves.*

~ Oprah Winfrey

You have to be quick to beat Larry King to the punch with a question. His life and livelihood has been based on questions. He worked his way up as an unknown quantity from Brooklyn, NY to become one of the best-known interviewers of high-profile public figures in the world. He does not typically ask complex questions, but instead, he asks thoughtful and straightforward questions which reveal information that would be interesting and meaningful to his audience. His coverage of the media over the years has included radio, newspapers and TV.

Born to immigrant parents as Lawrence Leibel Harvey Zeiger, he started his media career with the stage name, Larry King. His story of working his way up the ladder of success is a classic one. He harnessed his passion and his needs to a workhorse mentality and overcame numerous obstacles on the way. And speaking of questions, he is joined in this book by a variety of other Celebrity Experts® who have climbed the ladder of achievement. They also have asked their own questions – and found the answers in order to accomplish their own goals.

Asking questions is an art that is learned from an early age to help us get what we want. As we get older, our questions become more difficult to answer and our goals harder to achieve. In order to succeed, we invariably find that our fastest solutions come from the guidance we get from those, like the Celebrity Experts® in this book who have already been there, by asking them the right questions. In your case, what is The Big Question?

*I love doing what I do. I love asking questions.
I love being in the mix.*

~ Larry King

CHAPTER 3

THE INTERVIEW THAT, SADLY, NEVER WAS

BY JOHN PARKS TROWBRIDGE M.D., FACAM

WHAT I ENVISION COULD HAVE BEEN MY INTERVIEW WITH LARRY KING:

Lights [**ON**], hot and bright.

Microphone poised.

Host dapper as always. **“Five” ... “four” ... “three” ...**

(two fingers) ... (one finger, pointing) ... [**ON THE AIR**]

LK: We're here in Houston tonight as the future of health care in America again takes center stage. Our guest is a medical specialist who says that just six words are key to helping his patients recover and live a better life. What are these six “magic” words?

JPT: Larry, the first three words are simply, “I hear you.” Regrettably, some doctors are too busy typing into their electronic record or scribbling chart notes to look up ... much less really listen ... remember, the clock *is* ticking. The next three words are critical to discover what's going on and why: “And I understand.” People crave to have their story honestly heard, especially when they're hurting and often scared.

LK: What started your journey on what some would say is a road less traveled, to develop your unique abilities as a doctor?

JPT: Since the 4th grade, I wanted to become a doctor. I was thrilled to

learn how the body works, to help folks recover rather than suffer with illness and injury. My experiences with usual medications and operations as well as shortcomings in diagnosis and treatment have been downright dismal. Doctors are supposed to be highly trained in critical thinking – *what happened?* Patients are so trusting ... but when they finally come to me, my question is simple: “How’s *that* working for you?” Now I’m seeing *younger* people *sicker* than ever before.

LK: Strong words, since patients often feel that their doctors are doing the very best. What led you to different conclusions?

JPT: You know, Larry, **prescription** drugs are “stoppers” inside. They don’t have *any* “side effects,” they simply do *whatever* they do inside you. What you *don’t* like or want, we *call* those “side effects” – and often we have *another* drug to reduce discomforts from the first one ... and then another. That just didn’t fit and still doesn’t. Today, prescription sales are skyrocketing and hospital beds are full and generating horrendous bills. I’m all *for* people reading the detailed informed consent brochures from your pharmacist and checking with “Dr. Google” – especially websites like *MedicineNet.com*. Alternative approaches can be incredibly safe and effective. I recall President Reagan’s poignant wisdom, “Trust, but verify” – that applies to our doctoring, too.

If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier. Here’s an easy example. Everyone is astonished at the exploding national crisis called “the opioid epidemic.” In nearly *half* of the 33-plus thousand Americans who **die** each year from narcotics, their breathing *stops* ... from drugs *refilled* by doctors who haven’t learned how to fix pains, naturally, *without* drugs or surgery, just as I have done for almost *30 years*. I was startled to find that the CDC says 1 in every 550 patients who is *prescribed* narcotic pain pills ends up **dead** *from that treatment* within 3 years. Or how about the massive increases in depression and anxiety and even suicides of people on those drugs? Drugs are rarely the answer for many medical illnesses.

LK: No wonder you consider *drugs* to be “stoppers.”

JPT: Well, Larry, we have *anti*-histamines, *anti*-acids, *anti*-inflammatories, *anti*-pain drugs and so on. Pretty soon you question ...

an “*anti*”-doctor? But as an M.D., our training *is against* disease – that’s what “*allopathic*” means. We aren’t really taught the science behind restoring health. I stumbled onto this different path rather unsuspectingly in my first year of practice, when the new drug I prescribed for a man in his mid-50s led to his death. A few months after enjoying dramatic reduction of his arthritis pains, he bled to death in front of me. In the ICU. We couldn’t pump blood in fast enough to get him to surgery to close the gushing ulcer caused by this seemingly “successful” anti-inflammatory drug. A known side effect – but still, my depression was profound.

LK: Certainly you recognize the benefits of many scientific advances that can help more people with better drugs and safer operations?

JPT: Of course I welcome valuable discoveries. **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** Why resort to drugs when nutritional supplements and dietary changes might reverse your illness changes, restore normal functions, even help you heal faster when an operation is unavoidable?

LK: So you’re not *against* newer drugs or better operations?

JPT: Gosh, *no*, not at all! I *am* against people *not knowing* the risks with FDA-approved arthritis drugs that kill with heart attacks or fatal bleeding; same with acid-blocking heartburn drugs that contribute to heart disease, dementia, kidney failure, and osteoporosis.

I’m at a loss for words when a late-60s gentleman trustingly took a “statin” anti-cholesterol drug (*elsewhere!*) – but it quickly melted his muscles, destroying his comfort and daily strength. Or the mid-40s woman who, rather than going into the hospital or having home nurses deliver a needed in-the-vein drug, insisted on a convenient oral antibiotic that created misery by melting the support tissues in her joints and blood vessels. I feel trapped along *with* them when the chemical damage from such drugs *cannot* be easily reversed. So I’m excited to promote newer treatments that help *avoid* these problems.

LK: You’ve said that doing *nothing* can be harmful, that it really is “doing *something*.” What exactly do you mean?

JPT: Carefully applying the “tincture of time,” so-called “watchful waiting,” *often* is a good idea, to let the body repair itself. **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** A great example of not standing up and speaking out for patients involves chelation therapy. That’s a treatment using medications approved by the FDA for *over 60 years* for removing toxic heavy metals. Common poisons like lead and mercury were linked to heart disease years ago. *Now* a zillion other illnesses that steal comfort and capability are related to toxic exposures from across our polluted planet.

LK: Seriously poisoned in our daily lives, that’s got to be an eye-opener for many people.

JPT: Absolutely! Just consider heart attack reduction *proven* in a major study that a Yale cardiologist – Dr. Krumholz – called, in a *Forbes* magazine article, “inconvenient evidence.” *He’s like me*, frustrated that we *supposedly* “live in a world of evidence-based medicine.” Yet, the medical community has ignored any prospect that chelation could have any *verified* value in treating heart disease. Dr. Norman Clarke in Detroit – *in 1955!* – watched in *amazement* as chelation for lead poisoning in workers assembling car batteries made unexpected, dramatic reductions in their angina chest pains, shortness of breath and leg pains. Even their EKG heart tracings got much better.

If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier. How about my mid-50s public utilities worker whose leg ulcers wouldn’t heal, forcing him to retire early? He boasts now that chelation saved his life ... and years later, he works harder than ever before. We see that from reducing toxic metals and lots more. I find it’s often true that “You’re always ‘*down on*’ what you’re not ‘*up on*.’”

LK: I certainly understand *that*, but don’t you feel that most of us are reluctant to believe that our doctors are *not* aware of newer treatments to help with deadly diseases?

JPT: You know, Larry, history is loaded with inconvenient truths, fake explanations like the earth is flat, or the earth is the center of the solar system, even the force of gravity itself. To be sure that patients get more

modern treatment, we now have so-called “standards of care” in medical practice. Rather than guiding physicians to better practices, they can lock current approaches *in concrete* and surprisingly *resist* unexpected advances, especially where expensive drugs aren’t involved. Often patients discover exciting treatments by word-of-mouth – or by watching interviews such as this – and their curiosity is *rewarded 10-fold!*

LK: You know that I was a heavy smoker and had a heart attack and later heart bypass surgery. Are you saying that my doctors maybe didn’t tell me about *all* my treatment options?

JPT: Gosh, I would *hope* they did. I remember your interview with Bill Clinton, each discussing your own bypass operation. You know, President Eisenhower was a four-pack-a-day smoker. He would have had bypass after his 1955 heart attack, but that wasn’t *first* performed until nine years *later* by my friend Jimmy Howell, who became a pre-eminent surgeon at the Texas Medical Center in Houston. He encouraged patients to continue their chelation treatments.

For many in your audience, this sounds “new” but it is a hidden jewel from the *past*. The incredible value of chelation was just being discovered in the 1950s. Today, about 800,000 Americans die each year from heart disease. Would you believe that over 100 people will have a heart attack during our one-hour interview? The popular media glowingly reports on drugs and surgery but rarely any headlines on proven, successful solutions that are “outside the box.”

LK: You’re convinced that these omissions shorten people’s lives or impair their health?

JPT: **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** What about my late-60s patient whose first blood sugar was over 500 – *scared me*, since over 250 is really high! Some folks are stubborn, but now his sugars run about 120 to 170, not great but better. Here’s some encouraging news: at the American Heart Association meeting in 2012, results of the double-blind NIH trial with over 1,700 patients showed chelation reduced “heart events” by almost 20 per cent over five years, and that’s in people who had *already* suffered a first heart attack. Recovery in **diabetics** was so much better – *about a 40 per cent reduction!* – so now

the NIH has started a \$37 million study *only* for adults with high sugar problems. Many folks don't stop to realize that *they* can suffer earlier, more devastating, and more deadly consequences: strokes, losing toes and legs and eyesight and kidneys, as well as heart attacks. Sadly, the media has been ... *silent*.

LK: Those reports you're sharing are encouraging for millions of people who want to preserve their comfort and capability and to live independently for years to come.

JPT: You are so right! My job is *not* to whip out my **Rx** pad when I walk into the room. Larry, a doctor's choice is to "solve it" or "salve it" – or as I say, "Find it *now* – Fix it *right!*" ... **otherwise**, you get to watch patients decline as we "slap on" more drugs and operations. I *must* produce better results or they should go looking elsewhere. My friends Lin and Lin Tan in Taiwan reported in 2003 that *non-diabetic* kidney failure responded very well to chelation therapy – diabetics do great, too. How many kidney doctors offer **that**, long *before* dialysis costing \$8,000+ a *month*? We are paying the bills through Medicare and skyrocketing insurance premiums.

LK: Everyone understands rising costs only too well. Are your treatments more cost-effective?

JPT: Larry, the most expensive care you can get are treatments that *don't* work. When folks say, "But my insurance will pay for regular care," they need to remember that, if it doesn't reverse their disease, then they will pay for it with their comfort and even with their life. My new book, ***Second Chance ... for those who survived their first heart attack and those who want to***, explains these ideas in easy to understand ways.

When we talk "raw dollars," *sensible* care can be much more affordable. **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** Here's a costly example: an 87-year-old man was recovering from dramatic aorta-repair surgery for several *months* in a skilled nursing facility. Thanks to chelation treatments, he had been maintained for years on an oral diabetic drug *without* any problems. The skilled-care nurses did blood sugar testing four times a day and gave insulin shots. His facility **doctor** refused to restart the oral medication despite my insistence. The extra

testing and shots *doubled* the daily charges to Medicare and insurance. When he recovered enough to go home, his former drug was restarted and he did just fine. *That* was my Dad.

LK: Do you also have effective ideas about *preventing* heart attacks?

JPT: Great question, because there are *several* things folks can do. Let's just look at the whole cholesterol debacle. Fred Kummerow, a renowned scientist who spent 70 years researching blockage disease, published a wonderful book when *he* was 100 – titled, ***Cholesterol Is Not the Culprit***. Medical studies show cholesterol drugs can be dangerous, and *half* the people arriving at the ER with a heart attack have ***normal*** blood cholesterol levels *without any drugs!* Professor Linus Pauling showed in the early 1990s that people can dramatically reduce their risk factors. His research with Dr. Matthias Rath discovered that artery injuries and blockages result from vitamin C deficiency – that's really a "*scurvy*" problem inside, because humans don't make vitamin C. Here's even more good news: a specific blood *fat* – "L – p – little a" – can make a flexible seal over the blood vessel damage. Your body can marshal this very effective patch to help heal the smoldering damage from inadequate supplementation with vitamin C. Unfortunately, modern medical treatment seeks to drive *down* needed protection from higher levels of Lp(a) along with total cholesterol.

LK: Many viewers will be surprised hearing those facts.

JPT: Right. Let's get real, Larry. Only 1 in 5 or 6 patients will have a longer life with bypass operations. *Those* folks have serious blockages, on the left side, easily seen with a quick HeartScan, no needles, no dye. Three major studies reported in the early 1980s and Harvard research in the early 1990s showed that ***drug*** treatments provided results at least as good or even *better* than ***surgery***. You know, our medications and nutritional supplements *now* are much more powerful and better understood. *Now* we can test for key "inflammation markers" that give a crystal ball glimpse into the future, when doctors pay attention to this "oxidation" or "rusting" or "*free radical*" chemistry that creates our diseases.

LK: You're saying that scientific research has advanced dramatically in recent decades?

JPT: Beyond what people would believe, because they simply haven't heard about it. **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** Here's some examples: very high-dose fish oils have reversed comas in accident victims; high-dose vitamin C treatments brought a New Zealand rancher back to life as he was dying due to pneumonia from swine flu; combinations of minerals and vitamins have reversed abnormal heart EKG rhythms, like atrial fibrillation, in many patients. Routinely, patients complaining of chest tightness or even worrisome pains have been surprised at finding relief within days when taking specific supplements and using prescribed oxygen during sleep. The future is bright, even with so-called "aging" changes.

LK: You have claimed that "aging is a disease happening one day at a time," that wearing out is actually slowly developing diseases. What led you to this conclusion?

JPT: Like the advertisement for Ginsu knives: "But wait ... *there's more.*" "Wearing out" in "aging" often means that your *repair* processes are slowing down, so you gradually "fail." I can't count the number of men and women in their 60s, even 70s, who boast at being more energetic and stronger when they receive effective natural treatments.

Many diseases develop silently over several years. I was fascinated when Lady Gaga announced on your show her concerns with lupus. Autoimmune diseases are a favorite of mine to treat. You know, Larry, I started graduate courses in immunology in 1968 – so finding true solutions, safe solutions, for *many* diseases has been very fulfilling! **If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** All sorts of autoimmune illnesses can be traced to *The Yeast Syndrome* – so there's no need to resort to the expensive and even risky new drugs advertised on TV, these problems *can* disappear.

LK: Now, that's the title of your best-selling Bantam book, right? Some claim it is still the most complete one on the topic.

JPT: Thank you! At least a third of your viewers suffer from problems that can be improved by treating for yeast overgrowth in the gut – avoid sugars and starches – eat fresh food, especially vegetables – and cut out

all fermented items, including alcohol and vinegar and such. The book goes into exquisite detail, but what I enjoy most are the endless stories of patients who had suffered for years and then found relief ... actually more than relief, often *full* recovery!

In too many stories to share today, their symptoms involved *every* system in the body, not just lingering vaginitis or athlete's foot or pestering skin conditions but major illness problems. I mean, like joint pains, continuous ulcers or reflux heartburn, bloating and irritable bowel diarrhea-and-constipation, diverticulitis, recurrent kidney or bladder infections, frequent headaches, sinusitis and bronchitis, moodiness, period problems for women, fatigue, and on and on. Autoimmune conditions, like lupus, rheumatoid arthritis, Crohn's or ulcerative colitis, these and dozens of others *often* improve with treating *The Yeast Syndrome*. The "syndrome" is a broad collection of (**any!**) *different* discomforts caused by yeast poisons percolating 24/7 from your gut into all systems of your body.

LK: So maybe I'm missing something here – How do you relate all these illness and aging problems to just one thing, to yeast?

JPT: You see, Larry, "*Candida*" yeast normally found in our gut can *overgrow*, out of balance, thanks to antibiotics and hormones and fake foods and stresses. They put out toxins, *literally poisons*, aimed at derailing *all* of our chemical processes. Thyroid and insulin then female and male hormones, minerals and vitamins, fatty acids and amino acids, nerve transmitters, basically *everything* needed to run our metabolism. *All* of these can get crippled, especially our immune defense system, then *all* essential systems start to break down. Some slowly, some faster. We go to "organ-system" doctors rather than to "look-for-the-cause" doctors. We hop on the medical-merry-go-round and get strung out on more and more medications for our puzzling "illnesses" ... *is that aging? Not so! That's unrecognized disease!*

Forgive me, I get kind of excited about the results patients get. **If they only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier.** There are three things certain in life: Death, Taxes and *Fungus!* Think of it like this, Larry: there are three great kingdoms. Plants – they use sunlight to make energy; animals – they eat plants to get the energy or eat other animals who ate the plants; and **fungus** – that includes molds and mildew, yeast and

fungus, like mushrooms and more – *they* eat the other *two* kingdoms, plants and animals. Nothing personal, “just business,” they’ve got to eat to survive and they’re committed to making a “Happy Meal” out of *each* one of us! My new book, ***Sick and Tired?***, gives more recent health-recovery details.

LK: You report improvements with so many conditions – do *all* of us suffer from some sort of “yeast” illness?

JPT: We talked about autoimmune illnesses, and there’s a ton. But Larry, I’ve treated all sorts of problems with unexpected improvements. How about treating elevated PSA prostate levels for years with anti-fungus drugs ... and watching the numbers come down dramatically. That actually leads me to one of my exciting research topics, which I call “Deep Blood Fungus.”

I see our time is winding down, so maybe we can talk another time about how this infection relates to severe skin conditions? Leukemia and the opposite, low blood counts called leukopenia, all sorts of immune deficiencies? Breast and colon and other cancers? Worsening diabetes? And yes, lupus, rheumatoid arthritis and other autoimmune diseases. Even *MS* and *ALS*. We’re finding this in *plaque*, the blockage forming in heart and other arteries. We’re busy finding how these fungi destroy our comfort and capability in life. I’m creating a series of videos, articles, and brochures to help patients understand newer ways they could regain their health and enjoy their life, no longer resigned to suffering and dying early.

LK: That sounds like a “tiger by the tail,” doctor. You’re clearly excited.

JPT: Larry, I spent the first half of my career learning to ask good questions. Now, thankfully, I’m learning to find better answers! I mean, you can’t explain the fascination and delight to discover help for those with unexplained illness. I’m launching a series called the **DOUBT YOUR DOCTOR™** books by alternative specialists, to coach patients on questions *they* need to ask and tests and treatments *they* need to seek... *or* to be tentative about. I’m writing the flagship volume, **HEARTBROKEN: TOP 5 REASONS TO DOUBT YOUR HEART DOCTOR**. And I’m pioneering a line of quality, affordable, balanced nutritional supplements – **DOCDESIGN™** – for more comfort and vitality,

a healthier and more joyful life.

LK: You're a busy man. You were telling me before the show about startling advances in relieving pain?

JPT: Oh, yes! An incredible new "solution" for chronic pain patients – even including *me!* – is a special cell preparation carefully processed from umbilical cord blood by a federally-registered tissue bank. How about a 58-year-old man suffering with hip pains *daily* since his football injury in high school. *Gone in a week* after injecting these stem cells. Some five months later, he fell off his hay-baler – yep, onto *that* hip. He asked about another injection of stem cells but I said, "Wait a week" ... and he simply became pain-free again. So now we have another tool to help relieve pain, no surgery, no daily drugs, *no narcotics!* My new book, *Failure is not an Option*, helps people see this new way to lasting pain relief. You know, so-called "sciatica" leg pain is often not that at all, not caused by pinched nerves – but that's a topic for another interview. Incidentally, I'm a strong believer in gentle chiropractic care.

LK: Your patients, at least most of them, are thrilled with their results and, as some say, "love you" – but conventional doctors consider what you do as quackery. I'd love to get more into all of this, but you promised to share "The Big Question" before we run out of time.

JPT: Oh, yes, forgive me for being so long-winded, there's just so many stunning advances to share. Here it is, I ask simply: **"What do you want me to help fix for you?"** That *one question* gives me tremendous insight into what they *value*, into how their life is *impacted* by illness or injury, into why they have come to *me* for care. But *after* that question, my task is to ask **"the" questions** that have allowed me to discover and treat the root *causes* of illnesses in almost every patient over dozens of years:

First – *Why?*

Second – *Why?*

Then – *Why?*

And next – *Why?*

Finally – *Why?*

LK: (Chuckling) Those sound like ... actually ... the *same* question?

JPT: You're right! Larry, I get better answers as we drill down looking for *why* something has occurred or what deeper factors contribute to it. For example, "why" you're seeing me could be "for my new high blood pressure." That doesn't *always* require drugs. The next "why" could show a career in a chemical plant, the next "why" might reveal a life-long hobby of reloading bullets or fishing using lead weights. Maybe growing up in an old house with lead pipes or perhaps working as a house painter in earlier years. We finally get down to an answer demanding treatment, such as an elevated level of toxic lead inside. Long ago, lead was found to cause high blood pressure *and* heart disease. Of course, in this story the patient needs chelation therapy to reduce his toxic body burden, which we discussed earlier. Just a quick example, but you get the idea, it works with any of the treatment programs we've reviewed today.

If patients only knew the stories we have to tell, their doctors could answer questions about better ways to get healthier. Our doctors are stressed out because many remain frustrated with fancy band-aids called drugs and surgery instead of finding ways like we've discussed tonight, to treat the underlying *causes* of their patients' problems. You know, the insurance you always want to *have* but never *use*: fire, flood, accident, health. And, of course, *life*!

LK: That explains very well why you say that you "find and treat causes that other doctors have missed." How did you come up with this approach?

JPT: Larry, graduating from medical school was a license to *learn*. I would have been a permanent medical student if they had just paid me! I have been blessed with a curiosity that won't quit, so learning about natural healing was ... well ... a *natural* thing to do. My legacy will be the smiles and successes of those I'll never meet, countless children and grandchildren of patients whose suffering was finally relieved, their comfort and capability restored, so that they could focus on being the best parents they could ever be.

LK: Wonderful and inspiring, thank you. I've got to say that I really like your tie ...

JPT: (interrupting) Thanks, I got it as a gift long before the Prez even announced as a candidate.

LK: (smiling) ... and, of course, your suspenders.

JPT: Thank you! – They're really comfortable and, incidentally, (smiling) they're also a tribute to one of my heroes.

#



About Dr. T

Pardon me – What was the question?

As children, we're chock-full of questions, inquisitive about how the world works. Education and experience load our brains with information but not always understanding or even wisdom. In many careers, we're paid for – and expected to have – “the answers.” How many times, though, are we “just winging-it?”

~ John Parks Trowbridge M.D., FACAM

Early in life, Dr. T – as he's been known to patients and staff for 39 years – was fascinated by “putting things together, finding how the pieces fit.” Not table puzzles but ideas. His senior thesis in high school reviewed various perspectives of the human sexual experience. A major paper in Humanities at Stanford explored interconnections shared by The Creative Synthesis Process in Art and Science. For an extracurricular project at Case Western Reserve Medical School, he worked with world experts in heart pathology and pediatric cardiology to produce a dozen color videotapes explaining the abnormalities of congenital heart disease. In his “spare” time, as the first At-Large National Trustee of the American Medical Student Association, he quietly worked for a collaboration that finally allowed podiatric surgeons to operate on feet and ankles in American hospitals.

What is “The *Big* Question”? In his daily practice, he's never found less than two dozen every day! The limit on discovering answers has been the number of hours available ... and the knowledge he doesn't *yet* have. He spent the first half of his practice finding better questions and now he's thrilled that these are finally leading to better answers. When life is your choice, failure is not an option.

Perhaps most exciting is his leading exploration into the best use of, and finest results with, a unique stem cell preparation from a federally-regulated tissue bank for healing chronic (and acute) *pain* syndromes – *and* other problems as well.

Or maybe it's his literally incredible progress in finding what appears to be “the source” of unexplained diseases – autoimmune issues such as rheumatoid and lupus, sudden kidney failure or worsening diabetes, horrid skin conditions for which dermatologists remain puzzled, even cancers such as prostate, breast, leukemia, also MS and ALS, and others. He calls this “Deep Blood Fungus,” and unexplained illnesses might well come from (or be worsened by) exotic infections never before suspected because a test did not exist. Videos and articles – he's busy preparing them! Here's *a* big question: How much is this like when Pasteur, 150 years ago, first confirmed “germs” as causing *bacterial* infections?

Maybe “The Big Question” is ... *“What on earth could be making me sick?”* Their traditional training as doctors has poorly equipped them to solve many of these confusing issues. Dr. T hasn’t just learned and developed advanced methods, he writes extensively and trains physicians across the USA and around the world. As he says, there’s never a question about *“when”* – ***it’s time*** to “Find it ***now*** – Fix it ***right!***”

For CV and details on advanced treatments:

- www.healthCHOICESnow.com
- www.stem-cells-USA.com
- www.heal-your-illness.com
- www.deep-blood-fungus.com

For appointment or to schedule speaking engagements: DIAL 1-800-FIX-PAIN

John Parks Trowbridge M.D., FACAM

Life Celebrating Health

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I grew up farming with my grandfather, who taught me the values of hard work and sacrifice. Farming was a big part of my foundation for my future. Thinking that my childhood memories on the farm would exist only as memories, I grew up and traveled a bit, with one eye towards entrepreneurship and business, and the other looking fondly at my roots and my home state of Texas. In the early 2000s, farming came back in my life just at the right time, when I met (and later married) Adam, a farmer.

Together, Adam and I planted roots deep in our community. We farmed with his parents, Johnny and Kay, along with Adam's brother and his wife, Justin and Stephanie. In those early days, we worked inefficiently, operating the business out of our homes after long days on the farm, paying bills at the dining room table. We were accustomed to doing everything by ourselves. Hard work and sacrifice were our cornerstones. In 2006, tragedy struck and we lost my father-in-law and our business partner, Johnny, in a truck/train accident. That was a difficult time, and we had a lot of “Big Questions” to ask ourselves.

We didn't have all the answers, that was for sure. We wanted to grow, but we needed help to understand how to grow sustainably. At that time, we had just 7 employees and about 11,000 irrigated acres. Once we felt that we had grounded ourselves and looked internally at our true passions,

THE BIG QUESTION

FEATURING

LARRY KING
MOHAMED ISA
JOHN PARKS TROWBRIDGE M.D.
REBECCA CROWNOVER
PATRICIA DELINOIS
SHAUNEQUA JORDAN
NINA KELLY
LANCE LUKE
ALBERT ALLEN
GREG ROLLETT
DAN AHMAD
JIM FILES
CHRISTIAN KOCH
JW DICKS
NICK NANTON
ADAM HUDSON
LINDSAY DICKS
DR. KATHLEEN ALLARD-WASAJJA
JUAN CARLOS ARZOLA
CHRISTINE MARCELLO
DAN CASEY
ISABEL HARKINS
JOHN SBROCCO
ROSIE UNITE
BO MANRY
CHRIS GOFF

THE **BIG** QUESTION

FEATURING

JOHN PARKS TROWBRIDGE M.D.



Pardon me – What was the question?

As children, we're chock-full of questions, inquisitive about how the world works. Education and experience load our brains with information but not always understanding or even wisdom. In many careers, we're paid for – and expected to have – "the answers." How many times, though, are we "just winging-it?"

~ John Parks Trowbridge M.D., FACAM

Early in life, Dr. T – as he's been known to patients and staff for 39 years – was fascinated by "putting things together, finding how the pieces fit." Not table puzzles but ideas. His senior thesis in high school reviewed various perspectives of the human sexual experience. A major paper in Humanities at Stanford explored interconnections shared by The Creative Synthesis Process in Art and Science. For an extracurricular project at Case Western Reserve Medical School, he worked with world experts in heart pathology and pediatric cardiology to produce a dozen color videotapes explaining the abnormalities of congenital heart disease. In his "spare" time, as the first At-Large National Trustee of the American Medical Student Association, he quietly worked for a collaboration that finally allowed podiatric surgeons to operate on feet and ankles in American hospitals.

What is "The *Big* Question"? In his daily practice, he's never found less than two dozen every day! The limit on discovering answers has been the number of hours available ... and the knowledge he doesn't *yet* have. He spent the first half of his practice finding better questions and now he's thrilled that these are finally leading to better answers. When life is your choice, failure is not an option.

Perhaps most exciting is his leading exploration into the best use of, and finest results with, a unique stem cell preparation from a federally-regulated tissue bank for healing chronic (and acute) *pain* syndromes – *and* other problems as well.

Or maybe it's his literally incredible progress in finding what appears to be "the source" of unexplained diseases – autoimmune issues such as rheumatoid and lupus, sudden kidney failure or worsening diabetes, horrid skin conditions for which dermatologists remain puzzled, even cancers such as prostate, breast, leukemia, also MS and ALS, and others. He calls this "Deep Blood Fungus," and unexplained illnesses might well come from (or be worsened by) exotic infections never before suspected because a test did not exist. Videos and articles – he's busy preparing them! Here's *a* big question: How much is this like when Pasteur, 150 years ago, first confirmed "germs" as causing *bacterial* infections?

Maybe "The Big Question" is ... "*What on earth could be making me sick?*" Their traditional training as doctors has poorly equipped them to solve many of these confusing issues. Dr. T hasn't just learned and developed advanced methods, he *writes* extensively and trains physicians across the USA and around the world. As he says, there's never a question about "*when*" – *it's time* to "Find it *now* – Fix it *right!*"

For CV and details on advanced treatments:

- www.healthCHOICESnow.com
- www.stem-cells-USA.com
- www.heal-your-illness.com
- www.deep-blood-fungus.com

For appointment or to schedule speaking engagements: DIAL 1-800-FIX-PAIN

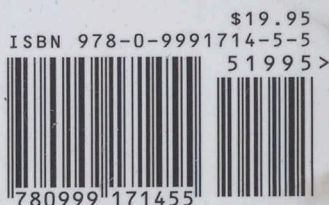
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