

Battling COVID-19 With Ozone Therapy: A Special Interview With Dr. Robert Rowen

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome everyone. This is Dr. Mercola helping you take control of your health in these extraordinary times and we have a special guest to help you navigate these times and that is a repeat guest, Dr. Robert Rowen, who is a prominent ozone physician who is, as I understand it has been practicing ozone therapy longer than any other physician in North America, so he's especially adept at discussing this in topic for today in light of the epidemic that we're experiencing.

Dr. Joseph Mercola:

I want to preface this before we begin that we are recording this on March 23rd. This is a rapidly evolving scenario, so likely statistics are going to change before this video is aired. Please take that into consideration when we're discussing it, but many of the principles will be dialoguing about are pretty much evergreen and they're going to be useful not only for this epidemic and past epidemics, but future epidemics.

Dr. Joseph Mercola:

Many people may recall that I previously interviewed Dr. Rowen for his participation in the Ebola epidemic where he actually took his staff and equipment over to Africa and I forget which country it was and successfully treated a number of individuals over there. Welcome and thank you for joining us today.

Dr. Robert Rowen:

Well, thank you for having me, Joe. [inaudible 00:01:29].

Dr. Joseph Mercola:

Yeah. Maybe you can briefly summarize your clinical experience with ozone and what you did in Africa and the results of that, and then we can go into the details on how that's appropriate to information and a resource to have for this epidemic in the COVID-19.

Dr. Robert Rowen:

I've been doing ozone since 1986. Ozone has basically changed my practice. We've treated probably tens of thousands of people and we treat them for a wide variety of conditions. Ozone seems to work across the board for most things. Not for everything, but for most things.

Dr. Robert Rowen:

I decided to go to Africa in 2014 because knowing what I knew about the Ebola virus itself, I thought that ozone would be an ideal therapy. Because of the similarity, a particular similarity of the Ebola viral coat to Coronavirus, I also believe it will be an effective treatment for Coronavirus. I recruited Howard Robbins to come with me. Howard Robbins does a rather inexpensive, quite safe form of ozone called DIV, direct intravenous gas. The only downside to it is it can irritate veins and yes, it can irritate, but if you're careful and you're not doing it too much, I haven't seen much of an issue. We use lower

concentrations so that we don't see any issues at all. It can cause a temporary cough or chest tightness, which goes away in about five or 10 minutes. Other than that, I believe it's virtually 100% safe or very close to it.

Dr. Joseph Mercola:

It's really inexpensive.

Dr. Robert Rowen:

That's why we chose to use it. The cost, the throw away cost, is only a 27 gauge butterfly and that costs less than a dollar.

Dr. Robert Rowen:

You can reuse the syringe because the syringe doesn't get contaminated and once you buy an ozone generator and compressed oxygen, it's got to be medical grade oxygen, you're on a roll. Now, my wife and I anticipated this, so we got a lot of butterfly needles in stock, lots of oxygen so that we would be prepared for a pandemic. I've been expecting something like this for a long time and I've spoken about it, so this is really cheap.

Dr. Robert Rowen:

There are other ozone methods and amongst those own practitioners there are other favorite methods. Well, my favorite method is hyperbaric ozone, where we take those on into a glass bottle. No, excuse me. We put blood into a glass bottle, 200 CC's, then we pumped the ozone in under pressure into that bottle, mix it up, and then that drives the blood back into the patient.

Dr. Joseph Mercola:

What type of pressures are you looking at?

Dr. Robert Rowen:

We're looking at two ATA, that's two atmospheres.

Dr. Joseph Mercola:

Sure. Yeah. I actually have a hyperbaric chamber myself, which we'll discuss, and you use liquid oxygen to go to 2.5 ATA.

Dr. Robert Rowen:

Well, this was only a bottle.

Dr. Joseph Mercola:

Yeah, I know. I get that. Yeah, I get that. Yeah. You're exposing the blood to it and how does it, the putting the ozone under pressure, that type of pressure result in more effectiveness for the therapy, but it's actually a lot more complex. Well, I guess you do that with, if not doing DIV, you have to extract the blood anyway. This is just another process that you're implementing.

Dr. Robert Rowen:

Well, one of the disadvantages of anything other than DIV is there's a lot of medical waste. In the case of Ebola and Coronavirus, you're dealing with contaminated materials and that is a significant issue. Contaminated materials.

Dr. Robert Rowen:

The DIV method, as far as I'm concerned, would be preferred for this.

Dr. Joseph Mercola:

Okay, but you can't do hyperbaric ozone with DIV. You have to put it in a container.

Dr. Robert Rowen:

Hyperbaric ozone has to be done in a bottle. Yes.

Dr. Joseph Mercola:

Yeah, yeah, yeah.

Dr. Robert Rowen:

Yeah. DIV has certain advantages, which we're going to get into, but I do the hyperbaric ozone, I do high dose hyperbaric ozone. We call it 10 pass in this country. It's based on the work of Johann Lahodny, an Austrian physician, and we get unbelievable results with Lyme disease. I think I get as good results with Lyme disease as anybody in the country gets with anything that they do simply because we're giving rather large amounts of ozone and our patients get better very, very quickly. I use the hyperbaric method for this. Howard uses a lot of this DIV, Howard Robbins.

Dr. Robert Rowen:

We'll get to the DIV method in a moment, but let's talk about what ozone does, what we know it does. Billy Obayashi who passed away last fall and was one of my mentors. I met him in Israel maybe 15 years ago. He got interested in ozone saying, I heard all these wonderful things about ozone therapy and it was hard to believe that a single therapy could work for so many different diseases that are totally disconnected. He says, I just couldn't believe it, so I had to study it to find out why. He came up with some really wonderful discoveries.

Dr. Robert Rowen:

Well, the most important thing in all healing bar none is oxygen. Oxygen is life. You don't have oxygen, you die, and we see that with Coronavirus when the lungs fill up with oxygen, people die.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

Excuse me. When the lungs fill with fluid, they don't get air and they die. Ozone increases to three DGP in red blood cells. That causes more oxygen to be released by hemoglobin. Ozone improves red blood cell flexibility. A red cell, what's say this diameter, has to go through a smaller opening and with more flexibility, it can squeeze through the capillary, which is actually a smaller diameter. Red cells have to do that to get through the capillaries.

Dr. Robert Rowen:

Ozone increases what's called the arterial venous oxygen difference. If here is the arterial oxygen and here is the venous difference, then what's in between is what your body is consuming. Ozone increases that, so you get a higher amount of oxygen that's actually being consumed by the body, which can only be done in the mitochondria, meaning more ATP. ATP is what the body makes for energy and we have to have that so oxygen combustion makes ATP.

Dr. Robert Rowen:

He also found that ozone increases the levels of key antioxidant enzymes like glutathione peroxidase, catalase, superoxide dismutase. He also found that ozone modulates the immune system increasing certain cytokines that reduce inflammation and decreasing certain cytokines that increase inflammation. This work was verified and corroborated by Silvia Menendez Group in Cuba. They showed that ozone reduces human necrosis factor alpha. When animals were preconditioned, in other words, if you gave them an ozone treatment before a toxic insult that would kill them, it greatly reduced the lethality of the insult, whether it was chemical or a stress or infection. Menendez added to what Obayashi did.

Dr. Robert Rowen:

Ozone has all of these effects and more. It increases nitric oxide production in the circulation, which improves circulation. In any event, all of these factors, all of these biochemical effects of ozone go into its effectiveness. Additionally, both groups found that ozone creates molecules called ozonides. Ozonides are reactive oxygen species or lipid oxidation products that are created on contact. When ozone contacts components in your blood, ozone reacts with them instantly. Ozone doesn't last more than microseconds in your blood, if that, and then all these molecules are made called ozonides and then the ozonides move through the body and they are the chemical messengers getting the body to do all these other effects.

Dr. Robert Rowen:

The ozonides are in their own right reactive oxygen species and they are electron seeking. While they are not as lethal to microorganisms as ozone is, and that's one of the other mechanisms of ozone. Ozone kills microorganisms virtually instantly. Viruses and bacteria, we'll get to viruses in a moment.

Dr. Joseph Mercola:

Well, let me just stop there because it does present somewhat of a dilemma in comprehending this with respect to its mechanism of action. Well, I guess if you're providing a continuous supply of ozone, it's not as much an issue because it dissipates so rapidly. If it dissipates within milliseconds or microseconds, it's not going to be able to effectively annihilate a significant number of the viral pathogens unless you have a prolonged exposure, right?

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

And that prolonged exposure is provided by the continuous administration either through DIV or through administration of the blood, the ozone blood.

Dr. Robert Rowen:

Well, realize that only a portion of your blood is getting ozonated.

Dr. Joseph Mercola:

Right, a very small portion.

Dr. Robert Rowen:

Very small portion. It depends how you give it. If you give a DIV, for example, 20 CC's intravenously here, only the blood that's circulating through your vein at that moment is going to get ozonated, but remember it's creating a whole host of downstream metabolites called ozonides and they're reactive, not as reactive as ozone, but they're still reactive and they're going to do their thing.

Dr. Joseph Mercola:

Do they do their thing by directly killing the viral pathogen or do they do it by upregulating the immune system to help your body defeat it? Both.

Dr. Robert Rowen:

I think they can do both. This is just my own hunch. Definitely, they're working on the immune system. They're the molecules that the immune system is working to communicate with itself. The lipid oxidation products, they're messenger molecules. However, if you look at the reaction graphics showing what molecules are created, you see peroxides created, aldehydes created. All of these are oxidants in their own right. Peroxides in particular and peroxides are electron seeking, so while not as lethal to microorganisms as ozone is. I mean, ozone will destroy an organism virtually on contact. These are going to require a longer time and you're not going to see an instant destruct, but if you increase these molecules and they're circulating in the bloodstream, over a long period of time, I think they will have an action, especially on particularly vulnerable organisms, which would include Ebola and also Coronavirus because of particular structures on their viral code.

Dr. Joseph Mercola:

The ozonides have a longer half life?

Dr. Robert Rowen:

Much, much longer. They'll last days.

Dr. Joseph Mercola:

Wow, that's a long time. Okay. I mean, cause most biological- The way you're describing it sounds like a free radical or a biological signaling molecule, which they can be. Not all free radicals are bad. That's a serious confusion in the lay public. Some of them are very beneficial. It sounds like the ozonates would classify in that.

Dr. Robert Rowen:

You raised a really good point. Ozone is not a free radical. Not all ozonides are bad.

Dr. Joseph Mercola:

But the ozonides might be.

Dr. Robert Rowen:

The ozonides are not free radicals because if they were, they would be quenched immediately. But let's look at what the body does when it's fighting an infection. It does create free radicals. It creates nitric oxide, which is a radical. It has an unpaired electron.

Dr. Joseph Mercola:

Yeah. It has a NAD pH oxidase within the lysosomes is activated to produce these powerful oxidizing molecules to destroy the bad viral pathogen.

Dr. Robert Rowen:

Ozone, excuse me. The body when it's fighting an infection also creates singlet oxygen.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

That is basically a free radical, but the body creates-

Dr. Joseph Mercola:

The lysosomes with Knox, NAD pH oxidase. That's how it does it.

Dr. Robert Rowen:

Yes. The body creates lots of free radicals to hurl at the microorganisms. The problem comes when the body loses control and these free radicals might overwhelm the system itself or insight what's called a cytokine storm, which we've got to get into.

Dr. Robert Rowen:

Ozone is not a free radical. In fact, it may quench free radicals, but the body, I don't know if you know this Joe. Actually, you probably do. The body makes ozone.

Dr. Joseph Mercola:

No, I didn't know that. Did not know that.

Dr. Robert Rowen:

You didn't know that.

Dr. Joseph Mercola:

No, I'm not surprised, but I did not know that.

Dr. Robert Rowen:

It did. It does. Scripps Institute in 2003 published a report that in conjunction with antibodies when the body makes super oxide in a defense response, super oxide paired with certain antibodies actually

creates O₃. They couldn't measure the O₃ cause O₃ is so reactive. It's gone instantly, but the downstream metabolites that they found, they said it could only have been accomplished by ozone. Ozone is actually made in the body as part of this balance of pro oxidants, highly reactive oxidants that are made when your body is fighting an infection.

Dr. Joseph Mercola:

Yeah. Yeah. The superoxide gets converted to hydrogen peroxide by superoxide dismutase, which then can either fight the pathogen or can itself be neutralized by a catalase.

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

Most people don't realize this either, but I believe 5% of the oxygen consumed by your body gets converted to peroxide. [crosstalk 00:17:11].

Dr. Joseph Mercola:

Yeah. Probably in the mitochondria.

Dr. Robert Rowen:

In the mitochondria, and that's why you need to have a lot of superoxide dismutase. We're making a lot of superoxide in our body, free radical, and it's being made all the time. I don't believe God made mistakes.

Dr. Joseph Mercola:

No, no.

Dr. Robert Rowen:

This happens for a reason.

Dr. Joseph Mercola:

You can take it exogenously like you can take superoxide dismutase supplements, which I think is a massive mistake and we'll discuss this in a little bit, but I think it's far better to have your body make it when it needs it so you make the right amount and don't inappropriately suppress useful signaling molecules.

Dr. Robert Rowen:

I'm in agreement with you.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

And if the body didn't want these free radicals, it wouldn't make this so much superoxide. 5% of the oxygen you consume goes into the manufacture of superoxide in your mitochondria. Of course, our bodies are made for this, so we have that enzyme.

Dr. Joseph Mercola:

That percentage could be increased and I'll tell ya, it could be increased if people are eating the wrong food. If they have too many carbohydrates and they're using that as their primary fuel as opposed to fat, it might not be 5% of it. I think ideally it's probably closer to three. It might go to 10% if they're having the wrong fuel and they're not using fat as their primary fuel source, and that excessive superoxide and hydrogen peroxide can cause oxidative damage, which contributes to a lot of the degenerative disease.

Dr. Robert Rowen:

I agree with you totally on this. Your diet has everything to do with how your body is operating and the balance, what's called homeostasis, it makes.

Dr. Joseph Mercola:

So good. Let's get out of the weeds and go into some of the practical components. I think it's important to understand the mechanism of action from a biochemical perspective, but I think from this discussion we'd really like to focus on what people can do.

Dr. Joseph Mercola:

Let's discuss some of the different therapies because there's two ways that you can receive ozone. One is that you can see a clinician like yourself, which is the ideal. Many people, perhaps most are, are not going to avail to themselves that resource. One because they might be in lockdown. Two because they might not be able to afford. Three because there might not be a local physician that's convenient to them.

Dr. Joseph Mercola:

Why don't we discuss how one could find an oxidative medicine ozone therapist if they want to pursue that or how they can avail themselves of this resource and use it themselves. Now, I'm a physician and I use ozone myself personally, but even if I wasn't a physician, I think it's simple enough and safe enough that you can do it pretty easily.

Dr. Robert Rowen:

My wife and I spent ...

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Dr. Joseph Mercola:

We do it pretty easily.

Dr. Robert Rowen:

My wife and I spent hours creating a video, which is available, on home ozone use. It is available for a small donation to Ozone Without Borders, ozonewithoutborders.ngo a nonprofit organization. We

donated the video to them. So anybody interested in home ozone techniques ... let me explain the home ozone techniques. There's rectal insufflation, ear insufflation, drinking ozone water, which is in this cup right now. There's ozone sauna. Women can do vaginal insufflation as well. So we've made a video of all of these techniques. Easy to do ozonewithoutborders.ngo. Anybody can do this and it is extraordinarily safe. At my own website, which is drrowendrsu.com, S-U, Dr. Rowen, Dr. Su.com, we have a news and articles tab and anybody can go to that and see the writings that I've done on home ozone, how to get machines, certain machines, and also nebulized hydrogen peroxide. I do nebulized hydrogen peroxide and during this epidemic I'm doing it just about every day.

Dr. Joseph Mercola:

Interesting. Do you like that better than colloidal silver?

Dr. Robert Rowen:

I like both.

Dr. Joseph Mercola:

You can do them both at the same time?

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

And the silver doesn't, I mean the peroxide doesn't oxidize the silver?

Dr. Robert Rowen:

Okay. Yes it can. It depends what kind of silver you use. If you're using ionic silver, AG plus it's already oxidized. So you could mix that with the peroxide. There is a form of silver that I really like called mezzo silver, which is really metallic silver. And if you put the ozone in with, if you, excuse me, if you put the peroxide in with that then the silver color of that product will turn clear as the peroxide oxidizes it. For that product, I would do the silver separately and then follow it with peroxide or do one or the other first. But if you're using a clear silver product you can mix them.

Dr. Joseph Mercola:

Okay. That's good to know. So I know one of your favorites, because you do ozone pretty much every day. And I believe you do the rectal, I mean you certainly do intravenous because you have easy access to it. But the daily ones would be rectal, ear and drinking the water. I think you drink the water the most. So I'm particularly intrigued with that. I actually am challenged with some periodontal issues, so the dentist had strongly recommended ozonated water. So I would like to discuss that because I think it's such a useful strategy for periodontal issues but also for health. And so I'd like to go a little bit deep on that, especially the specifics as to how long it lasts because it doesn't seem to last very long and, and the details of how to create it, so if you can start there and I'll just ask you some questions on it.

Dr. Robert Rowen:

I went to the Republic of Guinea a year ago at my own expense. I brought ozone there. Ozone was already there. I brought some advanced techniques for them. I met with the wife of one of my patients

and I want to give her credit for this. Her name is [Vee Slavia Mareeba 00:03:48] . She's a Polish nurse. Now their nurses are much different than our nurses. She's really way advanced and she was doing things that only an advanced medical doctor might do, but she was treating, this was a poor country, a very poor country, and she was treating people with ozone water. Ear ozone and in many cases, rectal ozone. It was almost shocking to find out that she was getting really, really good results with this and it wasn't even involving blood therapy and she had all kinds of people coming in. I saw all kinds of stuff coming into her place and again, very poor country and people lined up to get treatments. She bubbled ozone through water at a very cold temperature.

Dr. Joseph Mercola:

Now, would it be useful to put ice cubes in the water to make it close to freezing?

Dr. Robert Rowen:

You want it as close to freezing as possible? Yeah. She had water in about zero degrees Celsius, 32 degrees and then after she did that, by the way, this water at zero to two degrees Celsius will carry maybe three times the amount of ozone in the water dissolved as this cup right here at room temperature. It's a huge difference. Huge difference. If you drink-

Dr. Joseph Mercola:

As the temperature increases, as you take it to room temperature, does the ozone just diffuse out or dissociate?

Dr. Robert Rowen:

Yes. The ozone just diffuses out. We know for example, Joe, you know that in Alaska where you have really cold seawater temperature, oxygen is higher concentration. Colder water is denser it can hold more oxygen and when you boil it, when you bring water up to higher temperature, all the gases come out. That's what you're dealing with here. So if you have water close to the freezing point, it's going to hold dramatically more ozone.

Dr. Joseph Mercola:

And how-

Dr. Robert Rowen:

The nice thing-

Dr. Joseph Mercola:

Oh go ahead, continue and I'll ask.

Dr. Robert Rowen:

The nice thing in Guinea was that it's such a warm climate that it was very refreshing to drink water at zero degrees Celsius. Here you might not be able to tolerate drinking a liter at once at zero degrees Celsius.

Dr. Joseph Mercola:

Is that how much you need a liter?

Dr. Robert Rowen:

She would give people a liter and then they would drink it over the course of the day, keeping it cold and capped. My wife and I are making ozone water every day following this. We make a liter of water and we are doing it at room temperature because neither of us could tolerate drinking that much ice water. So we're making it at room temperature.

Dr. Joseph Mercola:

So when you're making it, I mean the procedure is pretty simple. It can't be any old bottle. Typically, it's a flask with a special cap and adapter and attachments to the ozone concentrator or degenerate. How much gamma ozone do you put from the generator and how long do you diffuse it for?

Dr. Robert Rowen:

We use maximum concentration coming from the generator and we will bubble it typically say at 1/16 to conserve oxygen. The generator is turned up as high as possible. In the case of the generator we use for this purpose-

Dr. Joseph Mercola:

70, 80 gamma.

Dr. Robert Rowen:

Even more. If we can get 90 to 100, we do that. We'll bubble it for 10 maybe 15 minutes.

Dr. Joseph Mercola:

Okay. That's what I was thinking. All right.

Dr. Robert Rowen:

And we do that every morning. As soon as we get up, one of us will bubble the ozone and then she and I will split the liters. Then I'm also, because of this epidemic, I have a stethoscope that I can attach a syringe to and I put it in my ears just to give me a little bit extra. And as you said, also since I'm a physician, I have the added advantage that I can do IV ozone, which I do. I do IV ozone every one to two weeks just to keep ahead of things. I also have an ozone sauna. People can get ozone saunas. There are some really expensive ones. The one that I like the best is very expensive. It's called a Hocatt, H-O-C-A-T-T.

Dr. Joseph Mercola:

Those are over 100,000 aren't they?

Dr. Robert Rowen:

No.

Dr. Joseph Mercola:

No.

Dr. Robert Rowen:

You can get the least expensive is probably going to be around 30. If you add PEMF it's going to be 50,000 plus. But I would say you should be able to get one from 30 to 35,000. If somebody wants to get this, I can put them in touch with a woman who sells it and probably help them out price-wise as well.

Dr. Joseph Mercola:

Yeah, it's a little bit pricey, but for most, the average person an ozone setup, like you're describing it with all the equipment and peripherals is going to be under a thousand dollars and now there, I think we should just take a brief tangent on the oxygen supply for the generator because you can technically generate ozone from room air, but that would be very unwise because room air is nearly 80% nitrogen and you're going to create reactive nitrogen species, but not reactive oxygen species. So that would be a bad idea. So you need a form of pure oxygen. The least the most convenient is an oxygen concentrator run at a very low flow rate. So you can get a high percentage. Better and ideal would be medical grade oxygen, but normally in many states you've got to be a physician to get the licensed O2 or at least get a prescription for it and that can be more of a challenge. So why don't you give your perspective on that?

Dr. Robert Rowen:

I give medical grade oxygen to any of my patients on request if they have an ozone machine.

Dr. Joseph Mercola:

Yeah, but most of the people watching this don't have access to you.

Dr. Robert Rowen:

That's correct. Now I can't endorse this, I'm just going to say from experience, a lot of people I know go out and get industrial oxygen.

Dr. Joseph Mercola:

Sure, sure.

Dr. Robert Rowen:

And I can't professionally, nor can you, endorse that. But I haven't heard any problems with this.

Dr. Joseph Mercola:

It needs a different regulator though, right?

Dr. Robert Rowen:

No.

Dr. Joseph Mercola:

Just a regular-

Dr. Robert Rowen:

Well, yes, industrial oxygen will have a different regulator, but most of the tanks in my office are industrial anyway. I mean, I'm talking the valve. The valve, right. We only use medical grade oxygen. But, you can't get a medical tank, which is called a pin index adapter filled with industrial oxygen. It has to

be a screw on a valve and they will not fill a green tank, which is a medical tank with industrial oxygen. Industrial oxygen is handled differently. They don't wash out the tank with oxygen. In other words, if the tank goes empty, they just fill it. So any nitrogen that was in there stays. With medical, they wash it out. It does come from the same source. So the source is the same. The equipment is handled better and it's washed out. So all I can say, again, not recommending it, but I know a lot of people who do this and they're happy with it. Please do not use an oxygen concentrator for this. Now-

Dr. Joseph Mercola:

Why?

Dr. Robert Rowen:

Oxygen concentrator is fine in my opinion, for making ozone that you're going to bubble through water.

Dr. Joseph Mercola:

Yeah. Or okay ... Makes sense.

Dr. Robert Rowen:

Just through water. I would not use an oxygen concentrator for any other form of ozone delivery. But maybe ears. Maybe. But the problem is I don't want oxides of nitrogen in my body.

Dr. Joseph Mercola:

Yeah, yeah. That makes sense.

Dr. Robert Rowen:

I'm not so concerned if you drink a little bit of nitrogen oxides. I don't think that's a major concern, but I don't want nitrogen oxide in my body any other way. So I don't recommend an oxygen concentrator other than for water.

Dr. Joseph Mercola:

Okay, fair caution. So, any way the specific details are on that video you mentioned earlier, and that would be ... Because then you just have to connect yourself with the ozone generator and of course the regulators and the tubing to connect everything up. So it's a pretty simple process actually.

Dr. Robert Rowen:

Yeah. We show that in the video that's posted at Ozone Without Borders.

Dr. Joseph Mercola:

And I guess we haven't discussed it, but it needs to be emphasized, is that ozone is only toxic to one tissue in your body and that's the respiratory, long epithelium. So you can't breathe this stuff. Why don't you talk about it?

Dr. Robert Rowen:

All right. You've got to be careful when you make those on water in your flask because when you open up the flask, if it's close to your nose, you're going to get a whiff of powerful ozone and that's irritating

to the lungs. No doubt. I mean, if you go online and even at the FDA, they're going to say ozone is a toxic gas and they also say it with no known medical indications. It's partly true. The FDA is a hundred years behind the times in terms of no known medical indications. Ozone has been in continuous use in this country since 1888 or 1885 when a book was published on the use of ozone in medicine. Okay, and it is published at that ozone has a wide scope of medical benefits. Is it toxic? If you breathe ozone into your lungs, yes. You don't want to do that.

Dr. Robert Rowen:

The lungs don't have that much protection against ozone and you'll cough and gag and if you're breathing ozone for long period of times, it could possibly damage your lungs, but it's not damaging to any other tissue if you do it right. Women can take it vaginally. That's a sensitive tissue. No issues if you do it right. Rectally. I know people who do rectal ozone five, six times a week. I do ozone by a blood treatment and I do it regularly. Often, no issues. Ozone gas, DIV ozone, if you give it to the vein, the gas, it can be irritating to the vein, no doubt about it. Why? Vein endothelium, the inner lining of the vein on the inside of the vein, they lack catalyst and enzyme and lacking that catalyst, they don't have protection from the ozone. So if you repeatedly do this or if you give ozone in very high concentration into the vein, you can irritate the vein, cause a phlebitis and you won't be happy. So we have to be careful when we do this. I will give you an example of this.

Dr. Robert Rowen:

In my early days of exploring with this, when AIDS first came out, I was looking for a way to do this by DIV method and I knew more was better, but I didn't know how much more could potentially damage me. I've got nice veins on the back of my hand, you might be able to see it.

Dr. Joseph Mercola:

Yes. It's good.

Dr. Robert Rowen:

This is the hand that I did it too. I stuck a 27 gauge butterfly in this vein and I gave myself ozone at 70 gamma and it hurt. And I was foolish and I continued the infusion because I got to do something on myself before I do it on a patient. I was doing this on myself as a trial. Two veins in my hand clotted off and I said, "Oh my God, I might have lost my veins in my hand." I was really worried about it, but immediately I started taking proteolytic enzymes. In that case I took Wobenzym and I put castor oil packs on my hand. And you can find good information on castor oil packs, which is good for putting anywhere on your body where there's inflammation. And in three days the blood was flowing again in my vein. Within five days all was fixed and my veins are every bit as good as anybody else's right now.

Dr. Joseph Mercola:

Yeah. Hyperbaric would help too.

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

So that's good. Well the average person is not going to be doing DIV, so.

Dr. Robert Rowen:

No.

Dr. Joseph Mercola:

But it's good to know. Yeah, that's an advanced technique for medical professionals, so. So I think another important topic that anyone self-administering ozone therapy as per your recommendations would benefit from is the adjunctive use of endogenous antioxidant upregulation. And that would be my favorite antioxidant, which is molecular hydrogen as a tablet, which when dissolved in water, generates molecular hydrogen gas, which needs to be consumed in about 90 seconds after you put the tablets in the water and done about 30 minutes before you do the oxidative therapy. This is something I do routinely before I go into my chamber, and I would recommend for anyone considering ozone therapy because it causes your body to have these protective mechanisms, ripped ready to go, that when you give this stress, it can help protect your body and it only gets activated if you need it. So I'm wondering if you integrate that into your protocols.

Dr. Robert Rowen:

We're using a lot of molecular hydrogen. Yes, and I like your product. I want your viewers to know. And I want-

Dr. Joseph Mercola:

Yeah, yeah, it's good stuff. It is my favorite supplement.

Dr. Robert Rowen:

I want to thank you for getting it out there.

Dr. Joseph Mercola:

I'm grateful to Tyler Lebaron who helped us put it together and basically develop the knowledge to understand it. It's such a powerful tool on its greatly underappreciated in the medical world. But it's great for oxidative stress, both therapeutic like ozone, hyperbaric oxygen, but also for ionizing radiation exposures. Like if you're going to get a CT scan or if you're flying at 35,000 feet, which many people aren't doing nowadays, but if you were, you're going to get ionizing radiation up there. So this is a very useful strategy and I use it every time I fly.

Dr. Robert Rowen:

I like it. Again, I thank you for getting that information out there. I've been studying a molecular hydrogen for some years. It's published in Medical Gas Research and I like what you've done with your product.

Dr. Joseph Mercola:

Well, thank you.

Dr. Robert Rowen:

Joe I wanted to also expand on, we touched on this earlier, why ozone for coronavirus and-

Dr. Joseph Mercola:

Yes, let's get into the details now. I mean, that's why we're doing this because this is another tool, but I think the information we provided previously gives people the base foundation to understand how to implement and why it's useful and how to do it. Now we're going to get why it's so useful for coronavirus, so go for it.

Dr. Robert Rowen:

Okay. When I was doing my research on Ebola, I found a series of articles that showed that viruses need to be reduced, in other words, to have electrons in order to fuse to the cell membrane and spew in their genetic material. A lot of viruses are loaded on their membrane with the amino acid cysteine, C-Y-S-T-E-I-N-E. I saw article after article showing that viruses can be inactivated if they're oxidized. Polio virus, Norwalk virus, all kinds of viruses. You oxidize them, they lose their infectivity. There was an article that showed that, I believe it was CMV, cytomegalovirus, if they oxidized it, it lost its infectivity.

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Dr. Robert Rowen:

They oxidized it, it lost its infectivity. But when they re-reduced it with a chemical, adding the electrons back with a chemical, it regained over 60% of its infectivity. That's like, wow. What are we really missing here? We have what could be the cat's meow and then I saw the same thing with Ebola where it was published that Ebola virus also has to have its cystine residues reduced for infectivity. So that's what propelled me to go to Sierra Leone and we were actually invited by the president of Sierra Leone himself.

Dr. Robert Rowen:

So other aspects of ozone viruses. There was an interesting article showing that the lipid coat, not just the protein coat, now the protein... Corona virus has spiked proteins. The viruses also have a lipid coat, and if you alter that lipid coat, that can also reduce or eliminate their infectivity. Ozone does attack lipids. We just discussed that earlier.

Dr. Robert Rowen:

Our cells has the ability to repair that. That's what our cells are doing all the time. Viruses can do nothing. It's even debated whether they're life or not life. I think that they are life of some kind. But they can't do it themselves. So if they are inactivated, if their coat is inactivated, they can't repair it. The only thing they can do to help themselves is to attach to your cell, dump in their DNA or RNA, replicate and then spew out more viruses at your cost.

Dr. Robert Rowen:

So ozone, if you increase the oxidative, the redox... Redox, oxidation reduction, that's a balance in the body like this. Just like your pH, your pH acid base is always held in balance. It is really critically preserved by the body. The redox status is also critically preserved by the body, as well. I believe that oxygen therapy, whether it's ozone or other pro-oxidants will tip the body into having more oxidants, so it's an oxidant stress, which your body can handle. But the self hydro groups, the thiol groups on the spike proteins of coronavirus or Ebola virus, they're very vulnerable to this. They can't repair, they'll be destroyed essentially. And the virus loses its infectivity.

Dr. Joseph Mercola:

And the thiol groups, you referenced, had the cystine amino acid in them.

Dr. Robert Rowen:

Yes. The cystine carries the thiol, the SH group rather than an OH group. And these groups are extraordinarily vulnerable to oxidation.

Dr. Joseph Mercola:

Yeah, so that's the mechanism of that, and that's how it works.

Dr. Robert Rowen:

One of them. One of the mechanisms. The other mechanism will be modulating the immune system. So the cytokine storm is, you got this, you're making lots of cytokines, your immune system is on tilt, on overdrive, and the research shows that ozone can bring it back into balance, modulating it. Oxygen, delivering more oxygen. We've already covered that. That ozone does that. So ozone appears to be an incredible antiviral. In my words, it's the ideal antiviral.

Dr. Robert Rowen:

In the article that I referenced, when you damage the virus lipid coat, the author of that manuscript said that the problem with drugs that do that is that they're unacceptably toxic. So designing drugs to damage the virus lipid coat is probably going to fail because those drugs are going to be toxic. But we have a molecule that can do this. And whether you call it a drug, ozone, or a natural substance, because it's made by the body, it matters not to me. The fact is it's a pro-oxidant and it can ding the virus and render it inactive if the virus is exposed to it.

Dr. Joseph Mercola:

Yeah. Well let's talk about another natural substance, but this one is not made by our bodies, most animals make it, but we don't. And it's another oxidative therapy at least used in high doses, in normal doses it's actually a required nutrient that we need to optimize our health. And that's Vitamin C or ascorbic acid.

Dr. Joseph Mercola:

So I believe from listening to your previous interviews that, I mean, you're in favor of it, but you think that ozone would be a better strategy, but it certainly can be used. So let's discuss that and some of its pros and cons.

Dr. Robert Rowen:

Sure thing. Mark Levine, he might still be, but he used to work at the NIH and his team along with a woman named Kate Chen, publish some articles showing that intravenous, and it has to be intravenous Vitamin C. When it's given intravenously, it reaches high enough tissue concentrations, that when it permeates into the interstitial fluid. Interstitial fluid is not blood and it's not inside the cell. It's the fluids between the blood vessel and the cell. When ascorbic acid reaches a certain concentration in the interstitial fluids, it acts as a pro-drug for your body to make hydrogen peroxide an oxidant.

Dr. Robert Rowen:

Hydrogen peroxide is missable in water. It's a small molecule. It can get right into your cell and have pro-oxidant effects. So now you have more hydrogen peroxide in your tissues. We've already discussed the vulnerability of bacteria and viruses to pro-oxidants. Hydrogen peroxide is far faster in eliminating them than bleach and ozone is faster than peroxide. It's all a degree of how strong the oxidant is.

Dr. Robert Rowen:

Ozone is 100 times more powerful at killing pathogens than is bleach. Peroxide is going to fall somewhere in between. So high dose Vitamin C will create hydrogen peroxide in your body, which becomes now an oxidation treatment. And that's why you're seeing research on this. This has been known for 70 or 80 years. Frederick Klenner did this work many years ago and published it, but you're not going to see pharma publish this or study it because this is not something that's patentable and all they're interested in is money, not your health.

Dr. Joseph Mercola:

Yeah, I would just add that I'm not sure that intravenous is absolutely required. I think it's parenteral, that's really the key thing. And that is making a distinction between oral and parenteral. And parenteral could include a version of oral, which is liposomal, which essentially allows the swallowed capsule to go almost directly into the blood and bypass the intestinal mucosa.

Dr. Joseph Mercola:

So it's, if it's going into the blood and get high concentrations. I have a friend who treats many cancer patients and many of them are getting intravenous Vitamin C and those that aren't, he puts on oral liposomal C and finds and measures are blood levels and finds that the ones in the oral liposomal actually have better levels because they can take it more frequently rather than get an IV once every few days or a week.

Dr. Robert Rowen:

Yeah. I don't have knowledge now on how high blood levels you get with any form of oral C, excuse me with liposomal C. The oral-

Dr. Joseph Mercola:

It's actually liposomal. I've been pronouncing it probably [inaudible 00:48:16] because it's lipid, lipidsomes.

Dr. Robert Rowen:

Right.

Dr. Joseph Mercola:

Yeah. It's liposomal.

Dr. Robert Rowen:

You will definitely get more into your bloodstream. The problem is, this is what I was taught and I was taught this by a Mark Levine's people. There's a limit of how much your intestine is going to absorb, which might be overcome by the liposomal vitamin C, but your kidney is going to eliminate it. So even if

you get more absorbed into your system through your intestine, if it's on a slow up curve like this, the kidney's going to take it out as fast as it comes in.

Dr. Joseph Mercola:

Well, the kidneys will take it out parenterally too, IV.

Dr. Robert Rowen:

Yes. But-

Dr. Joseph Mercola:

[inaudible 00:48:57]

Dr. Robert Rowen:

Yes, but if you give it parenterally, you're starting up here, you're going straight up to the top and you give it and as long as you're giving it, it's way up here and then the kidneys will take it out, but at least you've gotten that spike.

Dr. Joseph Mercola:

Well, I think you can make them equivalent because you and I both know that you're not going to give someone 25 grams of IV Vitamin C in under four hours. That's a typical dose because it can really be irritating to the veins and cause-

Dr. Robert Rowen:

Yes it is, that's an issue.

Dr. Joseph Mercola:

So that's essentially four hours. You're looking at six grams an hour, so you can easily swallow 6,000 milligram capsules per hour or even more. I think if you take a lot of them at once, you could actually exceed intravenous administration levels.

Dr. Robert Rowen:

That's a really good idea. And everybody needs to remember that the Vitamin C in this case is working as a pro-oxidant and it's worth it to do. The reason why I never got into... I do some Vitamin C, we do limited Vitamin C in the office, but it's irritating the veins, just as you said. Vitamin C will scar veins probably from the same mechanism that we just talked about. Veins lack catalase.

Dr. Joseph Mercola:

Catalase, right.

Dr. Robert Rowen:

So the Vitamin C, the high dose ascorbic acid gets into the interstitial fluid of the local vein, hydrogen peroxide is generated. The veins are lacking the catalase, so they'll get scarred. So I like your concept here.

Dr. Joseph Mercola:

Yeah. See, I just think it's useful and I just want to reinforce from my perspective, this is not something that I recommend, I don't think you would recommend either prophylactically to prevent a COVID-19 infection. This is something if you're coming down with a severe viral infection that this strategy should seriously consider using and probably have in your medicine cabinet just in case. It's not something that... I think you should have Vitamin C every day, but I don't think you need massive doses. I mean, Andrew Saul recommends it two or three grams a day. I think, 200 milligrams is more than enough for most people. And I personally only take about 100 milligrams.

Dr. Robert Rowen:

I like food, Vitamin C better than the ascorbic acid.

Dr. Joseph Mercola:

I agree, yes. That's what I'm talking about. I agree. Food-based. Yeah. I mean, the supplement I take is food based. It's from, begins with an a, it's based from the real high source of it's not, [Amellada 00:11:24], I forget the source there, but it's one of the highest concentrations of it. So that's what I use. It's an Indian. It's from India.

Dr. Robert Rowen:

Yes. I use the same thing.

Dr. Joseph Mercola:

Yeah. Yeah. So anyway, but I have Barbados, cherries, otherwise known as acerola cherries that I literally have like four trees and I can frequently harvest a gallon of them at one time, and I might have two, three dozen harvest a year. So I mean I might go 10 grams of Vitamin C from acerola cherries. So good.

Dr. Robert Rowen:

And I also think that Vitamin C really needs to be taken in balance with all of the other constituents in real Vitamin C.

Dr. Joseph Mercola:

Yeah. But then even the acerola cherries, I'm not using it therapeutically. I'm using it more nutritionally, which I think is a useful strategy because there's two components that people get them confused. One is it used as a drug an oxidative drug. The other is, is it an important nutrient that your body absolutely requires for so many therapeutic for biologic functions.

Dr. Joseph Mercola:

Okay. So we've hit that. Any other things you would like to mention because I have some philosophical things I'd like to discuss with you.

Dr. Robert Rowen:

I also recommend in terms of COVID, make sure you're taking plenty of Vitamin D and I know you support that too.

Dr. Joseph Mercola:

Actually, I don't recommend taking Vitamin D.

Dr. Robert Rowen:

Interesting.

Dr. Joseph Mercola:

I recommend getting yourself out pretty much close to butt naked in the sun.

Dr. Robert Rowen:

You're a runner. I agree.

Dr. Joseph Mercola:

Well, I'm not a runner. I stopped running about 10 years ago, but I definitely walk on the beach. I just came back from an hour walk on the beach in my shorts and got lots of UVB exposure. So I haven't swallowed Vitamin D in over 10 years, my level is over 70 nanograms.

Dr. Robert Rowen:

Joe, I'm thinking of people in Boston.

Dr. Joseph Mercola:

Yeah, well then you better swallow some.

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

Yeah, yeah. But in Boston, it's as we're doing this, it's the end of March, two months you'll be able to get some Vitamin D maybe a month, depends on the weather and stuff. But okay. So yeah, Vitamin D would be useful. I mean, it's crazy. Even the former CDC director, I think, Tom Sharon, I forget his name. I think it's Tom Something, came out and recommended and advocated the use of by optimizing Vitamin D levels for the coronavirus. I mean, it's pretty unusual that that happens, but occasionally it does.

Dr. Joseph Mercola:

Occasionally they will, former directors of the CDC, will go and become vice presidents at Merck, and can get reimbursed tens of millions of dollars for making vaccines.

Dr. Robert Rowen:

Oh, we need to talk about vaccines for a moment too.

Dr. Joseph Mercola:

Oh, yeah, yeah, yeah. Well, I want to integrate that into this philosophical discussion because I think we're going to enjoy that.

Dr. Robert Rowen:

Okay. I also like Vitamin a. I use 25,000-

Dr. Joseph Mercola:

Acutely?

Dr. Robert Rowen:

But I don't recommend that for pregnant women. Pregnant women shouldn't take more than five.

Dr. Joseph Mercola:

Do you recommend that routinely or just acutely for an infection?

Dr. Robert Rowen:

Acutely.

Dr. Joseph Mercola:

Okay. Yeah.

Dr. Robert Rowen:

And zinc.

Dr. Joseph Mercola:

Yeah. Zinc. Now, which type of zinc are we talking about oral, dissolve lozenges, a therapeutically or just zinc 15 milligrams a day to reach your normal recommended daily allowance.

Dr. Robert Rowen:

I think you should be getting, at least for this type of thing, you should be getting at least 30 milligrams. And I do like zinc lozenges. Zinc lozenges come as zinc acetate.

Dr. Joseph Mercola:

Yeah, and interestingly, you probably know this, but the Trump administration and many physicians are now strongly endorsing and supporting the use of chloroquine and hydroxychloroquine, which are antimalarial drugs. And it's believed, the reason I mentioned is because it's believed the mechanism of action is that these drugs actually act as zinc ionophores and they increased the zinc concentrations, which actually interferes with the virus's ability to replicate itself once it's infected the person. So it seems to be pretty effective.

Dr. Joseph Mercola:

I don't know that taking an anti-malarial drug is going to be the best strategy. I personally wouldn't use it, but the connection there is the zinc.

Dr. Robert Rowen:

I am concerned that if millions of people end up taking hydroxychloroquine, I don't know how many-

Dr. Joseph Mercola:

Which is safer than chloroquine.

Dr. Robert Rowen:

Which is safer than chloroquine. And what makes it unsafe, they accumulate in the retina and can damage the retina.

Dr. Joseph Mercola:

Yeah. Well, who needs your eyes, you know, what the heck. Who needs vision. I mean, geez, you want to come down with, die from COVID-19. So this is the leading up to the philosophical discussion we're going to engage in shortly.

Dr. Joseph Mercola:

So any other points you want to hit before we discuss the very intriguing philosophical components that-

Dr. Robert Rowen:

I am definitely interested in the philosophical. So let's move on.

Dr. Joseph Mercola:

All right. Well, you, I know that you come from a very strong libertarian background, for many years have a hedged your medical practice up in Alaska, the home of the free and moved down to Northern California now. So there are many intriguing elements of this which we haven't discussed earlier and that is that, and I believe we share the same position that this virus, whether or not the actual virus itself was bioengineered, which I believe probably was, but it's almost a moot issue. I believe this whole crisis was engineered. And the response, our societal and global response to this pandemic is beyond exaggerated. In previous pandemics, historically like the bubonic plague around 400 AD and 12 to 1300 AD, they killed 30 50 million people, not 1000 not 10,000 people. I mean this is three orders of magnitude difference. And at that time it was maybe half the world's population.

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

This is like one-tenth of one-tenth of 1%. do the numbers. 10,000 divided by seven and a half billion. I don't even know if it is, but when you do that division is a low percentage. So our response is exaggerated, at least that's my belief. And that is more than likely the rational view of this is that this is an engineered crisis designed to collapse the economy.

Dr. Joseph Mercola:

Because one out of three people watching this as we are recording this are confined to their home, the country is shutdown. We are going to have 30% unemployment rates, which exceeds that in the great depression. The economy's going to collapse. There's just no way around it and it was engineered. That's my view. So I'd love to hear your point on it.

Dr. Robert Rowen:

I'm in total agreement with you. I've been thinking about this. We had, one thing you didn't mention, all of us, everyone knows was the great influenza epidemic of 1918-

Dr. Joseph Mercola:

Tens of millions of people, tens of millions.

Dr. Robert Rowen:

Tens of millions in 1918 when we had one quarter of the population we have today. So I'm in agreement with you. I can dispense with whether it was bio-engineered.

Dr. Joseph Mercola:

Yeah, it's a moot issue.

Dr. Robert Rowen:

That's correct. The fact is it's out there, and it is being sensationalized. It's driving people into panic and hysteria. My own feeling is there is going to be more overall carnage from the collapse of the world economy. The world economy, this is being done across the board-

Dr. Joseph Mercola:

Globally.

Dr. Robert Rowen:

... in every country, and it's just like, it's a mindset. It's a Pied Piper, follow the Pied Piper right off the cliff.

Dr. Robert Rowen:

I believe that there's going to be more harder to society then if this virus took out 200,000 people, 300,000 people in this country.

Dr. Joseph Mercola:

Two million.

Dr. Robert Rowen:

Even two million.

Dr. Joseph Mercola:

Yeah. Let's just hit that. The projections from most of these scientific experts is a minimum of a quarter million people are going to die, to as many as up to 2 million, 1.75 million. That's the worst case scenario that they're projecting. My guess is that more-

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Dr. Joseph Mercola:

That's the worst case scenario that they're projecting. My guess is that more people will die from car accidents this year than die from this COVID-19 infection in the US and in the world.

Dr. Robert Rowen:

I can't argue with that. So I'm in agreement with you. Now, realize it's the mainstream press that's running with this.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

And to me, the mainstream press is also synonymous with the owners of pharma, which is synonymous with the owners of the international banking situation, which is synonymous with what I call the rulers of the world. Not elected officials, the rulers of the world. This is my own belief, I believe that this is being deliberately orchestrated. This didn't have to happen. I would've much rather dealt with some, even if the hospitals got overwhelmed, I would've much rather dealt with problems there and some people dying. I mean, even if you say Joe, I haven't been able to do the calculations, but what they're trying to do is flatten the curve.

Dr. Joseph Mercola:

Right.

Dr. Robert Rowen:

They're concerned about a curve like this and they're trying to go like this so that there will be less carnage to the intensive care units and the hospitals. Well the same number of people are going to get it who are going to get it. Whether it's this or it's spread out, you're still going to reach the same number of people. And maybe if you have this slower curve like that, that some fewer people will die because they will have access to respirators. I don't think anybody even thought, because I don't think you have brains up there, I think you just have power up there. I don't think anybody really thought of the numbers of people who might be saved by flattening the curve compared to the massive unemployment and the death and destruction that's going to occur to people from the economic collapse.

Dr. Joseph Mercola:

It already has. It already has. You may not be aware of this, but 10,000 people have already committed suicide because of this in the United States. 10,000 people.

Dr. Robert Rowen:

I didn't know that.

Dr. Joseph Mercola:

10,000. That's now. The collapse hasn't even started.

Dr. Robert Rowen:

Yeah.

Dr. Joseph Mercola:

This brings us to the other topic, which I said we were going to delay until this part of the discussion, which is vaccines. So it's the same argument. So the primary justification is that it's for the greater good. We are going to save people's lives and who can argue with that, unless you look more deeply at the cost. For every life being saved by a vaccine, you maybe have another 10, 20, 100 peoples who are either killed or permanently injured as a result of that vaccine. Is that worth the trade off? It's the same scenario here. They're going to save a few lives, no question with this, but at what cost?

Dr. Robert Rowen:

Right. I'm in agreement with you and I thought that from the very beginning of this, when the madness started. We might save some lives medically. We might. And no one is going to argue about trying to save a life.

Dr. Joseph Mercola:

No, you can't, you can't.

Dr. Robert Rowen:

And they're using that psychology to dumb us down into a total destruction of the economy and there's no doubt... I didn't know 10,000 people had died. Oh my God-

Dr. Joseph Mercola:

Suicide, yeah.

Dr. Robert Rowen:

That's more than Coronavirus already in this country.

Dr. Joseph Mercola:

I think it's close to the total global loss. I don't know what the current numbers are. I thought it was still 9,000 or 10,000 deaths worldwide, which is still relatively tiny fraction of total deaths. You know, it's is crazy. There are more people who die from sepsis, one in five people in this world. 20% of the deaths are due to sepsis, independent of coronavirus. This is a short little tangent back to ozone. So the real push now for sepsis is the Marik Protocol, which is a relatively low dose of ascorbic acid. But I'm wondering, it would seem that using ozone could be an alternative to the Vitamin C Protocol.

Dr. Robert Rowen:

Oh my God. It's amazing. It's an answer, by the way, again, I'm staggered-

Dr. Joseph Mercola:

For sepsis.

Dr. Robert Rowen:

Yeah. Let me address that after I tell you I'm absolutely staggered by that 10,000 figure and we're early.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

This could turn into hundreds of thousands of people committing suicide-

Dr. Joseph Mercola:

Oh, it likely will. And I don't mean to be a pessimist, but this is the simple reality. I mean now we have this fear and panic if you're going to survive and you're in social isolation, which is going to... but loneliness is one of the major risk factors for depression, which is the risk factor for killing yourself. So it's just only going to escalate and you're not going to have access to good food and then with losing your job, I mean, all these people-

Dr. Robert Rowen:

Yeah.

Dr. Joseph Mercola:

You're going to go back... 30%, one in three people will be out of work.

Dr. Robert Rowen:

Yeah. And how many of them have-

Dr. Joseph Mercola:

And half of the families in this country are living paycheck to paycheck. They don't have more than \$400 in their bank account.

Dr. Robert Rowen:

Right.

Dr. Joseph Mercola:

That's it.

Dr. Robert Rowen:

Right.

Dr. Joseph Mercola:

They pulled the trigger on this-

Dr. Robert Rowen:

I believe, I'm like you, I don't have any doubt that this was deliberate. It had to be deliberate. This didn't have to happen, they could have overwhelmed the hospitals, pardon my language, big freaking deal that many extra people, maybe thousands of people would have died-

Dr. Joseph Mercola:

Who are mostly elderly. Not exclusively, but mostly elderly or immunocompromised. And that's not a reason to get rid of them by any means. But I mean these people were going to die from something relatively soon anyway, whether it was corona or the flu, which 36,000 people die from every year. At least, if you can believe the CDC statistics, recent ones. So you know, you're going to die from something or sepsis, which we've got good treatments for, either the intravenous Vitamin C or ozone therapy.

Dr. Robert Rowen:

So now that I'm out of my state of shock, about 10,000 suicides already, we can talk about ozone therapy in the hospital. One of my goals in all of this, is to try to get ozone standard of care.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

And I believe it's running up against a wall, deliberately against a wall, because if ozone and oxidative therapies, including Vitamin C or hydrogen peroxide or ultraviolet blood irradiation got out there, you would see a change in the landscape of medicine in this country and it would really hurt pharma. And remember, we talked about the integration of pharma with the mass media, with the bankers and everyone else and I have no doubt that this information is being deliberately squelched. I know people, I know reporters who were trying to get the story out there and they were told by their higher ups, no go. It's a dead story. Why? Ozone could be put into the ICUs. I have offered no expense, no cost. I don't want to be paid for it, to go into local hospitals and bring those on in there and help. But we have a system that is so corrupt, so vile, that if it's not FDA approved, they will let somebody die.

Dr. Joseph Mercola:

Yeah. No, no question.

Dr. Robert Rowen:

Before they will consider it.

Dr. Joseph Mercola:

That's evil on steroids. So it would seem that this epidemic or pandemic could be a great opportunity. because I know in China they're using intravenous ascorbic acid for this. But it would seem this is an opportunity to use ozone over there because I suspect these guys would be open to it.

Dr. Robert Rowen:

They actually are. And I'm getting some reports from people I know in China. It's very limited, they can't get patients, but the people that they've gotten to with ozone, even who were seriously ill have had a very favorable outcome.

Dr. Joseph Mercola:

Yeah. Yeah. Well good because I think in every crisis, there's a silver lining, and this could be one of them, is that you can establish these new barometers of clinical therapy that are effective, safe, and low cost, which is going to be a key thing when the economy collapses. We're not going to be able to afford these expensive therapies. Just not, the resources won't be there. The economy's going to be crashed.

Dr. Robert Rowen:

So let's go a little bit further in your philosophical.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

Why would they want to do this? Why would they collapse the economy?

Dr. Joseph Mercola:

Well, do you have an answer? I have my suspicions, but-

Dr. Robert Rowen:

My own thoughts is to drive a one world, authoritarian government where we're just drones for the rulers.

Dr. Joseph Mercola:

Yeah. And then consolidating the resources to grab them up. They're basically putting things on fire sale and they're going to grab them all up, control everything.

Dr. Robert Rowen:

That's what I said.

Dr. Joseph Mercola:

They're already talking about the government, I mean this is fascism. They are going to take equity positions in all these major corporations that are going belly up. They're going to own the industries.

Dr. Robert Rowen:

Yeah.

Dr. Joseph Mercola:

That's fascism folks. It's what it is. So it's sad, I don't want to dwell on it because it gets people depressed without at least presenting some positive sides because I think there are some positives to this. I think that it's going to force us to get back to the basics, to understand the lifestyle recommendations that you and I've recommended for all these years that really improve our immune system. You know, avoiding processed foods and sugar and processed oils like the plague and that will help us considerably. So be focused and use these natural therapies and more and more people will be aware of it and then they'll understand the misinformation that they've been being fed by the media sources all these years.

Dr. Robert Rowen:

I'm also afraid of-

Dr. Joseph Mercola:

The truth.

Dr. Robert Rowen:

Aside from owning everything, which we've discussed. I also believe that this is a drive to destroy the rest of the few civil liberties we have left.

Dr. Joseph Mercola:

Yeah. Yeah. Part of that process is the implementation of mandatory vaccines, which is clearly a personal freedom. And you know, it just pains me so much to recall the sacrifices that our forefathers in this country suffered to acquire this personal freedom.

Dr. Robert Rowen:

Yes.

Dr. Joseph Mercola:

So much of us just fail to fully and deeply appreciate until they remove these privileges and they're doing it every time. They did it with the Patriot Act in 2001 after 9/11 and the anthrax scares, which is a massive removal of our freedoms and they're going to use this to leverage that even further and take even more away.

Dr. Robert Rowen:

I don't know if any will be left after this. You might even need a coronavirus vaccine to board a train or an airplane. I see that happening.

Dr. Joseph Mercola:

It's going to be even worse. I mean Gates was talking about digital vaccine certificates. No, I'm serious. It would probably be like China where you just show your phone that you got it. You know, and if you don't have it, you're not going to get on a plane or the train or bus.

Dr. Robert Rowen:

And in the name of public safety, they might actually haul you out of your house.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

And vaccinate you.

Dr. Joseph Mercola:

Yeah, I can see that.

Dr. Robert Rowen:

And here's another thing. They're talking now about paper currency being able to transmit disease.

Dr. Joseph Mercola:

Oh yeah, it's going to go to cryptocurrency.

Dr. Robert Rowen:

Which means they're going to go crypto. Well why not return to what the founders set up?

Dr. Joseph Mercola:

Well, of course you and I both know this.

Dr. Robert Rowen:

We had a monetary system that was based on coin, gold and silver coin. If you're concerned about contamination, you can just drop that into bleach or hydrogen peroxide-

Dr. Joseph Mercola:

Or ozone water.

Dr. Robert Rowen:

Or ozone, and you can't do that with paper that they print out of thin air.

Dr. Joseph Mercola:

Fiat money.

Dr. Robert Rowen:

Yeah.

Dr. Joseph Mercola:

So fiat is another word for fake. It didn't use to be, well, it was always fake. But prior to 1971 you could redeem that fake paper note for real metal. But Nixon changed that in 1971, that was almost 50 years ago now. But you're right, I'm a firm believer in that as we both are and that will still be useful and it will probably be integrated in some way, but it's just sad to see what happens. It's interesting times. You know, I'd have never thought, I don't think most people, I've been studying a lot of people, watching them, and listening to them, and reading them. Virtually no one predicted this, this came out of the sky. No one thought it would come to this, but it has.

Dr. Robert Rowen:

If you had listened to me for the past many years, I've been saying that a pandemic, it's not if it's when. No one could know-

Dr. Joseph Mercola:

Yeah, but when they first announced this, did you believe it was going to happen when they first announced this in December, January? Did you think this was it?

Dr. Robert Rowen:

I was concerned, but I didn't... I mean there might've been some things I could do to act on it to profit, but I'm not that way. I didn't do it.

Dr. Joseph Mercola:

Yeah. Yeah. So I mean it was just like another thing. It was going to be another bird flu, another swine flu-

Dr. Robert Rowen:

Actually Joe, let me take it back.

Dr. Joseph Mercola:

Yeah.

Dr. Robert Rowen:

I knew it was a problem and I put it up on my Facebook page and I said, this is going to be worse than the flu. What I didn't expect is that we would have a coordinated mass media effort to bring down the economy. That, I did not expect.

Dr. Joseph Mercola:

That's what I'm saying. I think no one predicted that and I've been following a lot of people in the financial space and they've been warning about this bubble which just needed some black swan to pinprick that bubble and explode it. Obviously this COVID-19 was the pin, but no one was predicting that to happen, to have this type of response. It just came out of the blue. Very unpredictable. I'm reading a book now by Shoshana Zuboff called Surveillance Capitalism, which is a great book, 500 pages without the references, and it goes into great detail how institutions like Google and Facebook are using their strategies to essentially develop this predictive behaviors and ability to manipulate their behaviors and acquire all this surplus behavioral data. They've been doing this for two decades, two decades. So there's no doubt in my mind that they use this information they've collected the last two decades as sort of a basis for successful implementation of a strategy like this. It's really clear, the surveillance capitalists have contributed to this and they're part of it.

Dr. Robert Rowen:

And I'll share with your viewers also that I have an article in the Journal of Infectious Diseases and Epidemiology, I sent that article coast to coast, George Murray. I sent it to the Glenn Beck people. I've sent it to a number of people. I can't understand why no one in the media that reaches a lot of people will pick up on this. It makes me wonder about them too.

Dr. Joseph Mercola:

Well, there may be other reasons, but anyway. We don't want to be too pessimistic so we want to end at some light notes and notes of encouragement so that there are strategies you can use. You just have to stay calm. I think turning off the news or the TV is probably a good strategy unless you're watching alternative media because it's going to contribute to the fear cycle and the last thing you need to do is have that. You need to know what your local restrictions are of course, but other than that you want to stay positive. Focus on it. Eating good food, healthy habits, make sure you're exercising, sleeping well, and getting outside, getting some sunshine and stay healthy. That's the key to this and whatever they

throw at us, they're going to throw at us but we're going to come up stronger. It probably would be a healthy perspective to view this as a hormetic challenge. What is hormesis? Hormesis is whatever doesn't kill you is going to make you stronger. Yeah, this is an assault. There's no question but so is exercise. So just look at it from that perspective and know that you'll be healthy and stay in the community and there's power in that. We'll be out of this.

Dr. Robert Rowen:

To me, we need to encourage people not to be in a state of fear or panic because I don't think that this is a panic situation for your life.

Dr. Joseph Mercola:

No, it's not. It's not. It's just sad to see this shift in implementing these strategies, but it is what it is and we'll just have to address it.

Dr. Robert Rowen:

Very good.

Dr. Joseph Mercola:

All right, well, thank you for these resources. I appreciate it.

Dr. Robert Rowen:

Thank you for having me, Joe. Good discussion and good to be with you again.

Dr. Joseph Mercola:

Good, good.

PART 4 OF 4 ENDS [01:17:41]