

Discussion #2

[Dr. Pat Castle](#) | [Dr. Teresa Deisher](#)

Topics include bodily health, cures for the coronavirus, and the psychological affects of COVID lockdowns.

Lisa Stover I'm Lisa Stover with LifeSite News and with me now to discuss more on masks and vaccines is Dr. Pat Castle and Dr. Teresa Deisher, two dynamic speakers which bring unique insights and perspective that I'm excited for all of you to hear from today. So first, let me introduce our guests and then we'll dive in with our discussion. Dr. Pat Castle is the founder of the pro-life organization Life Runners. He's a Ph.D. nano-analytical chemist with chem bio nuclear warfare background from his service to the United States Air Force. His related expertise for this interview is gasmask fit testing for protecting against airborne hazards. Pat is also a board member of the Institute for Theological Encounter with Science and Technology. He did ten military assignments, including the weapons of mass destruction defense officer at the base closest to Osama bin Laden on September 11. He briefed generals and members of Congress, and while an Air Force Academy chemistry professor, Pat developed the ethics curriculum. Thank you for joining us. We also have Dr. Teresa Deisher, who graduated from Stanford University School of Medicine with a doctoral degree in molecular and cellular physiology. She has over 30 years of pharmaceutical research and leadership experience with over forty-seven issued patents and four discoveries in clinical trials. She has had extensive scientific and management experience in the commercial biotechnology field. Dr. Deisher is the founder of both AVM Biotechnology and Sound Choice Pharmaceutical Institute. Through the nonprofit Sound Choice Pharmaceutical Institute, Dr. Deisher researches and lectures on the scientific and medical implications of using aborted fetal material in vaccine manufacturing. At AVM Biotechnology, she and her team of scientists have developed a drug with a novel mechanism of action that mobilizes the body's own natural immune cells to fight cancer and potentially covid-19. Dr. Deisher was also one of the plaintiffs in the Shirlee vs. Sebelius lawsuit that shut down embryo stem cell research and was an advisor to David Daleiden in the undercover filming of Planned Parenthood employees discussing the sale of aborted fetal parts for research. Thank you, Dr. Deisher, for joining us today. Well, we have a lot to unpack, so I first would like to start off just with a question for both of you to answer. Just what sorts of censorship have each of you faced during your careers about vaccines and for your views on medicine? And, Pat, if I could start with you and then Dr. Deisher, I'll have you answer this question right after.

Dr. Pat Castle Yeah, we've had to navigate around the big topic, social media stuff for free for many years. And just to use the a word, the a word abortion, it's like the world goes, oh, the a word. But yet they promote it and advocate for it and think that that's a solution It's not a solution to anything. But just using a word in our social media with Life Runners, posts get taken down, you know, using the term pro-life, posts will be taken down. So we've learned to navigate around to use language that describes those things, that makes it past those filters and the censorship. So you've got this has been going on a long time. And I saw just hit the news that LifeSite News that their YouTube channel wasn't just like taken down as a time out or we're reviewing, was taken down every video of LifeSite News. Three hundred thirty-thousand viewers on their YouTube channel are not going to be able to see the truth. So here we are pumping the truth out there. In the early church, they had to go without cars and with sandals across Asia Minor. Dr. Deisher and I looking at the the camera for you, Dr. Deisher you have green things, you know, things growing behind you. So it looks like a pretty good environment. Are you in California, Dr. Deisher's that you're at? Yeah. You're Washington. Yeah. So it's beautiful. So, you know, it's not quite Asia Minor. I was stationed in Asia Minor for two years. As you read my bio at the base closest to Osama bin Laden and 9/11. I lived at an air base and that will come into our conversation on defense in this hour. But in short, that censorship has been going on a long time. And here we are pushing that truth out across Asia Minor today, right?

Lisa Stover Absolutely. And Dr. Deisher, what kind of censorship have you faced, especially in the medical profession and in your research about vaccines or your views on medicine in general?

Dr. Teresa Deisher You know, in contrast to Dr. Castle's experience, we actually haven't faced censorship. We had one post that listed the vaccines for covid-19 for actually the sars-cov-2 virus that was, I think, halted. And we, you know, objected and actually won because everything on that post was factual. So in contrast to other groups, we really have not faced censorship.

Lisa Stover Yeah, that's really fascinating. And and Dr. Deisher, I'd like to start with a question from one of our readers and viewers today on the question of the covid vaccine. And it's link to the use of aborted fetal cells in its creation. So for those watching today, could you share a little bit of background on that for us? Because I know there are some who have probably more information than others on the link that's there. So you could kind of share with us a little bit about that to get us started.

Dr. Teresa Deisher Well, let's let's start with the current history, which actually goes back to the late 1970s. And at that time, vaccine manufacturers switched from using animal cell lines to using cell lines that had been derived from the bodies of aborted babies. And those cell lines are called MRC-5 and WI-38. In the early cell lines and package inserts, they'll be referred to as human diploid cell lines. But it's actually quite easy to trace the history through publications unless, of course, those have been taken down. I haven't checked, but the history is well known where those cell lines come from and the manufacturers did that for several reasons. One, there were concerns about allergic responses to using chicken or egg based production. Those have since really been resolved. They're minor reactions and they resolve within twenty four hours. But that was one of the concerns. And then the other was that they felt that the virus would be manufactured more efficiently using human cell lines. And that also has not held up. So cell lines are used to make the virus that would be put into a vaccine. So vaccines and now we have many different kinds. But we used to have vaccines that contained a virus that either had been made less dangerous or actually killed. So it couldn't, in fact, but it could still cause an immune response. And then other components like saline, salt, and adjuvants are put in there. And preservatives like thimerosal was originally used as a preservative. So that goes back to the late 1970s and actually it was in 1979 that the first vaccine, measles and also the MMR measles, mumps, rubella, was approved in the U.S. using this type of manufacture. And that continues today. So many of the vaccines for the sars-cov-2 virus, which causes covid-19 disease, the components for some are made using human fetal cell lines. There's a new one that they're using now called PER.C6, or the product is tested on human cell lines that they use to express components that the virus expresses so they can see if the vaccines will bind to that or whatnot.

Lisa Stover So one of the questions that was submitted when it comes to the vaccine, people are really concerned about just there's a lot of information out there and there's also not very much information that seems to sort of be hidden. So one of the things that I have seen in this question is [00:09:21] **why is the covid vaccine being marketed as a vaccine when it's really gene therapy?** [5.0s] I don't know if you can answer that directly or just kind of weigh in, but that's one of the talking points that's going around right now. And so what's your insight on that?

Dr. Teresa Deisher You know, why are they marketing it as a vaccine? Maybe for the public to accept it? So what a lot of these new vaccines, and there is a DNA vaccine, but the ones that are approved under emergency use authorization in the US deliver messenger RNA and what that is...so are the code for everything that's made in a cell is contained in the DNA. But it's just like a lot of things. You know, if you have a special map, you don't work off of the map. You usually make a copy. Right, so that your ultimate code or map is not damaged while you're actually doing work from it. And and our cells do the same. They make a copy of the DNA called messenger RNA, and that messenger RNA is actually used for the working process of making the proteins and that we need in our cells. So what these vaccines do is instead of delivering the sars-cov-2 virus or instead of delivering a protein that the virus makes, they're delivering messenger RNA that gets into our muscle cells and tells the muscle cells to make this protein called the s protein. And so the muscle cells will make that and express the spike protein on their surface, which is foreign to our bodies. So immune cells will see that and mount an immune response to that, which would also be an immune response if you were to see the actual virus in your body. It's a new technology. It has... Moderna has been working on it for twenty years, but we've never had an mRNA based drug or treatment that's been approved. So this is really an unknown and the long term safety has certainly not been established.

Lisa Stover Right. And why do you think that that is being pushed out now? With this virus that they can't quite get a handle on and why now? Why would they use that now as their opportunity to push this type of vaccine out?

Dr. Teresa Deisher Well, it's really fast to design the mRNA, right? So and that's just like a computer design. It's not made in a cell line. It's made in a test tube. So it's it's a really fast way to get a vaccine out there. And, you know, the situation in the past year has just created enormous panic and uncertainty. And I think with the first wave, that was very understandable. You know, now we have data from all over the world and it's time for people to sit back and objectively look at the responses and look at how we should respond to this virus. And I just don't see that, which I think is really unfortunate. There's a lot of assumptions and people have their little bucket that they've decided that they're going to play in and they don't want to look at the data objectively. For instance, one of the things that you hear on the news all over the place is a misrepresentation of what's going on in Sweden and claims that not locking down caused excessive deaths and everything. And that's just not factual, that the data does not support that. And so there's there's just been so much panic. You know, once you pump billions of dollars into a vaccine, it's hard for people to say, hey, maybe we don't need that. Maybe that's not the best way. We don't have the safety. Perhaps we should be telling people to make sure they have a healthy immune systems. No one ever told people to take vitamins A, D and E and zinc and quercetin and make sure you have a healthy immune system. And the problem with that is that whether you want to take a vaccine or not, you need a healthy immune system. And we know from publications, Dr. Fauci has published this. If you vaccinate people who are immunocompromised, there's a bad outcome. The papers have been published back as 2009, and Dr. Fauci is one of those authors, so we have in the United States and in many other companies, people living in fear. Fear elevates cortisol levels which kill your immune cells. We have people who've gone under extreme lockdown, and the cancer field knows because they follow caregivers for transplant patients, that isolation and lock down your immune system goes into hibernation. We have fear. We have lockdowns, and then we have people wearing masks constantly and they do not have healthy immune systems. And so for people to go out en masse and take that vaccine, I think is really frightening. We know they don't have a healthy immune system and that's required to have a good reaction to a vaccine, right?

Lisa Stover Absolutely. And so on the topic of masks, I'd like to come over to you, Pat, from your experience in the Air Force with masks. Could you kind of just briefly share, you know, what's the science behind the current mask mandates and what harms do we know of from them on the body, especially where Dr. Deisher saying, you know, if you don't even have a healthy immune system to begin with, could it be causing more harm? What do we know?

Dr. Pat Castle Start with effectiveness. I mean, where, in the masks that the general public is being required in many parts of the nation to wear, they're just not effective. And so my background in the Air Force was one of the areas was gas mask testing for chem bio warfare protection. And we did that. You had to have a seal. You went through a series of motions with moving your body that stayed sealed as you moved around. We would recite something called the Rainbow Passage, which cause different muscles in your face to flex as you enunciated and pronounce these words to see if the seal would break in. The whole time we were measuring particulate matter inside the mask to see if anything got in by way of lighting a candle or particulate matter, having a spray to see if they had any sense of can you smell anything? We'd have banana oil, real strong scent. And so we really tried to have a sealed mass that would protect the troops from any particulates, you know, from a chem bio warfare standpoint. And then you look at where we're at today with wearing these cotton masks have no seals. There's no seal on them. And I remember when we studied dust and bio environmental engineering school at Brooks Air Force Base down in San Antonio in 1994. I remember one of the lessons where they talked about that in unsealed gas mask, a not well sealed, in some respects was even worse because it acted like a vacuum cleaner. So imagine along the seams when you're breathing in and creating a pressure difference, imagine it sucking in. So here you have a hazard in your area, then you're actually pulling it. And so, I mean, think about how how we're just not even close to the mark. And so putting on a... My wife made this for me. And you might think, well, Pat, you know, you don't believe masks work. I don't, and we're going to talk about some of the consequences. But this mask that says, remember the unborn. Hey, if I got to wear a mask into an establishment, at least, I'm going to get

something valuable out of it. I have a message, you know? I mean, and it's been great seeing society doing this, having positive messages, because this is about the grand total of positive impact of wearing a mask is the message on the mask. Notice there's no seal, even the fabric itself, the material of the mask... Particulate matter is making it in and out of that fabric. And Dr. Deisher, you know, I taught biochemistry at the Air Force Academy to cadets and fascinated by biochemistry, you know, you've got a lot more at bats with research, with biochemistry. But it's fascinating when you think about how little understanding there is at hazard control and how much of a hazard is needed and threshold limits and toxicology. So from our standpoint as scientists, we're watching the world from a political, social, political standpoint and just going, oh, did nobody lesson in chemistry class? Has no one actually cracked the book and had some smart conversations? And the answer, of course, is there's agendas. There's reasons why. And you can see all these one-off agendas going on. But in short, as we kind of start this part of talking about masks and consequences. They're not effective. These cotton cotton masks that are being brought in. They have consequences. Dr. Deisher alluded to some of them from a standpoint of great point. Stress increases or decreases the immune system. I mean, when...oftentimes when I've gotten sick in my life after a marathon, after I've exerted myself, you know, this causes stress on the body. And also when you think about times you've gotten sick in your life, oftentimes it's emotional. Dr. Deisher talked about it. Stressed family situations. Something going on. A loved one is sick. And what happens? You get sick because you're stressed. And so this has created...not only hasn't it protected us against a virus, it's created other health issues. Let's do another [indiscernible]. How about just from the social interaction? You know, we know that there's positive interactions that increase our immune system. A lot of those are taken away. Why? We can't see each other. I mean, what's the power of a smile and a good attitude, and a high five and encouragement? You can't even discern that with a mask. And so, you know, people's grooming, you want to just keep going. Orders of magnitude, someone that might not even feel like taking care of themselves. So I don't...why even bother shaving? I got to wear a mask anyway. You know, et cetera, et cetera. You know, and on that note, with grooming in the military, remember, we were we are shaved. One of the reasons we're shaved in the military so we could have a proper seal with our gas mask if we got attacked. A lot of people listening might not even realize like, yeah, I always wondered why the military is always clean shaven. That's one of the reasons. So think about even from the standpoint of, you know...I like a good burly beard and, you know, no shave November, you know, I like it. And I like guys in Montana that want to stay warm. But guess what, folks, when it comes to mask, wear a beard and a mask of any type, you've decreased the effectiveness because you're not getting a seal. And so when you think about that, it's not effective and you think of all the consequences. We just rattled off a few of them that come from that. There is absolutely a cost to the ignorance, to the agenda. And that's what we're talking about. We want to empower people in truth so that they can open up their economy, so they can open up their societies in positive health. I was in South Dakota for the Walk for Life. I was in San Francisco for the Walk for Life and, you know, comparing those two environments. So here in San Francisco, of course, everybody is in masks, even walking outside, Dr. Deisher. So imagine a culture in San Francisco right now. The society isn't just wearing them inside where maybe particulate counts and human interactions increase. We're talking about outside. You remember one of those things when it comes to EPA and OSHA-- "Dilution is the solution to pollution." I mean, we don't want to be in a habit of just throwing stuff in the ocean and going, well, good luck. There's plenty of water, it'll dilute. But there is a point in that because it dilutes it to a non-harmful level. So when we're outside and we have this vast, you know, volume and we're out there in masks, it makes it even more silly. So at the Walk for Life in San Francisco, people are walking around outside with mandated wearing masks outside, let alone inside. Then you go to South Dakota and you feel like you literally portal to freedom. Like it feels like when you go from San Francisco, you're like, wow, you feel like you want to order online one of those New Hampshire license plates, "Live free or die." There's something to even the experience. You can look at the pictures on my Facebook page and see the pictures of San Francisco versus the pictures of South Dakota. People look different. People are happy. Oh, one last little side note before we turn it back over to more science with Dr. Deisher is one of the parish priests in San Francisco. Dr. Deisher going to find this interesting. Big parish in San Francisco, Star of the Sea Parish. The pastor is Father Illo. Okay, listen to what Father Illo said to me the night before the Walk for Life. Pat, we continued with business as usual. We pushed through all these ridiculous laws and I don't know of one single parishioner that has covid or has had covid. Big Parish. This is the pastor. This is the one that's making the mandates on wearing a mask at Mass or not. He didn't have one single person that he has, you know, that had covid. And so, you know, look at

cost benefit. The last note I'll leave and maybe you'll come back to at least a later is not to mention, isn't there some things worth taking some risk for when it comes to human interactions? We drive in our car every day. We pull out of our driveway. We drive out into society in our car. We take calculated risk every moment of our life crossing the street. And isn't it ridiculous how disproportionate the hazard to our precautions of the hazard? It's embarrassing and there's great cost. Back to the science.

Lisa Stover Right. Right. Absolutely. And that brought up a couple...you brought up a couple of points that actually allude to a couple of questions that a few people have submitted. So I'll ask one of these to Dr. Deisher first and then if you want to weigh in, I'm sure you have probably some insight or input on it as well. So on a couple of these questions, I think both of you could definitely answer them because especially with some of the info you alluded to. So one of the questions, Dr. Deisher, that was submitted, they asked, why are experts pushing masks? And people blindly believe in their usefulness when the very basic microbiology tells us that the virus can easily pass through the mask fibers? So what kind of insight could you weigh in on that question?

Dr. Teresa Deisher Well, you know, the CDC actually has data, I believe it's five months old now that in the summer wave, people who always wore a mask, 70, 70 percent of the people who got infected always wore a mask and another 16 to 17 percent almost always wore a mask, which indicates that masks make you more susceptible to the vacuum cleaner, your vacuum cleaner. Right. And when the information first came out of China, this is fascinating. I really would like everyone to calm down and just start looking at the facts and they're not. And when I put them out there, I'll get people around me attacking me. Oh, you're one of those. It's like, no, we're just looking at the facts. But the 2002 and 2003 SARS-CoV-1 had about a 30 percent mortality rate. And when China...you know, people don't trust China, so China's releasing their sars-cov-2, covid-19, infection rates as very low. They say they had ninety thousand infections and six thousand deaths. No one believed that. And so there's like intelligence surveillance where they're supposedly digging mass graves. And then someone came up with 50 million cell phones, disappeared between November to the end of January. And so they need to trust China. And so they said, oh, those are the numbers. And so they plotted. They expected a death rate like they had to the SARS CoV-1, which was actually limited, confined to Asia. Well, I don't think that China's numbers actually were wrong. Maybe it was like a disinformation campaign to scare the rest of the world, because if you look at the infection rate, death rate in countries in Asia and Africa where they do not have the health care that we do. They do not have the clean water. They do not have the food that we do. They only had one wave and very few dead.

Lisa Stover What are they doing different?

Dr. Teresa Deisher Well, maybe they didn't have the fear because they didn't see the 30 percent death rate. There was a video going around. I mean, just predicting 30 to 50 percent of the world's population was going to be wiped out. Well, now we know that even for the most vulnerable, it's a 99.97% survival rate. And the early deaths were caused because people assumed it was like SARS-CoV-1 and they put people on ventilators. It's a totally different disease. And if you put the person on a ventilator, you actually can kill them. So, you know, we don't do that anymore. And so people survive. Ivermectin is very effective to prevent progression of the disease and even prevent infection. In India, they're giving all of their citizens ivermectin. It's a couple of dollars a day. They've only really had one wave. They have a billion people and they don't have the the water and the food and the medical system that we have here or that we have in Britain. So I really think it's time for the Western governments to just take a step back and make some changes. And the vaccines also do not prevent you from getting the infection. They do not prevent you from giving the infection to someone else. The only thing that they have been shown to do is to lessen the severity of the disease. All right. So we do not have effective vaccines and these mRNA vaccines have not been shown to be effective against to prevent the infection. So you need a vaccine where we don't have the safety. It's totally unknown. The humans are being used as the animal experiment. Right. Right. Side effects have been very concerning. It's not going to prevent the infection. It's not going to prevent transfer of the disease. People are still going to have to wear a mask. They're still going to have to social distance, if that does anything at all. And I will say from personal experience and I was terrified when that first video came out with the death rates, predicting that, which was wrong. It was all based on Chinese deliberate disinformation. Right. It does look like China's had very few deaths. So

anything that's being put out there, we don't know if that's propaganda or what it is. But the Asian in the African countries are not having problems with this virus. It's a true statement targeting the Western world. It's time for us to step back and rethink. And I tell everyone not just to how about we step back and just things like data and look at it truthfully and objectively. Sometimes it's like people don't they don't want to say, okay, we probably didn't handle this so well. Well, we were panicked. Okay, now it's time to sit down, breathe and make some changes.

Dr. Teresa Deisher Washington State can breathe without a mask.

Dr. Pat Castle Dr. Deisher, along with making things worse.

Dr. Teresa Deisher Yeah. So, you know, the economy has been destroyed. The harm to children and our our teenagers. Oh, my gosh. Biggest transfer of wealth ever seen in history from a virus that is really a common cold. And these coronaviruses actually this one looks like in one more wave, even if we have more waves because we're still afraid and stuff in in the West, it's going to be a common cold by July. So why do we need a vaccine for a common cold? That's the natural course of history of a vaccine of Ebola.

Dr. Pat Castle And that's a scientist saying amen to a fellow scientist.

Lisa Stover Well, and it's clear and like, Pat, you had alluded to, that there is an agenda going on. And so as a follow up and one of the, well, there's a couple of questions that I think that tie into this. But one of them, while we're kind of on this topic and Dr. Deisher, if you want to answer first and then if you want to chime in. One of them said, Dr. Fauci said in the video that's been circulating that masks don't work. So why do you think he's now pushing for people to wear two masks?

Dr. Teresa Deisher Oh, isn't it three or four? You really can't. Then you really can't breathe. I don't know Dr. Fauci personally, but I do know, you know, let's say you were an official in that position and you have an entire population panicked and panic causes some not normal behaviors. Okay, yeah, you have to have something to try to reassure people. And if people feel reassured wearing masks, then maybe you're going to say wear a mask, even if it's not really healthy for people, you know. You know why...why did they push vaccines so fast? They have to have something, right, to give to the public. And unfortunately, you know, the treatments that do appear to be effective in preventing like ivermectin in the hydroxychloroquine were really not promoted. I don't... In the U.S. I don't know why, but I think it's time, you know, for people... Let's calm down and let's think about some of these treatments. Let's take our vitamins early on, even though I was panicked by that video. That scared me. My company had to work and I brought in vitamins for all of my employees. Some of them now wear masks, but I brought in vitamins and zinc and quercetin, told them to drink tonic water, which has...

Dr. Pat Castle Emergen-C. I mean, we couldn't we could have just, you know, why weren't we dishing out Emergen-C versus fear?

Dr. Teresa Deisher And not one? And our entire company was heavily exposed to someone who was infected, who got very ill about six hours later. Not one of us, not even people with respiratory issues got infected. And, you know, there's other things to do to protect yourself. So I use Flonase daily, which reduces your risk of infection, 80%. That's data...

Dr. Pat Castle That same stuff we've been doing for generations for colds and flu.

Lisa Stover Well, and it's interesting because when you're talking about hydroxychloroquine and these other drugs that other countries are using and it's been successful. So why is this agenda to either censor any doctor who goes out there and says these drugs work or hold them back from the people and make them illegal in different states? So I don't know if either of you want to weigh in on that, but it's it's almost like they wanted the virus to get worse by withholding these drugs that they knew worked. So, why? I mean...

Dr. Pat Castle And even to let the perception of the virus to get worse. And you just hope...you just hope that at the top of the bureaucracy that people love truth in our country and realize the first

duty of government is to protect the people. And how ironic that under the title of protecting the people, they hurt the people. And let's hope that they didn't intend that. Let's hope that the other side, the other administration, the other political party was not trying to set up failure so they could set up being the savior. And, you know, the solution of like, wow, people are getting covid with still with one mask. Vacuum cleaner. They don't work. Oh. Then we'll just recommend to masks. Yeah. To masks will work. And now we're really protecting the people. And so, you know, let's hope that, as Dr. Diesher said, that there was there was well intention of making people feel better. But isn't it interesting as we look back and that's why, Dr. Deisher, you said it's time to rethink. It actually didn't make people feel better. It scared people more. It ushered in more fear. When you see someone in a mask, you don't feel better looking across, you know, the church aisle at someone in a mask. You don't feel better looking at your fellow student with a mask on. This isn't making you feel better. So even presuming that their intentions were good, it didn't work. It wasn't the right answer. It wasn't the right answer scientifically. That was what the episode that I shared with as an expert on testing gas masks and how it applies to wearing masks. So it doesn't work scientifically. And it also didn't work from a psycho sociology standpoint. It didn't work. We're looking at the consequences. So I agree with Dr. Deisher with one correction. She said it's time for us to rethink. I think it's time for us to think because we just didn't think it through.

Dr. Teresa Deisher So when this hit, our elected officials, the scientists at the FDA, the NIH, they were literally drinking water from a fire hose. And working 18 hour, I mean, because of the data out of China. Okay, so they did everything. They killed themselves and and maybe a lot of wrong decisions were made. But it's time for us again to step back and rethink the research.

Dr. Pat Castle Agreed.

Dr. Teresa Deisher We need to thank those people who put in those hours. So let's look at this from a different mindset. Let's look at this from First World Western culture, okay? And why everything went to vaccines and these new mRNA vaccines. Right? So our company is taking an existing active drug and we have made it into a new, more effective drug. We're moving forward to treat no option cancer patients, infectious disease like covid-19 and autoimmunity. All right. We have phenomenal results free in models of diabetes. Absolutely phenomenal. But it's an old drug that we put in a new package. The data is incredible. Why don't I have billions of dollars? Because it's not new. It's not sexy. It's not a different shoe style. Right. That's a Western culture.

Dr. Pat Castle Yes. Something new. Something different. We can't use the same thing for the new virus.

Dr. Teresa Deisher Yeah. Now, the MDs treating their patients love our drug. Right. But it's hard for us to get big funding from, like, Venture capital. They would rather put their money on something new, sexy, untried, potentially unsafe. Right. It's not that they want to hurt patients, which they're inadvertently doing. They are hurting patients because they're not helping us get a drug that's very well tolerated right through these patients. But that's not their intention. Right. Why do we always want new cars? Fashion has to change dramatically. It's a Western culture. And and it's it's again time for our CDC and FDA and NIH to step back and say, OK. Right. You know, we thought these, you know, vaccines are going to be great there, they're it turns out they were new and exciting, but they haven't delivered the promise. Let's take a look at ivermectin, you know, and let's take a look at hydroxychloroquine. And and if people accuse people of horrific and evil intent, you're not going to have that outcome. People don't intend to hurt the environment when they got to have a brand new car every year. Right. But you're not going to change that mindset if you accuse them of deliberate harm. You got to talk to them from a different space, a different angle.

Dr. Pat Castle And, you know, from an approach standpoint, one thing that I know it's time to is to get over the outrage of the whatever handling...mishandling...tried to do the best they could, whatever benefit of the doubt we gave. And I like that you gave scientists the benefit of the doubt of reacting. I was thinking of my own colleagues in the Air Force that had the same training that I have. And I remember thinking when I went on the on the base here in Omaha, Offit and how they were responding with masks and thinking, hey, where's my...where's my colleague? Isn't that colleague of the commanders here saying, sir, ma'am, we don't need to do this. You know, we're

the United States Air Force. We don't need to be messed up on base. We don't need to shut down the armory. But to your point, there is fear and some unknowns. And everyone was trying to catch up. But wouldn't it be great? Starting now in this conversation, we encourage everyone to get over the outrage and let's let's reset. Let's say we got it wrong. So there is consequences. My goodness. Let's look at the stats that you shared about the 99.97% survival of anyone that gets this virus. And of course, those where there is...where the mortality stuff is up in the air. But how about children? Let kids go to school and do that cost benefit... That risk management with kids being able to go to school. It's just... It's not right. If we want to feel responsible, if we want to feel a little bit of guilt, let's look at the consequences to that next generation. How about this trillion dollar covid recovery stuff coming down? You know who sat on? You know, we talk about consequences of bad science, Dr. Deisher, about the economy of consequence? Who's paying that bill? We talked about China. Oh, my goodness. China, from an economy standpoint, has us, you know, in chains. And we've got to think like this because all of this stuff isn't a separate bucket. It's the same bucket. You ready for it? Everyone want to feel patriotic for a moment. It's called freedom. And health affects freedom. Economy affects freedom. Politics affects freedom. This discussion we're having with science, with truth, with facts being objective, it affects freedom. And the consequences are so big for us. They're even bigger for those coming after us. And we need to feel a sense of responsibility. And I am just going to keep echoing what you said, Dr. Deisher. Yup. Let's go ahead and reevaluate. Let's reset. Let's get over the issue. It's going to be embarrassing if we now tell people you really didn't need to wear masks. It really was overkill. We now realize that what you said, 70 percent of those had covid were staunch mask wearers. And did you say another 18 percent were, you know, often mask wearers?

Dr. Teresa Deisher 16 to 17 percent? I think the statistic was.

Dr. Pat Castle Yeah, I think about that. And so it's time for that. And who who are the leaders? Who the scientists are going to go, hey, we did the best we can. There is a lot of competing movements for how we got to where we're at. But let's get it right. Here's...we got enough data looking back. Let's lead. Let's be mature. Let's take care of the next generation. There's a theme for getting over the outrage and making it right.

Lisa Stover Right. Absolutely. And and as we kind of come to the end of this, we do have a couple other questions that I don't want to get to. But they allude to what this discussion has been talking about. So there's kind of two pieces to these questions. One is kind of the physical side of the effects of masks, and one is the psychological side, which you alluded to. So first, one of the questions is, Pat, if you want to answer this and then Dr. Deisher, if you want to add any insight, you have. What psychological effects we know of thus far on masks on children, particularly young children and even infants who need to learn facial expressions and emotions but can't see them because of everyone wearing masks around them.

Dr. Pat Castle My wife is a speech therapist. Imagine her trying to do her job in a school as a speech therapist with a mask on the kids faces. And when she's trying to convince that it's in the interests of the child to be mask free, to do speech therapy, to see how their lips and their tongues are. I mean, there's practical things. And when you think about fear and, Dr. Deisher, you led off the hour and, you know, as a scientist, she went to work on the health implications of fear. Imagine what we've done to our kids with fear and just how that affects them. I guess the analogy I would use is when I think of my my parents. When they would go through training, the duck and cover, thinking that remember during the Cold War stories, everybody, the Cold War, that's from the end of World War Two up through 1989/90 when the wall came down and the Eastern Bloc crumbled that Cold War. During the Cold War, my parents, when they were in school, were doing duck and cover in case we got hit by a nuclear weapon. Now, what's the analogy to this, Dr. Deisher? If you're following my train of thought right now, a nuclear weapon and getting under a desk. It was not going to be an effective safety mechanism to a nuclear weapon, radiation. There had been no, no safety in duck and cover with radiation. That's covid. I mean, cold in these masks. For one, we're putting them through something that is fear. For two, it's not really protecting them. That's what I commented on masks and them not being sealed. And so there's consequences. I think we need to clean it up. Lisa, we need to recognize there are real consequences and let's fix it.

Lisa Stover Dr. Deisher, as I move to you to weigh in on that question, does the psychological effects... Also just tie in this other question that ties in on the physical effects? So both of these questions kind of tie into one. So I'll ask both and then just you can answer it as you wish and then, Pat, if you have anything else to add on the physical effects, then you're definitely welcome to join in as well. And so what do we know about the reduction of oxygen in the body from mask wearing? Specifically on pregnant women or the baby in utero? And then in regards to children, what physical effects do we know of on children who play sports with masks on and even adults who wear them while they wear their mask while they're working out?

Dr. Teresa Deisher Some people I've heard their oxygen levels fall. Depending on the type of mask, it should not actually block your ability to breathe in oxygen per say. But it's the the exhaling aspects. And you're going to have, like, liquids sort of maybe build up on that mask, which then could interfere with the oxygen passage. Right. And you're going to have bacteria that normally breathe out, kind of build up. There's been pneumonia, pneumocystis, lung infections from wearing masks. And and so I think...I think that the health consequences are going to be there. And I think we've already seen them. People don't want to talk about it. But you hear about people hospitalized. You know, maybe they're classified as a covid hospitalization, but it was probably caused by mask. It can be okay if it's freezing out. Right. You don't want to be breathing in freezing air.

Dr. Pat Castle So, if you're training for a marathon, Dr. Deisher, it just increases your lung...your aerobic fitness. You're climbing a mountain. So that's being positive. But there's a lot of health implications. I like how you brought up just the health of the mask itself with bacteria growth and the moisture.

Dr. Teresa Deisher And I think the psychological consequences, you know, historically forcing people to wear masks has been a form of subjugation. So, you know, keeping conquered people, you know, easily conquered and it demeans...it demeans people, it takes away their sense of individuality. And I think for children, the fact that they are not seeing other adults smiling, that have got a lotta problem with trust. And, you know, this has been going on for a long time. And my friends, my my adamant maskers were the ones going around with their hand sanitizer, constantly sanitizing their kid's hands. And they would try to do it to my boys and I would say get away from my kids. Getting exposed to viruses and bacteria is what builds a healthy immune system. Right. So by doing all of that, preventing our immune systems from working, which makes our immune systems more effective, makes us susceptible. Right. If a super infection comes up. So it's been going on for 20 years.

Lisa Stover Right. I have a 14 month old who was born December right before 2020 and before everything shut down. And we would take her with us to the gym and everything. And then now it's like she catches everything. And I told the doctor, I said she spent her first year of life in quarantine almost because, you know, so she wasn't exposed to hardly anything. And I'm always the mom that's like, what if we had exposed them, to, you know, to build their immune system? But I think you're right. I think that the long term effects of that will be really interesting to see on young infants and even the psychological effects. Tying into the freedom question and point that you made, Pat, one of the common concerns right now is if businesses can say do not enter without a mask and enforce it and then down the line, will we even see the same requests from businesses or order from businesses that you must have proof of vaccination in order to go in? Is that, you know, can we can we rely on the freedoms we've always had in the Constitution to protect us? Or is this the way things could go?

Dr. Pat Castle It's just such a double standard, you know, this cry from the other side? My body, my choice? It's a complete odds with the agenda and the control over our bodies. And so it is so speaking out of both sides of the mouth from an ethics standpoint, which is one of my backgrounds, helped develop the ethics program at the Air Force Academy for every curriculum at the Air Force Academy, all subject matter we've built in an ethics thread. And so there is a serious ethics conundrum. And you want to talk about cognitive dissonance, meaning two things they value that are at odds. That's what's going on between the abortion industry, abortion agenda and control. You know, you have no control, but we want control. And so these two...these two values that impact freedom, I mean, obviously with the abortion agenda, they impact the freedom of the unborn child. And then now you have what you just asked about. Talk

about control? Talk about controlling bodies? That's what's happening. And it could get worse to your point, Lisa, because look at the success they had with a cotton mask that does not work. Matter of fact, Dr. Deisher built up a great case and I nodded my head as a fellow scientist, they made it worse. The little vacuum cleaners, they made it worse from a health standpoint. So that's a concern. I guess I'll just conclude with you bet we should be concerned about that.

Lisa Stover Right. And I don't know, Dr. Deisher, if you want to weigh in on even what we can do about it.

Dr. Teresa Deisher Take your business elsewhere. We do not patronize Amazon and haven't done that for a while. We will go directly to the source. We will spend more. So if we want our freedom, sometimes freedom costs. Yes. And maybe we need to absorb some financial costs. I take my business elsewhere.

Dr. Pat Castle And if you've got to go to Lowe's and they require a mask. At least ave a good one. My goodness. If you got to go in to get some...something at Lowe's, a new snow blower for us in Omaha. Make sure that you make sure you're doing some witness. Get some work done out there with...and now you've found something that has had negative consequences. I'm going to go ahead and try to stack up some positive consequences of ridiculous laws for not effective masks.

Lisa Stover So we have one final question that both of you can answer. We sort of discussed this a little bit, but as we kind of talk about kind of what next and moving forward, we can kind of end on that note. So the final question is, is it fair to say that Big Pharma has a control of most politicians today? And what can we do about it? So even from taking our business elsewhere and, you know, even joining in the political spectrum as legislative sessions are going on right now and we look at what what can we do in the grassroots side of things? How can we make a difference there? So, Dr. Deisher, if you want to start and then, Pat, if you want to end.

Dr. Teresa Deisher I believe that the data demonstrates that the pharmaceutical industry is the largest political contributor at local, state and the national levels. And I think there's several things we could do. Term limits would be a really good thing because that would limit the ability for them to influence our elected officials who are supposed to be public servants. And I would say the best thing you could do is stay healthy so you don't need their drugs. And I'm from the pharmaceutical industry. You know, there will be people who need drugs, but it's kind of become the self feeding system where maybe some drugs are creating illnesses. Our children are so unhealthy. And back in the 1950s, they knew, don't ever vaccinate a child who has eczema. I mean, now they don't do that. We have all these children with eczema and new onset chronic autoimmune diseases. So these issues are very complicated though. And it's not, it's not all evil intent. Oftentimes it starts with a good intent and it just billows out of control. Right. So vaccines are considered a national security issue, thinking about biological warfare. Right. That's why we have this mess now, because people were well-intentioned and they wanted to protect the public from biologic warfare. So pharmaceutical companies got carte blanche immunity to make vaccines. And if they didn't have that, we wouldn't have companies making vaccines because they were being sued for side effects and costing so much money. So that was well intentioned, but it kind of ballooned out of control. And it's time for us to make a correction. And to all of the families who suffer from vaccine induced injuries, my heart bleeds. And and it's time for us to to make sure that that doesn't happen to other children.

Lisa Stover Yeah, right. Absolutely. And if you want to weigh in, I saw you get up and get something.

Dr. Pat Castle So my quick echo from Dr. Deisher. So she she led off with, let's say, healthy, let's stay fit. So instead of putting our time and energy into wearing these things, that have proven to be not effective and even make things worse with what we described, the science of that vacuum effect that's pulling the hazard in. Let's instead how about we wear while we're witnessing with fitness, put this shirt on at the gym. I think, Lisa, you have one of them, right? You think you've got it. if you don't, I need to... Good. Perfect. You know, wear your witness. Stay fit. Stay healthy. Take your vitamins, Dr. Deisher said. And that's not to minimize the science that we just discussed. It actually is to put the perspective to actually... We do have the ability in our hands, as you said, Dr. Deisher. Old ways actually are effective with the new hazard. And we have left those old ways. We

haven't focused on take your vitamins, stay fit. You know, don't wear unhealthy things that could make things worse. I agree. And that keeps us what? That keeps us free. It keeps us free to move. It keeps us moving out. I mean, all the limiting of the group sizes in our activities. Think of how our activities have changed. Our freedoms have been really decreased under the guise of something that isn't a hazard that should...that is not being met at a an equivalent like our response is way higher for the hazard. Furthermore, and our response has not been effective. So my final words is what, Dr. Deisher said. Stay healthy. Keep doing those things that... Eat right. Wear your witness. And keep going. Keep speaking truth. If the media is going to start out with censorship, pretty hard to censor this, huh, Lisa, at the gym. I don't think Google or Facebook is going to be able to censor my jersey on a treadmill here in Omaha. So these are things we can. Stay free. Stay free, stay healthy.

Lisa Stover Right. Absolutely. Well, thank you both so much for your time today. For being on this panel, for weighing in with your insight and unique perspectives. We're just so grateful for it. And I know, even I got a lot out of it and I know everyone watching it probably was just taking notes like crazy. So, just so glad that you guys are able to be here today and and share and just be the witnesses that you are in your unique spheres of influence as well. So thank you for all you do, for life, for your family, for everything. And we're just so grateful for you. So thank you so much. And for all of you watching and listening today, I hope that you'll continue with this conference and really enjoy and take in all the information that you can. Once again, I'm Lisa Stover with LifeSite News.