



- Dr. Drew Sinatra: It's summer, and that means you'll be outside a lot more, which brings to mind a big concern of mine — ticks and Lyme disease.
- Dr. Steve Sinatra: Today, we'll be talking to Dr. Lee Cowden, who has over 30 years as an integrative physician.
- Dr. Drew Sinatra: Dr. Cowden is best known for his treatment of Lyme disease. We'll be picking his brain to find the best, natural ways to treat this insidious disease and his Cowden Support Program.
- Dr. Steve Sinatra: We'll also be talking about Dr. Cowden's new book, *No Doctors Required*, which I contributed to, and his thoughts on how spirituality can enhance your overall health.
- Narrator: Welcome to **BeHEALTHistic**, the podcast that's more than just health and wellness information — it's here to help you explore your options across traditional and natural medicine, so that you can make informed decisions for you and your family. This podcast illuminates the whole story about holistic health by providing access to the expertise of Drs. Steve and Drew Sinatra, who together have decades of integrative health experience. **BeHEALTHistic** is powered by our friends at Healthy Directions. Now, let's join our hosts.
- Dr. Drew Sinatra: Hi folks...if you like what you hear today, and you want to listen to future conversations on all things integrative and holistic health, subscribe to our podcast at **BeHEALTHisticPodcast.com**. Also, check out and subscribe to the Healthy Directions You Tube channel, which features video versions of our episodes, plus extra videos you won't want to miss. And finally, we have more with me, Dr. Drew Sinatra, my dad, Dr. Steve Sinatra, and other health experts at [HealthyDirections.com](http://HealthyDirections.com).
- Dr. Drew Sinatra: Welcome, everyone, to another episode of **BeHEALTHistic**. We have Dr. Lee Cowden on the show today. He is Chairman of the Scientific Advisory Board, and Professor of the Academy of Comprehensive Integrative Medicine. He has been a U.S. board-certified cardiologist and internist, as well as a licensed homeopathic medical doctor. He recently retired from patient care and is now teaching full time. He has over 30 years of experience treating cardiovascular disease, cancer and other chronic diseases with his integrative approach to medicine.
- Dr. Drew Sinatra: Dr. Cowden has pioneered successful, integrative treatments for many medical conditions, but is probably best known for his treatment of Lyme disease. He is widely sought after for his knowledge and skill in practicing and teaching his various integrative techniques. He has successfully helped patients with health



issues that conventional medicine doesn't have answers for, and doctors in a variety of medical specialties have sought out his expertise. Dr. Cowden developed the Cowden Support Program, which successfully treats people with Lyme disease. We'll learn more about these methods in our conversation today.

- Dr. Drew Sinatra: I should also add that Dr. Cowden is a close friend and colleague of my dad. Welcome to the show, Dr. Cowden.
- Dr. Lee Cowden: Thank you for having me on your show.
- Dr. Steve Sinatra: Dr. Cowden, this is Drew's dad, as you know. Drew, I don't know if you know this story, but I like to tell it just to introduce Dr. Cowden. About 25 years ago, a patient comes into my office, referred from Dr. Cowden from Dallas, Texas. The patient had heart disease. The patient came in; the patient also had liver cancer, as well. I saw the patient, and I tried to call Dr. Cowden back to give him my assessment. But he was busy in his office, and his office said, "We'll get back to you." And I gave them my home number and my office number.
- Dr. Steve Sinatra: Lo and behold, it's 11:00 at night. I wasn't on call that night, I was sound asleep. And I get this phone call from Dr. Cowden. I'm dead to the world, I was totally exhausted. And he says, "Yeah, this is Dr. Lee Cowden, you called me from your office today." I said to Lee, I said, "Oh, yeah, thanks for getting back to me." I was in a slumber, I was half asleep. I said, "Yeah, you sent me this patient. And, uh...what kind of doctor are you, anyway?" He said to me, "Well, I'm just like you, I'm a board-certified cardiologist." I said, "Well, wait a minute...what's a board-certified cardiologist treating cancer for?" And I'll never forget it, it was one of the most profound statements I've ever heard from a clinical physician. He says, "Somebody has to help these people." So genuine, so pure, so thoughtful, so heartfelt. Immediately, I wanted Dr. Cowden as a friend and as a colleague after those comments, because I knew it was heartfelt and it came from his heart.
- Dr. Steve Sinatra: So that's my introduction to Dr. Lee Cowden, I think one of the best physicians in America right now. So I'm really pleased that he's on our show. And Drew, he's done a lot of work with Lyme disease over the years. He has these interesting formulas. And I have to tell you, I came down with Lyme about 20 years ago. And I did the Samento and garlic combination.
- Dr. Steve Sinatra: You know, Lee, I never had occipital headache in my entire life. I don't get headaches, I never experienced it. But I was getting occipital headache. One of the clinicians that I saw, actually, she was a spiritual healer. She said, "I'm getting the vibration of Lyme disease." We live in Connecticut, we only live about four miles from Lyme, where it all started. So it made sense to me. So I



was taking TOA-free Cat's Claw, Samento, and I was taking garlic. And that combination for a year, after three or four months, my headaches went away and I never experienced it again. Anyway, that was my introduction to Lyme disease a couple of decades ago, as well. So that was kind of interesting.

Dr. Steve Sinatra: So anyway, I'm so glad you're on the show today. I'm sure you can give our listeners incredible wisdom and pearls about...not only all the medicine you have accomplished in your lifetime, but certainly Lyme disease, as well. Because you wrote that chapter in our textbook in medicine on Lyme disease.

Dr. Drew Sinatra: Yeah, Lee, we're going to dig into lots of Lyme-related things today. I'm so curious if you could share with our listeners, and I don't know the answer to this question either, is how did you get involved in Lyme disease?

Dr. Lee Cowden: Well, a naturopathic friend of mine in Dallas came to me when I was hosting a cancer conference over in Fort Worth. She brought her grandson with her, and he was severely ill. Couldn't go to school, his grades had gone from As to Ds and Fs, and couldn't remember anything. Bad fatigue, headaches, lots of symptoms.

Dr. Lee Cowden: She had taken him to a Lyme-illiterate physician who said, "He's got Lyme disease." And he had treated him with lots of different pharmaceutical antibiotics, and he got progressively worse.

Dr. Lee Cowden: So she brought her grandson to this conference and said, "What do you suggest I do for him?" We happened to be standing close to the Nutramedix exhibit booth there in the exhibit hall. And I said, "Well, this Samento is supposed to be pretty good against a lot of different infectious illnesses. Let's muscle test it, let's energetically test it and see what we get." So I tested it and she tested it; she was a skilled muscle tester. And we both got that it would likely be very beneficial against this infection that he was dealing with.

Dr. Lee Cowden: So I said, "You need to go back to the Lyme-illiterate physician, get his permission to stop all the antibiotics and start taking the Samento, and see what happens." So she left the exhibit hall, and I didn't hear from her again for a couple of months.

Dr. Lee Cowden: But I learned later that she had taken him home, and he had decided that he was going to...he was sick and tired of taking the pharmaceutical antibiotics. He decided on his own to stop taking all those, and start taking the Samento. He did that, and within a month, he was a whole lot better. Within two months he was completely well. So she called the Lyme-illiterate physician and said, "I'm pretty sure this Samento got him well." And the doc said, "There's no way in the world.



There's no herb that's as strong as the antibiotics we've already used." It was a spontaneous, miraculous remission, he called it.

- Dr. Drew Sinatra: Wow. And that's only with Samento by itself, nothing else added on?
- Dr. Lee Cowden: Well, she was giving him some herbs for drainage and homeopathics for drainage, and so on. So she was trying to support his organ systems. But yeah, it was predominately Samento, as an antimicrobial.
- Dr. Lee Cowden: So he said, "I'll prove it to you. I'll give you some of the patients that have failed antibiotic therapy, and you can put them on your stupid Samento, and you'll see that it doesn't work." So he sent her over 50 patients with advanced Lyme disease that had failed antibiotic therapy, and every one of them improved to varying degrees, 30-70%.
- Dr. Lee Cowden: And so she talked me into doing a controlled trial with her. I said, "I don't have time to do research." She said, "You don't, you just have to show up. You don't have to do anything else. I just need somebody with credentials to watch what we're doing." I said, "I can do that." So we had the Lyme-illiterate physician refer us 14 pairs of patients. One of each pair went into our control group, and the other of each pair went into our treatment group. We gave them the Samento, and a variety of other drainage remedies, and other things. And the question we were trying to ask is, can we make a difference in patients that have failed standard treatment therapy for Lyme disease?
- Dr. Lee Cowden: At 10 weeks, we had a 70% improvement in the treatment group and 5% improvement in the control group. By 18 weeks, we had 90% improvement in the treatment group and still 5% improvement in the control group. So we concluded that, "Yes, indeed, it worked."
- Dr. Lee Cowden: The company that provided the Samento, the Nutramedix company said, "Can you write up what you did, so we can at least have that for reference?" I said, "Yeah, sure." So I wrote that up and sent it to them. Once they got it, they said, "Can we post this on our Ecuadorian website? It shouldn't get anybody into trouble in Ecuador." I said, "Okay. That's fine." So pretty soon, I started getting phone calls from people all over the globe who had read that article on the Ecuadorian website, and said, "I want to come see you as a patient." Right? So I got swarmed with Lyme patients there in the next couple of years.
- Dr. Drew Sinatra: That's how it continues to grow.
- Dr. Lee Cowden: Yep. I learned a lot about it during that few years there, that I was focusing almost exclusively on that.



Dr. Drew Sinatra: Yeah, well, I think for our listeners, generally speaking with Lyme disease, a lot of docs just jump to the antibiotics. They jump to the doxycyclines, they jump to the other different antibiotics. And sometimes they work, but a lot of the cases, they don't work.

Dr. Drew Sinatra: And with where I work, very similar center, I guess, that you have, it's integrative medicine. And we get all these antibiotic failure cases, and so, you really need to think outside the box and try different herbal medicines and drainage remedies, like you mentioned.

Dr. Drew Sinatra: I love the Nutramedix products, we use them in our clinic all the time. We've had the Samento, the Banderol, onboard for a long time. The Burbur, of course, for detox. I definitely couldn't practice Lyme disease and treating Lyme disease without herbal medicine. It just wouldn't happen for me.

Dr. Lee Cowden: Yep. Yeah, it can make a huge difference. In 2006, I got a call from Dr. Richard Horowitz, who said, "I have 10,000 Lyme patients in my practice, and 500 of them are doing very poorly. Do you have any ideas?" And so by that time, I'd gotten quite a bit of experience treating Lyme patients with natural therapies. So I said, "I'll send you a written protocol by email, and you can buy the products from Nutramedix, and try it on some patients and see what you think."

Dr. Lee Cowden: So he did that for close to 100 patients, and over the next six months, 70% of them that had failed antibiotic therapy were completely well. And so he presented that at the Lyme and Associated Disease Conference in the northeast that year.

Dr. Lee Cowden: And about two years later, we had the same question from a doctor over in Germany. They said, "Can any of the herbal therapies help when antibiotics fail?" We said, "Yes, Dr. Horowitz has already proven that." They said, "Well, we want to do a study also." So they did a study with 20 patients, and also proved that 80% of the patients were markedly improved within about nine months, on their study.

Dr. Drew Sinatra: And Lee, as we're talking about Lyme disease, I'm curious to get your perspective on...I always think of Lyme disease as an umbrella term, including all the different co-infections that are underneath it. Whether it's Babesia or Bartonella, Ehrlichia, Anaplasma — are you referencing all those infections under the umbrella term of Lyme disease?

Dr. Lee Cowden: Yes. Around 2010, I was asked to go give a lecture about Lyme disease in Australia. And I prepared my slides and I sent them over. And they said, "Oh, no. You can't talk about Lyme disease. We don't have Lyme disease in Australia." I



said, “You want me to talk about Lyme disease, but you don't want me to talk about Lyme disease? I'm confused.” They said, “Well, an entomologist down here evaluated 5,000 ticks and didn't find *Borrelia* in any of the guts, so we don't have Lyme disease here. We still want you to come talk.” So I said, “Okay. Well, I'm going to come talk about multi-symptom, multi-microbial inflammation, because there's lots of people that have that, and it doesn't matter whether you give them the label of *Borrelia*, or *Bartonella*, or *Babesia*, or *Ehrlichia*, etc. This treatment program works for all of those.”

Dr. Lee Cowden: So I made that presentation, and they started using that treatment program down there. But obviously, not for Lyme disease, since they don't have Lyme disease down there. But they had great results. The patients, oftentimes, they didn't even do the test to see what they had, they just started empirically on the Cowden Support Program, and found that they improved.

Dr. Lee Cowden: The beauty of the herbal treatment program is that it's very, extremely broad spectrum antimicrobials. And so, you don't have to know the name of the bug to kill him, you just have to try it empirically — or if you do muscle testing, or electrodermal screening — you do the energetic testing to verify that it's the right treatment, and then proceed.

Dr. Drew Sinatra: That's great, I love that. What are you using these days for testing purposes? Are you into the Zyto still?

Dr. Lee Cowden: Yeah, I still use the Zyto quite a bit. That's a good electrodermal workhorse. I call it a “quantum lie detector.” If you go to the police department, they put a couple of electrodes on your hands and then they start asking you questions. And then, they're looking at the amount of electrical conductance through your skin as they pose each question. They usually know that you're going to lie before you even say anything, because of the electrical change on the skin. Because when you get stressed about...having to think about speaking a lie, you have an increase in the perspiration on the skin, that increases electrical conduction. And so then you have a change in the electrical conduction, as a result of that.

Dr. Lee Cowden: But with the quantum lie detector, we're not asking questions with the lips. We're asking questions by putting frequencies into the patient, into the body, or placing a substance onto their body that has frequency generation, as well. And then see what kind of galvanic skin response change you get. So I found that a useful tool.

Dr. Lee Cowden: In ancient Hebrew tradition, it was said that if one person said it's so, it's possibly so. If two people say it's so, it's probably so. If three people say it's so,



it's so. That doesn't work in this country, because there's too many pathological liars — but it does work with the electrodermal screening and muscle testing combination. So if I do electrodermal screening with the Zyto, and I find two different tests say the same thing, then I do a muscle test and it says the same thing, then I know it's almost certainly so.

Dr. Drew Sinatra: Are you still doing any of the conventional labs, still? Or are those just useless through LabCorp, Quest, and even with something like IGeneX?

Dr. Lee Cowden: Well, it's a double-edged sword because there's at least 30% false negatives. And so, you do the test and then you start the treatment for a patient that has a false negative test...then you get attacked by a licensing board, because you're treating something that didn't exist.

Dr. Drew Sinatra: Exactly.

Dr. Lee Cowden: Sometimes we're better off just empirically treating and using the energetic testing to guide your process.

Dr. Drew Sinatra: Are you familiar with the ArminLabs EliSpot test?

Dr. Lee Cowden: Mm-hmm, that's a pretty good test. It's considered a little better than the ones that are presently available in this country. My friend, Dino Prato, is developing a new lab, it should be opened in the next month, I think, called Genetics First. And I think that one will be a better lab than any other labs out there, for diagnosing Lyme disease.

Dr. Drew Sinatra: Speaking of testing, let's jump into symptoms. What do you see as a general constellation symptom, where you think of Lyme disease? I know it's very broad, of course, but are there any key, key symptoms there that stand out?

Dr. Lee Cowden: Well, yeah, there are a lot of symptoms that are commonly present. And then there's hundreds of other symptoms that are sometimes present. But the rule I have is, if you have a patient with a variety of odd symptoms, think first Lyme disease, because you'll probably be right.

Dr. Lee Cowden: Sometimes the symptoms that show up can be from a fungal infection, or from parasites, or from...you know, worm parasites or protozoa parasites, or it can be from electromagnetic fields. But oftentimes, it's from a combination of the above. So you have Lyme disease and fungus, because they took antibiotics and the antibiotics killed off the friendly bacteria in the gut. And the pathological bacteria overgrew, and the fungus overgrew, and then they have all the symptoms from the fungus that's in now. And the electromagnetic fields



stimulate the growth of Lyme-related microbes, that also stimulate the growth of fungi that are in the body. So if you've got electromagnetic field exposure, you can expect all the symptoms to be worse.

Dr. Lee Cowden: On the Ecuadorian website, Nutramedix.ec, there's an article in the science library where it shows how over 350 different conditions are caused by Lyme disease. So you click on any one of those, and it takes you to the article in the peer-reviewed literature where that is proven. And so, it can cause cardiac arrhythmias and congestive heart failure. It can cause arthritis and myalgias and arthralgias. It can cause brain fog. It can cause multiple sclerosis-like symptoms. It can cause encephalitis. It can cause a variety of gastrointestinal symptoms. So, it's all over the map.

Dr. Lee Cowden: And what I find is that the symptoms vary more depending on what unresolved emotions the patient has than what type of bug they have. What I mean by that is the Chinese figured out 3,000 years ago, that if you have unresolved anger, it's going to hang out in the liver and the gallbladder and the bile ducts. And so, you'll have biliary symptoms if you have Lyme disease in that patient, because the unresolved anger and frustration hanging out in the liver and the gallbladder causes physical toxin accumulation in the liver and gallbladder. And then that causes microbes to accumulate in the liver and gallbladder. And pretty soon, that's where the bulk of your symptoms are. But if you have fear, it's going to show up in the kidneys and the urinary bladder, and so on. So, different emotions result in different symptoms.

Dr. Drew Sinatra: I like that approach.

Dr. Steve Sinatra: Drew, let me jump in here, because Dr. Cowden said some incredible pearls, and I want to make sure our audience gets it. So basically there's multiple symptoms you can have with Lyme disease, but I think there's an important key here. If you're a person, and you've gone from doctor to doctor, and the doctor can't figure it out, or the clinic can't figure it out, and you have multiple symptoms, you either have undiagnosed Lyme disease, because a lot of the tests are false negatives, false positives, as you mentioned. You could have mold, Lee mentioned that as well, especially black mold. And the electromagnetic intoxication. Lots of times, these patients have all three. If they're sensitive to EMF, they've had mold exposure, they got bitten by a tick — and now they're in a mess.

Dr. Steve Sinatra: And it takes a really astute clinic or a physician to figure this out. Because if you go to a doctor and they can't figure out what's going on with you, it's either undiagnosed Lyme, black mold, or EMF, or all three, or a combination of two or three. But that's what I think the diagnosis really is. And that's what I want our



listeners to get. So if our listeners are struggling with an illness, and nobody's figured it out, this program is for you.

Dr. Lee Cowden: Yeah. I would say this too, Steve, that if the doctor can't figure it out, then pick one of those and treat empirically one of those. If the patient gets better, you say, "Yep, that was one of them."

Dr. Steve Sinatra: Right, that was one of them. Now let's go to the other one, I agree.

Dr. Lee Cowden: That's right.

Dr. Drew Sinatra: Well, Lee, let's talk about your formulas then, the Nutramedix formulas. Because you mentioned Samento from the beginning — what has evolved for you over the years, in terms of how you treat Lyme disease and perhaps these other co-infections?

Dr. Lee Cowden: Yeah. Well, Samento is a pentacyclic oxindole alkaloid type of *Uncaria tomentosa*. *Uncaria tomentosa* is the botanical name for Cat's Claw. It's not being cruel to animals and jerking little claws off of cats, but this vine that grows 100 or 200 feet up into the canopy of the Amazonian forest has little hooks on it, coming out of the side of the vine. They look a whole lot like the claw of a cat. And the active ingredient is found in the bark, right under the surface of the bark.

Dr. Lee Cowden: So, if you take the wood of the vine, you don't get much affect — and a lot of the people that are making the Cat's Claw do that. Anyway, this particular Cat's Claw was found in nature one season, completely free of tetracyclic oxindole alkaloids. And the TOA's decrease the effectiveness of the pentacyclic oxindole alkaloids.

Dr. Lee Cowden: There was a company in Austria that spent a couple million dollars trying to take out the TOAs chemically, but it had solvents and other stuff in it, which was not good. But this was harvested in nature in one season without the TOAs. So the rain, humidity, sunlight, everything was just perfect that year, so that they got a phenotypic manifestation of this type of TOA-free Cat's Claw.

Dr. Lee Cowden: And it's extracted in a very special way that brings out the actives in a different way than just grinding up the bark into a capsule and swallowing it. So you're getting more of the actives in an alcoholic tincture, than you would if you just swallowed the powder from a capsule.

Dr. Lee Cowden: The Nutramedix also does a quantum physical and printing process, so the herb acts not just like an herbal, but it acts like an herbal and a homeopathic at the



same time. The Nutramedix does that with almost all of their alcoholic tinctures, so that they have a broader action, a more profound action.

Dr. Lee Cowden: To give you an example of the difference in effectiveness, they did a study in animals down in Ecuador with their alcoholic tincture of Noni. Now, Noni is manufactured by a variety of companies throughout the United States. When they compared the anti-inflammatory effect of the Nutramedix Noni to the most powerful drug that had ever been sold in the U.S. market for inflammation, Feldene, they found that it had 98 or 99% the same effectiveness as Feldene, as far as anti-inflammatory effect.

Dr. Drew Sinatra: I think this is an important point here, in that when you're treating Lyme disease, there's many different herbal formulas out there that are sometimes drop-dose. I know, Lee, with Nutramedix, we are using drop-dose for a lot of these formulas. And people have a really hard time wrapping their head around, how is this working?

Dr. Drew Sinatra: And I think what you're talking about with the quantum imprints, and all the other energetic imprints that are in these formulas, that's what makes them so special and so effective. And people, again...and I had a hard time in the beginning when I was treating people, because you think more is better in terms of, "Let's just throw a bunch of antibiotics at them," or, "Let's just throw a really high dose, one tablespoon per day dose of this herb." But that's not really how these medicines work — they work in a much slower, gentler fashion. And that's really how you need to treat Lyme disease and other illnesses like mold toxicity. You need to go really slow, because you can really blow people out of the water in terms of Herxheimer reactions, which are worsening of symptoms. So I think that's really a key point here.

Dr. Drew Sinatra: When we're talking about drop dosage here, what I mean by that is if you're taking an herbal formula, there's many formulas out there, you may start off with one drop under your tongue, or even one drop in a glass of water, once a day. And then the following day, you might increase to one drop under the tongue, twice a day. And then the next day might be two drops under the tongue, twice a day, etc. Until you reach anywhere from 10 drops to 15 drops, to 20 drops, to even 30 drops, twice a day. And the reason that we do this is so that we minimize any side effect, or Herxheimer reaction, that may occur. And the best way to do this, of course, is to go slow, and then work your way up in dose.

Dr. Lee Cowden: Yeah. Most people have had Lyme disease for quite some time before it's finally diagnosed. And during that time, the Lyme creatures are dying in the tissues and piling up poop, if you will, in the tissues. And at some point, the diagnosis is



finally made. And at that point, the patient is so overloaded with the critter poop that just killing a few of the bugs cause the patient to go into a severe what's called, Herxheimer reaction, which can end them up in the hospital, because they don't have the ability to handle just one more drop of a critter poop.

Dr. Lee Cowden: So, what we learned in the study that we did in Dallas is that the first thing that you have to do for the first three days is give them no critter killers — only give them drainage remedies to get the poop to start moving out, so they don't have such an overload. And then when you finally start the antimicrobial agents, then you don't start them at full dose, you start them at one drop. And if they tolerate one drop, then you go to two drops. If you go to two drops...if they do okay with two drops, then you go to three drops. It might take you two weeks or four weeks to build up to full dose for the average patient going that way. But they tolerate it, they don't crash and burn.

Dr. Lee Cowden: Most allopathic doctors, when they give them a standard pharmaceutical antibiotic, and they crash and burn because they haven't done anything about the critter poop before they started, the patient calls the doctor and says, "What do I do?" And the doctor says, "Well, stop the treatment, and after a few days, restart it." Well, during the days that they've stopped it, the detox pathways start building up and trying to clear out some of the backlog of poop, but they've just barely broken even by the time that the two or three or four days have passed. And then the patient starts back on the full dose of the antimicrobial, and they get a major Herxheimer reaction again. So they never make any major progress over time, because the doctors don't understand the importance of detoxification as you go.

Dr. Drew Sinatra: Yeah, and Lee, I remember back in 2012, someone at iLabs had presented me a little handout, and Burbur was on there to mitigate a Herxheimer reaction. So I remember using that extensively, way back, to really reduce the symptoms of Herxheimer.

Dr. Lee Cowden: Yeah, it works really well. It's been used in Peru for over 100 years for detoxification. But it's been quantum imprinted, so the vast majority of the action of the Burbur now, is actually from the quantum imprints. So that Burbur product helps to detoxify the liver, the gallbladder, the bowel ducts, the kidneys, the urinary bladder, the lymphatic system, the ground matrix...all at the same time.

Dr. Lee Cowden: Nutramedix Company added Pinella to the Burbur product for a combination product that would also help to detoxify the central nervous system and the peripheral nerves really well, in addition.



Dr. Lee Cowden: So what I usually ask people to do is if they have a Herxheimer reaction that involves brain fog, or forgetfulness, or confusion, or headache, to go ahead and add in the Pinella along with that, so that they get the toxins out of their brain and spinal cord at the same time.

Dr. Drew Sinatra: Lee, when I have patients come to me with Lyme disease or I suspect something, some kind of co-infection underneath that, I always tell them, "We're looking at, at least a year of treatment here, perhaps even 18 months, maybe even 24 months." What have you told your patients in the past, with recovery?

Dr. Lee Cowden: Well, it does vary quite a bit. I think the most rapid recovery I've seen is in about four months. But the average is a lot longer than that, it's probably nine to twelve months, and occasionally longer. The key is to be consistent and drink enough water every day — two ounces of water every 15 minutes all day long, to help to detoxify the body. And also, clean up the diet. Most people in the United States eat the fast food diet — they call it the fast food diet, because it speeds you to your grave. They should switch to a diet that doesn't have sugars and excessive starches and stuff like that, because that usually will feed the fungus that's in their body also, and feed the Lyme-related creatures. You can't ever get rid of the creatures, because you're feeding them and killing them at the same time.

Dr. Drew Sinatra: How do you treat, or what do you suggest for a tick bite? Someone comes in, they've got a tick bite, they haven't developed the bullseye rash, the erythema migrans rash, they don't have any flu-like symptoms. What do you recommend?

Dr. Lee Cowden: Well, the Nutramedix Samento and Banderol are very well-tolerated. The exception is those that have Lyme disease that don't know it, that get a tick bite. And then they start taking Samento and Banderol empirically in large doses, because they want to try to prophylax against that tick bite progressing into Lyme disease. And they don't know that they have Lyme disease, so they start getting severe Herxheimer reactions from adding that in. But other than that, if they just start taking some Samento and Banderol, usually the tick bite does not ever result in body-wide Lyme disease, like you would expect if they didn't.

Dr. Drew Sinatra: Well, I think most people are familiar with a tick bite being the main vector for transmitting Lyme disease. Are there other ways to contract Lyme disease?

Dr. Lee Cowden: In Texas, the most common way to get Lyme disease is from a mosquito bite, not a tick bite. You can also get Lyme disease from any biting insect or arthropod, spiders. There's a variety of other creatures that have the Lyme-related microbes in their body.



- Dr. Lee Cowden: So, fleas, lice, mites, scabies. There's good evidence that Lyme disease can be transmitted by sexual intercourse. It's found alive in the semen — so if it's alive in the semen, then you have intercourse, you're probably going to end up with the Lyme disease in the woman, if the man had it. It's also found in vaginal secretions. It's found in mother's breast milk, so it can be transmitted to the baby from breastfeeding, very likely. It's found in the blood. I don't know how the blood banks can continue to not screen for Lyme disease in the blood transfusions that we're receiving. But they just say, "Well, it's not...there's no proof that it's transmitted that way." Well, if you have live microbes in the banked blood, then why wouldn't it be transmitted, in some cases? It's not logical.
- Dr. Drew Sinatra: Yeah, and that's an important piece for our listeners, because we think of Lyme disease only being transmitted by ticks. And the reality is, most people don't even realize that they've been bit by a tick or...let's say they got bit by a mosquito while they were in Texas, or other parts of the country. And so, the whole questionnaire from the beginning of, "Did you get bit by a tick? No, you didn't. Okay. You don't have Lyme disease." That's a terrible, terrible association there, you can't make that association.
- Dr. Lee Cowden: Right.
- Dr. Drew Sinatra: So I'm really happy that you talked about the other vectors for transmission.
- Dr. Drew Sinatra: Well, I would love to discuss your new book, *No Doctors Required* — a title that I absolutely love. What prompted you to write this, and what's it about?
- Dr. Lee Cowden: Well, Larry Trivieri is a friend of mine, who I co-authored the original *Alternative Medicine: The Definitive Guide* with 25 years ago. And he said, "I've got this idea for a book — *No Doctors Required*." I said, "Oh, my goodness. That's really a great title, and something very much needed."
- Dr. Lee Cowden: We know that in the United States, there's a growing disbelief in allopathic medicine by the general public, and an increasing seeking after integrative medicine and natural therapies. It went from 33% of the population looking for some type of alternative therapy back in 1998, and it's up to almost 70% in 2014, I think it was. It's increasing every year.
- Dr. Lee Cowden: And if we only have, let's say, less than 5% of the population of physicians in the United States knowing how to deliver decent integrative care, and almost 70% of the population seeking it, we have a huge supply/demand imbalance.



Dr. Lee Cowden: And I thought, we need to teach people how to take care of themselves, for the most part. And also, raise up an entire army of wellness coaches and health coaches that can help patients go the next step. So they act as a triage, if you will, and only the sicker of the patients end up finally seeking out and going to an integrative practitioner.

Dr. Lee Cowden: In the Academy, we have a whole host of doctors who've been at this integrative medicine thing for 20, 30, 40 years, and have learned a lot about how to help patients help themselves. So I thought, well, let's do interviews of those doctors, and then compile that information into the book, in a way that's reader-friendly.

Dr. Lee Cowden: So I reached out to Steve Sinatra, and a variety of other doctors in our Academy that could each be interviewed and give their wisdom to Larry Trivieri, to make this book a valuable book. I'm proud of what's happened, the Academy has all teamed together to make something great.

Dr. Drew Sinatra: And how many doctors are a part of this book, how many authors are there?

Dr. Lee Cowden: I think there's 14 practitioners that were interviewed, and all kinds. Some are not MDs, or DOs, or NDs — they're body workers, or they're emotional workers, or they're PhD electrophysiologists, or whatever. But we have a great diversity of information that's been gathered from those various sources, that now has become the *No Doctors Required* book.

Dr. Drew Sinatra: Dad, what chapter did you write in this book?

Dr. Steve Sinatra: I actually did two chapters. One on metabolic cardiology, where I talked about the awesome foursome, about coenzyme Q10, D-ribose, L-carnitine, and magnesium being instrumental in reversing cardiac decompensation. And I talked about how I used it in children, and now these children are adults, and they refused heart transplants. Larry interviewed me on that extensively.

Dr. Steve Sinatra: And then the other part of the book, which I thought was very valuable was the whole essence of earthing and grounding. In other words, what does placing your bare feet on Mother Earth energy, or the Schumann resonance, so to speak, what that brings to the table.

Dr. Steve Sinatra: So those were my two contributions — and it's kind of interesting because if I look back on my medical career, and I'm a little older than Lee, so I've been...let's see, I've been a doctor now for...since 1972. So it's more than 40, around 40 plus years. I've been a cardiologist since 1977. But I think the two greatest discoveries in my lifetime has been the essence of earthing and what



that does to the body, and the miracle of coenzyme Q10. The interesting thing is they're both connected, because both earthing and coenzyme Q10 are potent electron donors. So it's electron donors that are really the essence of neutralizing free-radical oxidative stress, which is the whole essence of inflammation in the body.

Dr. Steve Sinatra: For me, it was a good exercise in looking at my past almost-50 years. I'm going to have my 50th medical school reunion in a couple of years, so that's pretty cool.

Dr. Lee Cowden: That's very cool.

Dr. Drew Sinatra: And then Lee, what was your chapter or chapters?

Dr. Lee Cowden: Well, I had little bits and pieces through several chapters, but I spent a lot of time on spirituality, on the spiritual connection to health. So often that gets ignored in allopathic medicine completely. And it's a major mistake, because very often a significant contribution to an illness is coming from the unrecognized, un-talked about spiritual issues. And so, I talked about how a practitioner could address that, how a patient could address that, and how they could get from being clueless, to being knowledgeable enough about that to make a difference in their health. I don't know of any other books out there right now that talk about that issue, about that topic. So the book will be unique in many ways, but that's just one of the chapters that makes it very unique.

Dr. Drew Sinatra: Can you share a little bit more about the spirituality piece, and perhaps how a physician or practitioner can ask certain questions to learn more about that?

Dr. Lee Cowden: Yeah. I think too often doctors don't feel comfortable asking anything, so they don't ask anything. But I learned a long time ago that you can ask a question that's not threatening, like, to the patient, "Tell me something about your spirituality?" That's just an open-ended question. And you see how they respond...some people will say, "Well, I go to church every Wednesday and every Sunday, and blah, blah, blah, blah." After they say all of that, I say, "Well, that's very interesting, but that's really more about your religiosity. I was really more interested in your spirituality, and your relationship with others spiritually, and your relationship with the creator of the universe, if you believe in one." And so, it goes to the next level then, oftentimes in the conversation. And when it does, oftentimes, you actually get at the root of some of the problems that have resulted.

Dr. Lee Cowden: Sometimes it turns out that they feel that their family was cursed from something that happened in the past. And sometimes, it's true. Sometimes they



recognize that they're dealing a lot in their life with guilt. And the guilt is just burying them, burdening them down to the point where they can't even function. Sometimes they have so much anger that they can't forgive a person in their life. And I let them know that anger is an emotion, but unforgiveness is a spiritual issue. And in order to be able to forgive completely, you need to get to the part where you don't really want to hold onto the anger anymore. So that's just some basic principles that most practitioners, for sure, should know, and the people that read the book would come to understand that it would help them to move from where they are, stuck — to a place where they're no longer stuck in their health.

Dr. Drew Sinatra: Oh, that's such an important piece. Thank you.

Dr. Steve Sinatra: I would echo that, as well. Lee, I think you said that in such a beautiful way. I mean, in my own growth in the development, I became a psychotherapist, and I think anger and sadness and heartbreak are at the root causes of heart disease. The thing is, some of these things, as you said, are so buried that the person doesn't even experience them. They know they're depressed, and they know they're sad, and they know they have unexplained anger and rage. But if you don't know where it comes from...and that's why these emotional, psychological, spiritual issues are so important, so important to unravel. It's like an onion, you know?

Dr. Lee Cowden: Oh, yeah.

Dr. Steve Sinatra: I mean, you unravel one layer, and then there's another layer, and another layer. And that's the beauty of doing psychotherapy, I'm so glad I spent years studying with some really great masters.

Dr. Lee Cowden: Yeah. Yeah. There's lots of, I call it “entanglements” in the process of getting to health. One of the entanglements is the entanglement between different emotions with each other. Like, you can't release the anger, because you still have the fear. Or you can't release the fear, because you still have the sadness, or whatever.

Dr. Lee Cowden: But then there's also the entanglement between the emotional issues and the spiritual issues. So the emotional issues that haven't been resolved are, I call them, “soul wounds,” wounding of the soul. And the soul wounds predispose to wounding of the spirit. It's a process. The nice thing is that you don't actually have to get 100% of it completed in order to get well, to get to the point where you have good health, because that process really is a lifelong process. You start the process at some point, hopefully because you read a book that makes you



realize that there's some stuff that you haven't dealt with, and then you start diving into it.

Dr. Lee Cowden: It's sometimes a long-term process, not a short-term process, but a very valuable process. We just need to have a relationship with somebody that we trust that can be a sounding board, because it's really hard for us to see our own stuff. But another person that's looking in from the outside, can have an objective perspective and oftentimes, tell us, "Oh, have you thought about this being related to that?" You say, "Oh, my goodness, no, I haven't...but I should." And so, we can help each other, and it doesn't have to be a psychotherapist, it can be just a good-hearted, caring person.

Dr. Lee Cowden: In 2000, *The Journal of American College of Cardiology* published an article in the peer-reviewed literature that showed that patients that had cardiomyopathy had 22,000 times more mercury in their heart muscle than patients with coronary artery disease in the same study. And, the antimony levels were, I think, 2,000 or 5,000 times greater. Arsenic was higher, as well.

Dr. Lee Cowden: So when I read that article, I thought, "Well, why in the world would patients with cardiomyopathy have really high levels of mercury in their heart muscle, but the coronary artery disease patients would not?" What I realized was that, very likely, those patients with cardiomyopathy had an unresolved brokenhearted-ness issue that had caused physical toxin accumulation in their heart muscle, which then caused an environment that made it easy for viruses and other microbes to grow on the heart. And then, the heart started deteriorating because of all those toxins and all those microbes.

Dr. Lee Cowden: And so, when I started looking for that in patients with cardiomyopathy, I found it at essentially 100%. So I found that was the most important thing to do for a patient with cardiomyopathy, not even...giving them coenzyme Q10 was really important. But if you didn't address the brokenhearted-ness issue, they didn't get well.

Dr. Steve Sinatra: Lee, we're both cardiologists and we're both into the emotional and spiritual factors in heart disease. I wrote my book, *Heartbreak and Heart Disease*, oh my gosh, in my 40s. It was probably one of my best books, and you're absolutely right. As I get older in the business of doctoring and cardiology, I mean, the absence of love, or the failure to achieve unconditional love is a major factor in cardiac illness. No doubt about it.

Dr. Lee Cowden: Yeah. Yeah. Well, love is the most powerful healing force in the universe, I'm convinced.



- Dr. Steve Sinatra: Love.
- Dr. Lee Cowden: The second most powerful healing force in the universe is laughter.
- Dr. Steve Sinatra: Right.
- Dr. Lee Cowden: I believe the creator of the universe is the source of both of those. Is the source of love and the source of joy.
- Dr. Steve Sinatra: Drew, I should also mention, at one of Lee's clinics — I used to lecture at his clinics year ago, we used to do a belly laugh in closing. We'd all get on our backs and put our head on the adjacent person's stomach. It was a nice experiential...that's the key word. It's an experiential process, where you can laugh hard enough...and remember, if you laugh hard enough, it can bring you to tears. So both the laughter and the deep sorrow that sometimes the laughter can emit in a person was so therapeutic in the workshop. And even though it was Lee's closure of the workshop, to me, it seemed to be the most therapeutic, because people were getting into their deep sorrow through laughter, which elicits the deep sadness that we all have. It was really a pleasure doing workshops with Lee, because we were both on the same wavelength. Two crazy cardiologists talking about the emotional, spiritual aspects of heart disease.
- Dr. Lee Cowden: Yep, yep.
- Dr. Drew Sinatra: Oh, that's great. Well, Lee, we're going to transition here to the **Wellness Wisdom**. If there's one big "pearl" of wisdom regarding Lyme disease, what would it be?
- Dr. Lee Cowden: Well, I would say this, very often I hear patients say, "The doctor says there's nothing else that can be done. Go home and suffer." And that is just wrong. The correct statement that the doctor should've made is, "I know of nothing else that can be done. Go search for answers, because there is almost certainly is one out there if you search."
- Dr. Lee Cowden: Most of the people that are listening probably have not watched the movie, *Lorenzo's Oil*, but if they have not, they should.
- Dr. Steve Sinatra: It's a great movie.
- Dr. Lee Cowden: Yeah...because the two parents in there heard the doctors say, "There's nothing that can be done for your son," but they didn't believe it. Thank goodness. And so they kept searching and searching, and they finally found an oil that cured their son. And so, I think that there oftentimes is an oil out there, figuratively,



that we can find if we search. But we need to maintain faith and maintain hope, and continue to seek joy in everything that we do, and continue to receive and give love as best we can every day. Because those are healing forces.

Dr. Steve Sinatra: Great closing comments...couldn't say it better, Lee.

Dr. Drew Sinatra: Yeah, Lee, thanks for coming on the show today. That was amazing.

Dr. Lee Cowden: Yeah, thank you so much for having me on the show. I hope that people will go to my website, **DrLeeCowden.com** and register there to say that they want to get the *No Doctors Required* book when it comes out. And so, if they've registered, then we'll have an email address to send them the information about the book coming out.

Dr. Drew Sinatra: Wonderful. Thank you.

Dr. Drew Sinatra: That's our show for today, folks. If you have a question or an idea for a show topic, please send us an email or share a post with us on Facebook. And remember, if you like what you heard today and you want to be an active member of the **BeHEALTHistic** community, subscribe to our podcast at **BeHEALTHisticPodcast.com**, or an Apple podcasts, or wherever you download your favorites. You can also find more great content and information from us and the Healthy Directions team, at [HealthyDirections.com](http://HealthyDirections.com).

Dr. Drew Sinatra: I'm Dr. Drew Sinatra.

Dr. Steve Sinatra: And I'm Dr. Steve Sinatra.

Dr. Drew Sinatra: And this is **BeHEALTHistic**.

Narrator: Thanks for listening to **BeHEALTHistic** with Drs. Drew and Steve Sinatra, powered by our friends at Healthy Directions. See you next time.