Dwight:
Is it a hiatus or is it just a little bit of a break or being busy? It's a number of things, episode eight. I think, episode eight (correction: nine).

Dr. Bogner:
Yeah.

Dwight:
Interesting topic, but I guess this kind of tells why it's taken a little bit of time, but if different new things couldn't make you go crazy to a certain extent, all these new things pop up, but today, we're going to talk about cyanide poisoning, interesting enough, which that results from the exposure to any number of forms of cyanide, and we're going to get into that a little bit, where that may come from in everyday life and what are the different forms of it.

In symptoms, obviously, death is a big thing for cyanide that's associated with, but headaches, dizziness, fast heart rate, shortness of breath, and vomiting. And then, you go into seizures and your heart rate becomes very slow, the blood pressure loss, and then cardiac arrest finally, and that's usually what ends up taking people. But if you're doing it in very, very micro, micro amounts over periods of time, you got to be able to chelate that and get that out of your system. As we all know, the liver, your friend is going to be the one that's going to help you do the cleaning out of the system, and that's all being associated and helped by glutathione production in your body. And then, what helps glutathione work accordingly is going to be other minerals, and it all comes down to a number of different things.

So, I think one of the aspects of why this is new and topical diagnosis of it is very, very difficult, and when you start to see theories and things come into, you almost kind of start to look at the matrix of where this comes into play and what this potentially can be affecting, and if it has horsepower behind it, it's a contributor. It's just along the road. It's contributing to it or not, but you got to get removed from the exposure and you have to go through decontamination. So, if you're to look these things up online, you're going to have some pretty rigid explanations of how to go through these aspects, and there's definitely tools that are out there.

I'm sure there's some wonderful new Rx commercials we could blow into the podcast and sponsor it, that could help you with cyanide poisoning that you could possibly have some tremendous co-pays on, and there also might be some different types of supplements and minerals that have been around for a hundred years, ivermectin, that would be non-patentable and possibly help people as well, but with today, talking a little bit more about cyanide in your everyday life, more importantly, foods and food production. Mr. Bogner, care to take?

Dr. Bogner:
Yeah. What a great summary, Dwight. Like you said, the conundrum is kind of that we have a lot of evidence of cyanide poisoning in the acute phase, either intentional or accidental. In our industry, a lot of industrial cyanide exposures are there and we have protocols in place of how to properly manage cyanide toxicity if the patient is not expired.

Dwight:
Well, I mean, it's in a lot of... Well, I guess, that's assumption, it's in a lot of chemicals. It's in a lot of industrial situations. But let's talk about industrial situations. I mean, you can be part of manufacturing where there's humans involved or humans in the environment. And then, there's going to be products that are made, being manufactured with different chemicals that become trace in products that might be produced that go for human consumption, and we have to remember that with the FDA. That's the governing body for the United States to make sure they set the limits for the

minimal amounts. Yeah, FDA. So, there's a minimum amount, parts per million or parts per billion that would be acceptable to be in products or in something that's going to be consumable or that you're going to ingest that the FDA would say, "It's cool. It's all right."

Dr. Bogner:
They basically say that the minimum amounts that are found in the foods, for example, are probably not causing harm, but that is in a person that has proper detox pathways. And the way we detoxify cyanide is fairly complicated and requires especially a process called sulfation to occur, and a lot of people have problems with sulfation, either genetic or through heavy metal toxicity that prevents it or glyphosate.

Dwight:
Well, what's sulfation?

Dr. Bogner:
Sulfur is needed in the body to detox the problem.

Dwight:
Let's be elementary here. What's sulfur?

Dr. Bogner:
Sulfur is-

Dwight:
It salt?

Dr. Bogner:
It's an organic chemical that's found in nature, that the body uses to detoxify. It's found in minerals. It's found in cruciferous vegetables. It's found in eggs and garlic and onions. It's just needed. We can't produce it, so we need it, but in order to utilize the sulfur, we need to have genetics working properly to provide it in a form that we can use, and these genes are often inhibited by chemicals like heavy metals, by glyphosate especially. Stephanie Seneff did a lot of work on that.

So, even if we eat those foods, it's often not enough to provide the type of sulfur that we need to properly detoxify, so the issue is if we are genetically predisposed or we are toxic with these chemicals that prevent sulfation, we have even minuscule amounts of cyanide entering the body, and the odd thing is there's nothing really published in regards to chronic exposure to or chronic cyanide toxicity. Zero studies in neurocognitive diseases. No study has ever been done to detect cyanide in autism or Alzheimer's or schizophrenia or whatever. Recently, I had some patients do home tests with cyanide and lo and behold, they're sky-high so they can't get rid of it. It's a big concern, so we are currently looking into this. We're going to study it.

Dwight:
Who's we?

Dr. Bogner:

Well, we're working with a university to investigate this. We're going to study about 40 children with autism. We're going to measure all of these markers, and then intervene and then measure these markers again to see if our intervention was successful. Yeah. Cyanide is in your food. It doesn't have to be industrial or anything like that. Also, it's produced by bacteria, yeast, mold, bacteria. If you have a gut test of some sort, go look for klebsiella. Go look for pseudomonas, E. coli. They all can produce cyanide as metabolic byproduct. Yeast can do that. Mold, Aspergillus niger. So, cyanide is part of our everyday life. However, if we have things like bacterial dysbiosis in the gut or yeast overgrowth or mold, could it be that we have excess cyanide more than the diet, and then if you have these susceptibilities. Another source of cyanide, believe it or not, vaccines. Vaccines contain cyanide.

Dwight:
That's pretty bold.

Dr. Bogner:
That is bold. Well, ammonium thiocyanate, look it up. It's right on the package insert. It's used in the manufacturing process.

Dwight:
Which vaccines in specific?

Dr. Bogner:
Hep B.

Dwight:
Hep B is given right after birth to protect from sexually transmitted disease should the child decide that afternoon to go out and let themselves out. Right?

Dr. Bogner:
Yeah. Unless in the morning, they did some IV drugs prior to that.

Dwight:
Well, the drugs as well.

Dr. Bogner:
Needle sharing, yeah. So, hep B is a complete fraud in my opinion. Especially because we test mothers in pregnancy for hep B, so why do we need to give hep B? And then, I worked in the hospital for 12 years. I asked neonatologists, pediatricians, "Why do you give this crap?" Never ever could I have gotten a good answer for that.

Dwight:
Because they were told to.

Dr. Bogner:
Yeah, they just don't know. It fits the schedule, whatever, to prevent Hep B, prevent liver cancer in your baby. I'm like, "Yeah, you see that a lot." So, it doesn't happen. If you look at the mechanisms of cyanide, what does it do? It really messes up the mitochondria. It inhibits this enzyme in mitochondria, and remember the mitochondria are really the

powerhouses. They turn food into energy in our bodies, and when cyanide is present, it prevents the mitochondria from doing their job. It attaches to this molecule called cytochrome c oxidase, and that's part of the energy production process. So, when you have that present in mitochondria, you can't produce energy. So, the cell produces lactic acid and you produce this acidosis, and this acidosis is the ground for dysbiosis, for bacteria that thrive on low oxygen content to grow, and then it produce more cyanide. That's why it's kind of a chronic thing.

In addition, cyanide chops off the iron on red blood cells and produces this ferric iron state. It's called methemoglobin. That forms and it does that because that iron that gets chopped off of the hemoglobin is part of the detoxification process of cyanide, but that renders the red blood cells unable to carry oxygen. If you look at the symptoms of autism, for example, what is it really? It's a lack of oxygen in the brain, inflammation. If you look at the symptoms that we exhibit, we have functional MRI studies in autism that demonstrate that there's lack of oxygenation in areas of the brain.

I just had a patient the other day with an MRI that showed decreased oxygenation of the cerebellum. But the problem is that when the methemoglobin forms at the particular stage, the last stage of detoxification, the body doesn't have any sulfur to get rid of it. So, the cyanides just starts to accumulate and the body's in a constant state of trying to have the first several reactions, "Go, fine, use the iron from red blood cells," and then it gets stuck at the last step because it doesn't have any sulfur. So, not only are you cyanide toxic, but you continuously seem to have lack of oxygen.Â

If you look at the effects on the brain particularly, from my reading, it tends to affect motor neurons, and it seems like motor neurons are involved in autism in regards to the expressive motor coordination in children. The intellect is there, but motor neurons make you speak. If you want to say something, it requires motor neurons to make your muscles of your mouth move or to coordinate your behavior. Coming up from the brain, from your cerebrum, the messages need to be sent down the brain through motor neurons, and if that's discoordinated because of toxicity, low oxygen, and cyanide, then you have those symptoms. You basically can't control your body, and that's autism right there. When they studied a population in England, for example, whatever industrial workers that were exposed chronically to cyanide... Remember, you can ingest cyanide. You can become toxic from topical.

Dwight:
Who was?

Dr. Bogner:
What's that?

Dwight:
Who was?

Dr. Bogner:
There were some people that worked in the mines and they were exposed to cyanide fumes. So, you can inhale it. You can get toxic from contact with your skin or from ingestion. And there were some people that were exposed to this stuff for 20, 30 years, and they asked them, "What kind of symptoms do you have?" And a lot of them had cognitive symptoms. Some of them had problems speaking, and interestingly, some of them had what they called rapid hand shaking. Isn't that something that we see in autism, flapping your hands?
I don't know. It's a correlation. Is it a causation? I don't know, but it's certainly something interesting. You can do a home cyanide test. Order it $10 off Amazon. Check your saliva. Check your urine, and see if it turns up blue. The deeper the blue, the more cyanide you have. If you have that positive, go get a blood test. Request checks for it. Cyanide, thiocyanate, methemoglobin, vitamin B-12, those are the things you should measure. Go measure it if it's high. In fact, if it's high, go to the hospital. Tell your primary care physician to send you to the hospital because they need

treatment intravenously with that potentially. And if they don't, consult with me. We can figure it out and find solutions.

Dwight:
It's very, very interesting. It just seems like it's another continuous link that we can never get away. It could be another link that's adding to the entire layout of what's going on.

Dr. Bogner:
Oh, yeah, it does.

Dwight:
Yet at the end here, you're saying, "Well, then if you take this $10 test off Amazon and you have elevated cyanide in your body, go to the hospital and just show them the test. Wouldn't doctors there be pretty amazed to see that type of information hitting them in the ER?

Dr. Bogner:
I have several patients now with the blood test pending, so we'll see what happens. I certainly will send them to the hospital if that's true, that their cyanide is high, and we'll see what happens. I doubt that anything good will come out of it acceptance-wise from Western medicine, but we'll see.

Dwight:
I wonder what kind of protocol they're going to put them on or antibiotic. How would-

Dr. Bogner:
No. That's a sulfur component, sodium nitrate, hydroxocobalamin. Every country's a little bit different. Germany treats it different that the UK than the US, but-

Dwight:
Interesting.

Dr. Bogner:
Probably, they would have to Google it first.

Dr. Bogner:
We'll see.