

How to Take Control of Your Child's Health and Future

A Special Interview With Dr. Larry Palevsky

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome, everyone. Dr. Mercola helping you take control of your health. And today we are joined by Dr. Larry Palevsky, who has been a leader in the, I guess, the mainstream media would call it the anti-vax movement, but we call it the pro-choice movement. And certainly, like myself, he's received many criticisms because he was in this way before COVID. And we'll get a specific history, but I think it was last century that he got into this like I did. The 20th century, it seems like ages ago. It's almost a quarter-century now. But anyway, we're going to talk about obviously vaccines and more importantly, since Dr. Palevsky is a pediatrician, the impact that the mainstream narrative is having on our children's educational system and really highlighting the absolute crucial, vital importance of getting your kids out of public education system because it's just a propaganda brainwashing system that's going to clearly lead to nothing good for your children. With all that preface, thank you. Welcome for joining us.

Dr. Larry Palevsky:

It's great to be here, Joe. It's been a while and I look forward to our conversation.

Dr. Joseph Mercola:

Yeah, you've been a real leader in this area and done a lot of education. You're a pediatrician practicing out in New York and you still have a practice, is that right?

Dr. Larry Palevsky:

That's right.

Dr. Joseph Mercola:

Okay. Why don't you walk us through your journey and epiphanies, and waking you up to the realities of what vaccines are and they're really not what they're purported to be? Because we all wake up at different times and it seems many of the leaders in the current anti-COVID movement and COVID-19 jab movement, more specifically, really were unaware of this for the longest time. And many of them got the jab themselves before they woke up and understood the problems with it. Obviously, the COVID jab is the worst in history, but all of them are fundamentally flawed. So, why don't you tell us what woke you up?

Dr. Larry Palevsky:

Well, I graduated [from] NYU (New York University) School of Medicine in 1987, all I got was, "These are the shots we give." And then three years of pediatric residency at Mount Sinai in New

York was, “This is the schedule, follow it.” Because this is what we did when we did clinic. And then a year of fellowship in pediatrics at Bellevue from 1990 to 1991, the same.

Dr. Joseph Mercola:

That’s a public health hospital for those who don’t know. And the pathology you see in those types of scenarios are just unbelievable. It’s like practicing [for] many lifetimes.

Dr. Larry Palevsky:

Yeah, it was a great education in an inner-city hospital in New York. But it was in 1991 when the New York State Department of Health started to mandate the hepatitis B vaccine for all infants. And I had no comments about vaccines per se at that time, but it just raised the red flag to me. Why are we giving a vaccine to a population that has never suffered from hepatitis B infections and where we can give the kid a hepatitis B vaccine if the mother were surface antigen positive? And so, this raised an alarm for me and none of my colleagues around me were as alarmed as I was. We had never had a vaccine that was for an illness that didn’t affect the population we were injecting.

And so, I went along as an ER (emergency room) physician in the Bronx, New York, which was more inner-city hospitals. And by 1995, I was running a pediatric ICU. And all of a sudden in 1998, in the clinic, in the outpatient department at the hospital where I was working, a mother came up to me and said, “Dr. Larry, did you know that there’s mercury in vaccines?” And that turned it, because I didn’t just-

Dr. Joseph Mercola:

Prior to then, were you opposed to them or just philosophically curious in 1991? What was that period between ‘91 and ‘98?

Dr. Larry Palevsky:

My curiosity in ‘91 had nothing to do with vaccines per se. It just had to do with the idea that we should give a hepatitis B vaccine to a population that didn’t suffer from the disease. That made no sense medically, but it had nothing to do with the vaccine subject in total. Okay. So then in 1998, I heard that information and I said, “All right, what else?” And the “what else” created the last 25 years of finding information that I could never have been taught in medical school or residency, and would never be taught in medical school or residency, and that directly opposed the narrative. It didn’t oppose the science, it just opposed the narrative. And what I realized was I was finding science while I was being opposed by consensus. And consensus was not science. And so, I found that by the year 1998 to 2000, the risks far outweighed the benefits.

And by 2002, I decided that I would never offer vaccines again in my practice for patients. That didn’t mean that they couldn’t go somewhere else, but for my practice, for my precautionary principle, for my “First, do no harm” Hippocratic Oath, I could not in good conscience offer them something that I had no knowledge about scientifically and [had] a lot of concern about scientifically because there was no safety about it. There were no real studies done. The

ingredients were unknown and filthy at best. And there were no good studies to demonstrate its safety or effectiveness. I couldn't with good conscience offer that. Again, people could get it, but I couldn't offer it.

Dr. Joseph Mercola:

Yeah. So, thanks for sharing that. And [is] your memory good enough to recall what the social context was with respect to your peers? Because I actually turned around a few years before that, but I was less engaged in patient care because I had started the website and stuff in [the] late '90s. So, my memory is somewhat clouded as to exactly the context, but were you getting a lot of pushback from fellow – And I'm not a pediatrician, I was a family physician, so it's a little bit different. Were your fellow pediatricians ostracizing you or giving you challenges?

Dr. Larry Palevsky:

Well, in 1998 when I first heard this information, and I saw a patient in the clinic where I was working who had a significant vaccine reaction with swollen lymph nodes and fevers, I said to the nurse that I was going to delay certain kids' vaccines. I was going to not give them [vaccines] at certain visits. Word got out in New York City that there was this pediatrician at a clinic in a hospital who was willing to accept patients with a delayed schedule or no schedule at all. And my peers were like – because the nurse spoke, they were keeping track. "Dr. Larry's not giving these shots to his clinic patients. Why not? Numbers were going down." And my colleagues just couldn't understand what I was doing. But Joe, they would not care whether I had information that would give them pause for what they were doing and actually open their eyes to what I was discovering. They did not care.

And then [in] 2000, when I went into private practice at an integrative health center affiliated with Beth Israel, we accepted patients who didn't vaccinate, but there was a hum in the city because I was now open for business for patients who didn't want to give shots. And it was definitely a "What is he doing there?" And for the last 23 years, there's still been this hum, but no one has had the nerve – I was going to say the balls, so I'll say it. No one had the balls to actually come to me personally or publicly and say, "Can we have a discussion about what you're doing and why you're doing it?" No one was interested.

Dr. Joseph Mercola:

Well, that's not surprising, but I was more interested in understanding if there's any medical boards that started interfering with you because that's an action against your license. Because so many physicians, with the COVID pandemic, they lost their licenses, they lost their board certifications, they lost their ability to practice essentially. It took away every other credential but their license. And actually, in some cases, their license was taken away. A number of cases — Dr. Sherri Tenpenny, Dr. Meryl Nass and others, many others. But those are the two that come to mind. So, was that ever an issue for you?

Dr. Larry Palevsky:

No.

Dr. Joseph Mercola:

How did you think you escaped? That doesn't make sense.

Dr. Larry Palevsky:

It makes sense to me because I'm living it, but I understand where you're coming from. I can come up with some reasons. Number one, I don't have hospital privileges and I haven't had hospital privileges for 21 years. I don't take insurance. I don't use electronic medical records. I don't sell vaccines. And I rarely write prescriptions. So, there's very little track record of what I'm doing clinically other than what patients are experiencing and I'm not monetizing my existence. So those to me are-

Dr. Joseph Mercola:

Can you expand on that last statement?

Dr. Larry Palevsky:

Well, I'm not creating a big fund. I'm not earning tons and tons of money on that concept of-

Dr. Joseph Mercola:

Okay, so you're not selling an alternative. And for those who don't know, there's a lot of specialties in medicine. The lowest pay specialty, from my understanding, is pediatricians. And they have one of the hardest jobs.

Dr. Larry Palevsky:

I think it's pediatrics and psychiatry, but yes.

Dr. Joseph Mercola:

Psychiatry. Okay.

Dr. Larry Palevsky:

I think it is, you're right. Yeah. There was no track record of me anywhere in the system other than my interviews or things that I did in documentaries or lectures. There was one time in 2019, I believe it was, when I spoke in front of a group of Orthodox Jews in Muncie, New York, and there was an article that came out saying, "New York City pediatrician tells parents not to give their kids the MMR (measles, mumps and rubella)," which was slander because I never did that. And I actually have the tape of the lecture and I never told parents not to take the shot. I think that's the most that I can remember. Arthur Kaplan, who's a so-called ethicist at NYU said that I shouldn't have my license, but nothing else happened.

Dr. Joseph Mercola:

I thought he was in Minnesota.

Dr. Larry Palevsky:

I think he's in NYU.

Dr. Joseph Mercola:

Okay, you're probably right. I just remember him from Minnesota. Wow. So that's impressive. Impressive, indeed. All right, so thank you for that backstory and giving us a frame of what your position has been. Did you notice any changes or differences when COVID hit? Because of the factors that you just mentioned, you were somewhat immune to any interference from the medical boards.

Dr. Larry Palevsky:

Right. Still, nothing changed.

Dr. Joseph Mercola:

Wow, that's so impressive.

Dr. Larry Palevsky:

There were pediatricians around the country who called me out who are now probably eating crow because the evidence back then when they called me out was obvious. And the evidence now is even more obvious that this is a bioweapon and a murder weapon and not a shot that's meant for health.

Dr. Joseph Mercola:

Yeah. Well, let's take a tangent here because I think it's an important point. And you've really obviously studied this and you're still in practice, so you really have a good understanding of the realities of what's happened. So, I couldn't agree with you more, this is a bioweapon, but it seems to be particularly pernicious to the young who have essentially zero need for this. The only thing that they can get from this is harm. Their best outcome of a COVID-19 jab is nothing, that's the best they could hope for because there's no protection. But why don't you discuss the incidence and the prevalence of the complications like the myocarditis, the deaths that are happening, and a summary of what probably is the most egregious violation in the history of pediatrics in the entire world. I mean, to get away with this is just – it's just shocking. And in the future, this is going to be viewed – I could just see the documentaries now, what they're going to expose. But right now, we're still in the middle of mainstream narrative, so it's not coming out. So why don't you give us your summary.

Dr. Larry Palevsky:

I think the most heinous thing is that what I'm about to say, I will be gaslighted for it because the whole system has been gaslighting the obvious observations and experiences of most of the physicians and parents in the world who have woken up. So, the first things that we started to see were menstrual cycle changes in girls, in women, especially in women who stopped menstruating. The most horrible thing we started to see were infertility, stillbirths [and] miscarriages. And then we started to see babies born with birth defects, babies born with strokes, with blood clots, with developmental delays. We saw young kids with myocarditis, which is an inflammation of the heart, [and] pericarditis, an inflammation around the heart. You saw kids who were dropping dead. You saw kids who were having neurological problems in addition to stroke. You saw seizures. You're seeing even Parkinsonian-type symptoms in young adults. And again, the sudden death was amazing and [the] heart attacks. What's most amazing is that the medical profession, in advance, started to prepare the public for heart attacks in kids or strokes in kids.

And so, they started to approve medications ahead of time so that people were prepared to know that pharmaceutical medicine was available should your child have a heart attack. So, these things were normalized into the pediatric population and pediatricians were just accepting. "Yeah, neonatal ICUs could definitely have stroke victims all the time. That's what happens."

Dr. Joseph Mercola:

That's normal. That's normal.

Dr. Larry Palevsky:

That's normal. And then the other interesting thing was that OB suites were starting to see fewer and fewer kids being born. So, you started to see the number of babies born go down, which was another sign of the infertility. And these continue to be drastic changes in the pediatric population, and nonetheless, all of it is being accepted as normal.

Dr. Joseph Mercola:

Yeah. Along those lines, another thing they did was, in the adult population – and you can expand on this, but [from] my understanding, SIDS, sudden infant death syndrome, is primarily now, in those who have studied this, related to vaccine immunizations. Now, they created this new term, this new syndrome that never previously existed prior to COVID, which was SADS, sudden adult death syndrome. And that it was normal for adults to suddenly drop dead for no apparent reason, other than of course having the jab, but they never linked that. That is causal or correlated even.

Dr. Larry Palevsky:

Sure.

Dr. Joseph Mercola:

Comment on that, because it seems like there are different versions of the same issue, the reaction to the vaccine.

Dr. Larry Palevsky:

Right. Well, one of the interesting corollaries to that is that over the 2020 to 2023 time period, we saw drops in the incidence rates of sudden infant death syndrome.

Dr. Joseph Mercola:

Interesting. I did not know that.

Dr. Larry Palevsky:

And that's primarily because fewer patients were going for primary care visits to their pediatrician.

Dr. Joseph Mercola:

Well, the jabs weren't available until late 2022.

Dr. Larry Palevsky:

No, I'm just talking about the regular pediatric.

Dr. Joseph Mercola:

Oh, I know. I know. But as a result of that, because [it's] somewhat of a challenge in getting routine medical care.

Dr. Larry Palevsky:

Correct.

Dr. Joseph Mercola:

And the concern that a lot of parents had about the immunizations in general. Has that justifiable concern extended to the current time? Are immunizations down, normal childhood immunizations?

Dr. Larry Palevsky:

Well, yeah. The American Academy of Pediatrics has put out physician papers to its members to try to find ways to encourage parents to come back into the office to get their child the shots. What the public is now aware of is [that] once people who were never concerned about childhood immunizations started to realize that there was a concern about the COVID jab, it opened up a Pandora's box for them. So, they not only started questioning the COVID jab, they started questioning all jabs. And so, this COVID scenario has actually backfired for the

American Academy of Pediatrics and standard Western medical care. Because parents are really more concerned than ever and I have seen an uptick in the number of patients who were never questioning vaccines coming into my office because the COVID jab became a concern to them.

Dr. Joseph Mercola:

Do you have any idea what the numbers are of the parents who are not immunizing their children now because of this?

Dr. Larry Palevsky:

No. I mean-

Dr. Joseph Mercola:

The percentage is obviously not specific quantities, but is it like 10%?

Dr. Larry Palevsky:

In different states, there used to be a religious exemption in 48 states, now it's in like 46, I think, 45. And the religious exemption rates were maybe anywhere between 0.5% to 3% and then there were the small percentages of medical exemptions. I don't know if the numbers have gone up. If my practice is any indication, I would say that the numbers have gone up because I'm seeing people who never would've come into my office previously because they were doing the routine shots.

Dr. Joseph Mercola:

Yeah, I would love to use your office as an example, but I think you're not really a good sample of the different populations out there because you've been out there for so long warning people about this and you attract a certain type of individual who – Because clearly a number of people woke up during this as you alluded to. But I'm just curious as to the percentage, and I don't think anyone knows because that would require an objective, truthful investigation. And that just is impossible nowadays it seems.

Dr. Larry Palevsky:

Sure.

Dr. Joseph Mercola:

All right, well thanks for that backstory and history and your perspective on this. One of the reasons I reached out to you initially was to address another atrocity. The jabs are killing people, there's no question, contributing to massive disability. But the other angle is the whole mainstream narrative from public health authorities and mainstream media and academic institutions is to support this whole – I guess the trans agenda would be one part of it. It's a big part. We've had other people on that have written books on this. And [I] really don't want to go

deep into it, but just from your perspective, I would like to discuss the impact that the educational system has on it, because the people I've interviewed in the past believe that's [a] massive component. And the conclusion that – it seems to be obvious if you investigate this – is that you simply cannot put your kids in the conventional schooling system because it's just an absolute prescription for disaster.

It's just like, "Okay, take my child, brainwash him, indoctrinate him, teach him every bad thing that they shouldn't know." And it's just being irresponsible as a parent. So why don't you give us your perspective on what they're doing in the educational system?

Dr. Larry Palevsky:

So, I'll start out with a big statement. The current educational system completely ignores everything we know about child development and brain development.

Dr. Joseph Mercola:

Big surprise.

Dr. Larry Palevsky:

Completely ignores it. If you look at child development, if you look at human development, we know that the most distinguishing thing about humans compared to other mammals is the function of our frontal brain, our frontal cortex and prefrontal cortex, which allows us to think and reason, analyze, understand, focus, pay attention, be aware [and] have consciousness. This is the biggest part of the brain that distinguishes us from other mammals. Now, when babies are born, that part of the brain is not developed. In fact, it's dormant. Now the question then becomes, how does that front of the brain develop? Now, if you look at true child development, true brain development, you would see that brain development of the forebrain develops from the back of the brain forward. So, you initiate a voluntary movement, you have an experience, you do it over and over and over again. Through those experiences, you come to an understanding, you come to reason, you come to think, and then you have ownership of your knowledge.

So, it's the hindbrain [that] does an action, the midbrain has an experience, over and over and over again. The forebrain comes to what I call a forebrain conclusion and you have knowledge. The entire educational system, the media, medical school, residency, everything that we see in today's world that delivers information says, "No, the brain develops from the outside in. We're going to teach you, we're going to tell you, we're going to give to you, and you are going to now know." And unfortunately, that has become the norm. And so, what you see is all these self-appointed experts who have all of this great knowledge but have no ownership of it because it's not theirs. They never researched it, they never studied it, they never experienced it, they never thought it through, they never critically evaluated it, they never did trial and error. They just said, "If you said it, I believe it, therefore, it's true."

And so, what we're turning out in our schools, and that includes law schools and medical schools, and graduate schools, social work school [and] psychology school, is, "We are going to tell you all you need to know. You don't have to think. We're just going to download it into your

forebrain and we're going to cut off the rest of your brain's function. We're not going to give you the opportunity to question —" because as you know, we are being told not to question anymore, which is why we're getting in trouble, because we're questioning. "You are going to get in trouble if you try to think differently than what you're being told. And we're going to take away brain development so that you are now a robot. You are now an automaton. You are now a protocol-driven, algorithm-driven being who will have the ability to just follow everything we tell you."

So, we've lost diversity, we've lost critical thinking. We've actually watched the front brain deteriorate in function. And that's partly due to creating fear, which cuts off the blood flow to the front brain. Addiction, cuts off the blood flow to the front brain. Video games addiction, cuts off blood flow to the front of the brain. Devices, all these apps, all this social media, which cuts off blood flow to the front of the brain and creates ongoing primitive brain function. So, we have designed a society that doesn't allow for education. It allows for downloading, it allows for regurgitating, it allows for mass speak, but people know because they've been told, they no longer know because it's theirs and their life experience. I fear for — not fear as in, "Oh my God, I'm panicked." But I'm afraid for the next generation and the next generation after that because they have no skills anymore to really work through a problem, to figure it out, because they've been kept from having those life experiences.

Dr. Joseph Mercola:

Yeah. There appears to be an aggressive effort to squash any critical thinking skills and I suspect if there was a pharmacological agent that facilitated that, they would be pushing it to put it in the water supply. For sure.

Dr. Larry Palevsky:

Drugs called Ritalin and Adderall and-

Dr. Joseph Mercola:

Well, those definitely have their pathologies, but I'm not sure that they, by themselves, would diminish your critical thinking skills. I think it's more the narrative in the propaganda and the repetition of lies. You hear a lie so many times by so many different sources, you begin to believe it. That's what's happening. All these trusted authorities, the media. Well, maybe not so much, a lot of people figured out the media. But traditionally trusted authorities, the media, the public health authorities, the physicians, the medical journals — they're all in harmony, in sync telling these lies and squashing the critical thinking skills.

Dr. Larry Palevsky:

Think about it. If someone were to come up to me and say, "Dr. Larry, you know, vaccines are safe." The common back and forth is, "No, they're not. You don't know anything." But I do it differently. If someone were to come up to me and say, "Dr. Larry, you know, vaccines are safe." My first response to that person would be, "Really? Tell me more. I didn't know that."

And what I would find is a regurgitation of material that the person didn't research but just was told.

Dr. Joseph Mercola:

Or fed.

Dr. Larry Palevsky:

Or fed. Right. And so that's the problem.

Dr. Joseph Mercola:

Their strategy works.

Dr. Larry Palevsky:

Yeah, it does. But the other challenge that I don't think the American public is aware of is if we go back into the history of public education, we will see that the purpose of public education at its darkest roots is to make people sheep, to keep them from critical thinking, to keep them mass-thinking and to control the population. And that's a hard pill for a lot of people to swallow. But all you have to do is go into the research of public education and you'll see that that was always the design.

Dr. Joseph Mercola:

Yeah. So, it's really quite easy to construct a future scenario that's beyond grim and dismal and potentially existential. So, do you believe at this point there's some effective strategies that people can implement to give them some hope to perhaps create a remnant that can survive this pervasive indoctrination that's going on?

Dr. Larry Palevsky:

Sure. Number one, turn off your TV. That would be a great number one step. Stop reading the mainstream news media and turn off your TV.

Dr. Joseph Mercola:

But we got to know what's going on. We got to listen to find out the New York Times. It is entertaining if you understand the truth. I think it's safe to look at it because you just want to know what they're up to.

Dr. Larry Palevsky:

I agree. But again-

Dr. Joseph Mercola:

But relying on them as being truthful is the prescription for disaster.

Dr. Larry Palevsky:

Well, whenever I hear a parent in my office say, “Well, they say.” I stop them and I go, “Number one, who’s they? And number two, if you’re quoting, ‘They say,’ I’m not so sure you’re doing your own research and critical thinking.” But for parents, number one, if you do keep your kids in the public or private school education system, I advise you to have conversations with your children at home to probe them and ask them, “What’d you learn today? And what’d you think about what you learned today? How did it make you feel? Did you have an opposing view? Were you able to express an opposing view? What happened if you did? Did the teacher allow it or did the teacher not allow it?” And cultivate an opportunity at home for your child to go through a process of critical thinking. And if you are really disgusted with the public school or private school education, then I will tell you that you are in good hands because the number of parents who are homeschooling their children in this country has exponentially gone up.

And I know that there’s all of these, “Yeah, but what about socialization?” Believe me, there’s plenty of evidence that not only do kids do better when they’re homeschooled, but their attention spans are quicker. They can retain 20 minutes on an hour, whereas I think children who are in public school retain – they have to go 45 minutes on an hour. Socialization happens. It also frees the child up to be creative, to have imagination, to learn through doing, to learn through life experience, to learn how to do things that the schools are not teaching you anymore. Schools don’t give you life skills. And what you can do when you have homeschooling or, Joe, even unschooling, these kids do function better and they do have better grades, and they do have good social skills. They’re just not being bombarded with a propaganda machine.

Dr. Joseph Mercola:

So, it would seem that a statement of avoiding all public school education would be close to accurate. I’m sure there are some exceptions, but it’s probably universal. I don’t think the same could be said of private schools, but clearly many are as bad, if not worse than public schools. So, are there any criteria that you’ve developed over the years to identify an acceptable private school, or is it an extension of the dialogue you suggested having with your children and openness?

Dr. Larry Palevsky:

It’s not only an extension of the dialogue, but you want to know what the curriculums are of your school. Are you being pigeonholed into these state-sanctioned propaganda machines or are the teachers actually teaching the correct American history? The correct literature? Are you in a school where the books are being banned because it doesn’t meet with the agenda? These are things that you want to know. Is your child going to be persecuted for raising a different opinion? And I think that’s the biggest problem in our culture today, is you’re not allowed to raise a difference of opinion. And I would certainly hope that a good education, a good private school, would allow for that.

Dr. Joseph Mercola:

Yeah, yeah. And a few other characteristics of an unacceptable private school would be if they have mask mandates and require COVID jabs to get into the school. That definitely is a no-go for sure. But are there any words of wisdom you can have [for] parents who come to the conclusion that they really have no viable option other than to remove their kids from the schooling system and go to the homeschooling route? Suggestions on materials, how to find them, how to look at other parents that are doing this and form a social network? What's the strategy? What are the steps they take to do that?

Dr. Larry Palevsky:

Just so you know that there are a number of parents in your area who are homeschooling. There are lots of co-op classes. There are online classes. There are online curriculums depending on how old your child is. There are nature schools. There are forest schools. There are legal structures for homeschooling that can be available for parents. Some of them are religious, some of them are Christian, some of them are non-religious. But once you start opening the door to your community and asking around, even doing a search, you'll find that there are so many parents who are taking their kids out of school in your neighborhood, who are creating co-ops, who are creating online opportunities together, who are creating small pods, and there are teachers who are leaving public and private education who are also available.

Dr. Joseph Mercola:

But how do you find these resources? My guess is that the evil giant, Google, has probably, if not already, they will in the near future just remove this stuff from the search engines. You're not going to be able to find it on that. And Facebook's probably doing likewise, removing these groups. So how do you search? Who do you ask? There's got to be some central sites that coordinate this.

Dr. Larry Palevsky:

Again, I don't know of any central sites. I know that being in New York, I'm just local to what's going on. Parents are finding each other all the time.

Dr. Joseph Mercola:

But are there types of businesses that homeschooling parents would go to where you can connect with them? Or are there other businesses that sell materials for homeschooling that have a list of other people in the area that they can connect with?

Dr. Larry Palevsky:

I haven't delved that far into it. I'm sure there are other people who would have answers to that right off the bat.

Dr. Joseph Mercola:

Okay. But it is worth exploring because I couldn't agree more. I think if I had school-aged children, I don't think there's any other rational choice. And the responsible parent needs to choose, is to educate them yourselves and really insulate them from the deadly indoctrination that's going on.

Dr. Larry Palevsky:

I think one of the fallacies about homeschooling is that the parent has to do all of the homeschooling, and that's not true. There are other parents who chip in. There are communities of small groups of children where the parents hire a teacher or several teachers who actually keep the kids in a small group and do the homeschooling themselves. So, the parent doesn't have to do all of it all the time.

Dr. Joseph Mercola:

Okay. So, that's reassuring for sure. So, hopefully, just doing a little digging and however that's done, you'll identify it. But my guess is all you need to do is find one who's been doing this in your area, they'll be plugged into the network. Because it's a network of individuals and most of them know each other and just got to find that local network.

Dr. Larry Palevsky:

Right.

Dr. Joseph Mercola:

Yeah. So, it's definitely worth the effort if you're exploring this as an option. So, as we're recording this, it's the fall of 2023. Flu season is around the corner if it's not here already. So, I was actually in New York two weeks ago, for the flash flood.

Dr. Larry Palevsky:

Oh, nice. Yeah.

Dr. Joseph Mercola:

Yeah. So, it's the first time I was in New York for a few years and I love the timing for it. But anyway, so what are you seeing for the pushing of the flu jab, and I think it's the triple – what is it called, the triple jab now? It's the COVID, the flu and-

Dr. Larry Palevsky:

RSV (respiratory syncytial virus).

Dr. Joseph Mercola:

RSV. Yeah. So, that immunization is available now, it's out there and being administered.

Dr. Larry Palevsky:

If it is, I haven't seen it. I just know that the COVID shot, the RSV and the flu are being pushed. The RSV is being pushed for pregnant women and certainly there's a monoclonal antibody shot for young kids. But I think, if I could lead the conversation, a little left turn, most people are not aware that the flu is not caused by a viral illness. The reason you get sick in the fall, winter and early spring is because, number one, we live out of season. We live out of schedule of the season. We eat improperly out of season. We don't sleep enough. We don't rest enough. We don't eat the warm foods when instead we're eating colds and summer foods. We don't take our vitamin D [and] K, we don't take our soups and our broths, we don't slow down. And so, anytime we live out of sync of nature, we are causing stress to our body.

And so, we know farmers used to go to bed at the sunset and wake up at the sunrise, but when the day gets darker earlier and we're up six, eight hours past when the sun goes down, that's stress. Because our body's reserves are down here and our utilization of energy is up here. All that distance is stress. And one thing that the body has to do because it can't keep stress, it has to get rid of it. And if you accumulate enough of it, you're going to have to get sick. And so, we think that the reason we get sick is because there's some magical virus going around. Well, that's not true. The reason you get sick is because we're stressed. We're living out of nature. We're not eating right. We're not sleeping right. We're not resting right. We're not dressing right. We're overdoing it when our bodies should be quieter and we're creating too much stress.

We're eating lots of sugar. Holiday season, sugar, sugar, sugar, sugar – refined sugar, I should say. You've talked about this endlessly. The fried oils, the seed oils, the hydrogenated oils — these are toxins. And the overeating, these are all stressors. And so, an illness isn't necessarily because some magic virus just happens to find its way into your community at a time of year when it wasn't in the community at any other time of year. It's because we're eating wrong. We're living wrong. We're sleeping wrong in relationship to nature. And so, we have to get sick because the body is made to heal. Too much stress, it's got to come out, and that's what an illness is.

Dr. Joseph Mercola:

So, you had mentioned the hydrogenated oils, but usually those are PUFAs (polyunsaturated fats) that are hydrogenated because they've got the double bonds to do it. But they're certainly dangerous because every time you hydrogenate those, you can get trans fats, and trans fats clearly are not good. But even if you had the healthiest, pristine PUFA oils and you take them in excess, your body can essentially fry them itself because at 98.6 [degrees Fahrenheit], that's enough of a heat stress to convert them into these oxidative metabolites that are very dangerous to your body and tissues, and creates loads of free radicals. But the other thing too is that most people, especially those people living in New York, it's too damn far north to live.

So, come around September or October, there's not enough sunshine there to generate vitamin D, which is a powerful influence. And yes, you can swallow it, but there's so many other benefits to go with sun exposure independent of vitamin D that support your immune response, so ideally, you would get outside. But even in the middle of the summer though, there's a lot of people in New York who never get outside. Or if they do get outside, they're wearing long shirts and long

pants, and the amount of sun touching their skin is minimal. So, I agree, these variables have to be addressed, and your body has the ability to fight these things, but it becomes more challenged the further north you're living, the further away from the equator, because obviously the southern hemisphere's reverse.

Dr. Larry Palevsky:

So, in conclusion, it makes no sense to get these shots because the illness is not caused by a microorganism. It's caused by [being] out of sync with nature, out of sync with food.

Dr. Joseph Mercola:

I think it's a combination. I think that the microorganism's there. A lot of people dispute that things [like] viruses don't exist. I think that's somewhat heretical for sure, and isn't supported by solid science that's been around for hundreds of years. But it's an impaired immune system that actually contributes to the infection. If you have a solid, bulletproof immune system, you can throw all the viruses around, it's not going to be an issue. Your body can handle it.

Dr. Larry Palevsky:

I would say that-

Dr. Joseph Mercola:

Except maybe bioengineered viruses, that would be different.

Dr. Larry Palevsky:

I'm not saying there are viruses or there are not viruses. What I'm saying is that we're looking at the wrong cause for the illness.

Dr. Joseph Mercola:

Yeah. Right. Yeah.

Dr. Larry Palevsky:

The virus isn't the cause of the illness. The virus is the bystander, and it's just a piece of genetic material that you happen to be able to capture on a swab without even knowing if the viral material you're swabbing is from your cells, from your bacterial cells that are lining your nose or from the air that you breathe in. So, that's why I'm saying it may be present, but I think it may not be the cause. And that's why we want to look at other reasons for the body to get sick.

Dr. Joseph Mercola:

Yeah. So typically, when you do get sick because you've ignored or failed to implement these strategies to your lifestyle, or for whatever reason you have stress and you're not sleeping,

there's a lot of reasons you can get sick and you have a fever. I'm sure you have some sage advice for this because even the hyper-conservative American Academy of Pediatrics, which I don't suspect you're a member of, but they discouraged the use of antipyretics or drugs that are used to lower fevers in all but very unusual circumstances. I think [in] any infant under 3 months old, a fever is an issue, and then from 3 months to 36 months, it's a lot lower threshold where it needs to be evaluated. So why don't you give us your take on fever?

Dr. Larry Palevsky:

Well, again, when an infant below the age of 3 months has fever, that needs to come to the attention of a medical physician. But most of the time what we know is that a fever is actually an important mechanism of the body to clean out something that the body has perceived as a threat. There's inflammation, there are impurities, there are wastes, there are toxins, and the body says, "We have to get rid of them." And one of the fail-safe mechanisms to do that is through fever. And the thing is that the very chemicals that cause a fever are the same chemicals that are present all the time to maintain our body temperature at 98.6 [degrees Fahrenheit]. So, to think that at 98.6 we don't have those chemicals is incorrect.

The same chemicals that give us 98.6 give us 102, but at 102, they're working a little bit greater in larger numbers to burn out and get rid of the waste. The fallacy is that if you have fever, you must have an infection, and that's incorrect. There are three reasons to have fever: one, infection, two, inflammation, which is probably the major reason to develop fever, and three, neoplasm or malignancy.

Dr. Joseph Mercola:

How about four, mitochondrial and coupling?

Dr. Larry Palevsky:

Oh yeah. You love to talk about that, right? Okay, all right. Yeah.

Dr. Joseph Mercola:

Yeah. You could take massive doses of aspirin, like 9 grams, which would give you tinnitus through the roof, or dinitrophenol, which is illegal in the U.S. but they both – I'm not saying it's a healthy thing to do, but it generates a lot of heat because you just burn heat like crazy. When your temperature's like 103 or 104, you are burning. Your metabolic rate goes up like 10%, 15% and you're burning a lot of calories.

Dr. Larry Palevsky:

Good, good.

Dr. Joseph Mercola:

It could be good, it may be a problem.

Dr. Larry Palevsky:

Well, again, I'm glad you said that because what's lost, Joe, is when a child does have 103 or 104, it's actually a good thing because it slows the body down, it stops you from putting more stress into the body. And if there's anything that my mentors taught me back in the 1980s, which these were mentors who were practicing in New York since the 1940s, they would say that after their children resolved their fever illnesses, they would almost always have a developmental growth spurt. Because the purpose of the fever, which is almost always inflammation and not necessarily infection, is to clean out the body, is to prune the body, is to cleanse the body. And we've lost our understanding because we've taught parents to be afraid, and we've told parents that, "You don't have time for your kid to be sick. Let's give them the over-the-counter medicine. Let's give them the antibiotic. And let's make sure they have their shots so that they don't have to be sick and they don't have to miss school."

Well, little do parents know is that giving the over-the-counter medicines for fever, giving the antibiotics for something that's not an infection, and giving the shots actually creates much bigger illnesses in your kids.

Dr. Joseph Mercola:

Yeah. So, are there any indications that you think is – Well, actually before that I had a question about Reye's syndrome, which has ostensibly been associated with giving aspirin to kids who have a fever. But I've been doing some reading on that and it seems like it's really never been proven and it's just a theory, and I'm wondering if you've come to any hard cohort conclusions because the research I was looking at said it could just be equally related to Tylenol.

Dr. Larry Palevsky:

Well, again, I have not looked through the literature because it's not something that I'm exposed to or do because I don't recommend aspirin in my practice, and I also don't recommend acetaminophen in my practice. To me, acetaminophen is probably close to, if not the largest poison you can put in your body because it depletes your body of the very chemical that you need in the moment when you're sick and that's the glutathione that we talk about all the time. And you need that glutathione if you're sick. And so, giving acetaminophen is like taking from Peter and giving to Paul, and it lowers your ability to stay well. But I don't know enough about the updated literature.

Dr. Joseph Mercola:

Fair enough. Fair enough. Because at some point a fever can become too high. It's not typical, and I'd be interested in hearing your experience as a pediatrician who's seen exponentially more kids than the average parent, of course. The types of percentages where you think you actually need to suppress – because at some point there is, because you can go into a febrile seizure.

Dr. Larry Palevsky:

Sure.

Dr. Joseph Mercola:

Is that like 105, 104.5? What is your threshold for taking some more aggressive interventions to lower the temperature?

Dr. Larry Palevsky:

So, I'm not a fan of forehead or ear thermometers, so these are not reliable to me. No matter what studies they say. To me, a good old oral or rectal thermometer, if you can be careful and not break it.

Dr. Joseph Mercola:

Are you talking about mercury thermometer or a digital thermometer?

Dr. Larry Palevsky:

Well, if a digital thermometer can be used rectally, then-

Dr. Joseph Mercola:

Yeah, of course they can be,

Dr. Larry Palevsky:

Yeah, again, that's fine with me. But if people still have mercury thermometers, please be very careful with them. I actually found my mercury thermometer that I grew up with when my mother passed away, and I still have it. Anyway, the rectal thermometer is the best from my perspective. But in 1993, when I was thinking about leaving the ER and going into private practice, I said to a colleague of mine whose practice I was looking at, I said, "What do you do for all these kids who are 3 months to 3 years who have a fever and no source for the fever? Do you do bloodwork and urine?" He said, "Larry, if I did blood work and urine on every one of those kids, I'd lose patients in my practice." I said, "So what do you do?" He said, "Think about it. If you have a kid who's 104 [degrees Fahrenheit] sitting up and looking at you and able to converse and able to keep the head up and hydrate and talk and interact. And a kid who was 100.4 who couldn't lift the head up, who was lethargic and wasn't speaking, which kid would you worry about?"

And it was a great teaching for me because it reminded me of clinical practice. Clinical practice says, "Can you evaluate the child for being alert, awake, arousable, interactive, able to walk, talk, drink, pee, poop? What's the skin color? What's the respiratory rate?" And so, I don't worry about the number as much as I want to be the clinician. I want to see what the kid looks like. Because one kid's 104 may be another kid's 102, and another kid's 105, or another kid's 101. So, I try not to focus on the number. The parent doesn't agree with me, and we have some conversation about it, but I try not to worry or focus on the number.

Dr. Joseph Mercola:

Yeah. And you made the important distinction that there was an age group. These were kids over 3 months old. Is it 3 months to 3 years? I know that under 3 months, it's absolutely an issue. But is there another special extension from 3 months to 3 years old that you have a lower threshold for fever? Because it could be because they're different humans. They're small humans and they have different characteristics.

Dr. Larry Palevsky:

When I was training as a resident, if a child between the ages of 3 months to, I think it was 2 years, had a fever above 102.5 and no obvious source, the concern was that the kid could have bacteremia. So bacterial-

Dr. Joseph Mercola:

Do a spinal tap.

Dr. Larry Palevsky:

Right. So, we would do a blood culture, a CBC and a urine [test]. But outside of the hospital setting, that practice wasn't maintained. Pediatricians use their clinical skills. But in the last 30 years, parents got trained to ask for medicine because they wanted their kid not to be sick, because they believed it had to be an infection, because the public was made to believe and pediatricians were made to believe that if you didn't cover that kid, you'd have something more dangerous happen or something more serious could happen. And so, kids would get overmedicated and overmedicated. I rarely have to give medicines to the kids in my practice because I follow them, I'm clinical and I try to guide parents as to what are the things to do to help quiet the fever without suppressing the fever. So, warm beds-

Dr. Joseph Mercola:

It just occurred to me that I don't think we answered the question as to how many kids have you seen over that threshold, over the 3 years old that were – And what is the threshold? 104, 105 [degrees Fahrenheit], higher?

Dr. Larry Palevsky:

I don't look at the number. I am more interested-

Dr. Joseph Mercola:

So, you don't look at it, you're looking at the clinical-

Dr. Larry Palevsky:

The parents are looking at the number and then I include that with my clinical evaluation. But to me, most often, the number doesn't tell me who the kid is, I want to see who the kid is. But I have remedies that I-

Dr. Joseph Mercola:

Isn't that a risk, though? Because say a child did come in at 105.5 and you're looking at them and you're convinced there's not a big issue because of your clinical assessment, but then there's something that happens. Couldn't that be used against you if something – The standard of care, I guess is the term that's used, and if you fail to do that, not a big deal, but if you fail to do that and an adverse outcome is manifested, then there's a risk there.

Dr. Larry Palevsky:

Well, I don't practice in a litigious way. It's just not the way I approach the situation. And certainly, I don't have a stronghold over the parent. If the parent wants to give the Motrin or the acetaminophen, that's perfectly their choice. I provide them with other ways to help with the child so the child will feel comfortable, that are not suppressing. That don't quiet the immune system's need to do what it's doing. But if parents want to do that in combination with the medication, that's certainly their choice. I'm just providing them with other opportunities for helping the child through it. Because [what] I've found is that the more parents use the over-the-counter medicines, the longer it takes for the fever to go away and the higher the fever comes back.

Dr. Joseph Mercola:

Yeah, that's an interesting observation over a few decades. So, are there any consistent approaches that you found useful to facilitate recovery? Are there any supplements that you would use like vitamin C or zinc?

Dr. Larry Palevsky:

So, the most important thing when a child has a fever, and I use this term a lot, is pull the plug. Meaning keep stimulation into the child to a minimum. So, turn the lights down, quiet the environment [and] lie down with the child. If there's anything that I've seen work over the years, it's a parent lying with a child or a family member lying with the child. It's amazing what healing that can do.

Dr. Joseph Mercola:

Wow, that's an interesting strategy.

Dr. Larry Palevsky:

Warm bath, not a cold bath, a warm bath. Because what a warm bath does is it makes the body sweat. And when the body sweats, the temperature of the body can slowly go down because the evaporation of the sweat causes the body to cool. That doesn't mean you can't put a cool cloth on the forehead. Naturopaths have taught me a wonderful remedy where you take cold cotton socks that are wet and put them on the feet and you put warm dry wool socks over it and put the kid to bed. Get the kid under the covers and sweat it out. Let the kid sleep. Just make sure that the kid is arousable. Make sure the kid is hydrated. Don't feed the kid food. One of the major

things that parents complain about when a child has a fever is, “My kid won’t eat.” And my response to that is, “Good.”

Dr. Joseph Mercola:

Good.

Dr. Larry Palevsky:

I’m very happy, very happy. Just make sure the child stays hydrated. Water, tea, broth, more water, more tea, more broth. These are situations where I don’t recommend juices. I don’t recommend anything-

Dr. Joseph Mercola:

I was going to ask you about juices.

Dr. Larry Palevsky:

No, I don’t. Because I don’t recommend anything cold, and I don’t recommend anything raw, and the child needs warmth.

Dr. Joseph Mercola:

Okay.

Dr. Larry Palevsky:

You don’t want to stress the digestive system at all because it has to be quieted. Because in that situation, you want the rest of the immune system to be working to clean out whatever needs to be cleaned out.

Dr. Joseph Mercola:

So, essentially, fasting.

Dr. Larry Palevsky:

Fasting with hydration, right?

Dr. Joseph Mercola:

With hydration, yeah.

Dr. Larry Palevsky:

With hydration.

Dr. Joseph Mercola:

Not a water fast, for sure.

Dr. Larry Palevsky:

No, no, no, no.

Dr. Joseph Mercola:

Do you ever find that a sauna therapy would be useful on those lines?

Dr. Larry Palevsky:

Yes. Yes. Again, along with maintaining-

Dr. Joseph Mercola:

Hydration.

Dr. Larry Palevsky:

-proper hydration. Right.

Dr. Joseph Mercola:

Otherwise that could be the killer if you did it without hydration.

Dr. Larry Palevsky:

Well, again, that was one of the things that I saw when I was an ER physician for all those years. We'd see so many kids who were sick and they came in because they were dehydrated.

Dr. Joseph Mercola:

Then it's not just water, it's also the electrolytes. Because if you're just drinking plain water, you're going to get dehydrated.

Dr. Larry Palevsky:

Right. That's why the broth, the bone broths, vegetable broths-

Dr. Joseph Mercola:

Yeah. You got to have some-

Dr. Larry Palevsky:

The teas-

Dr. Joseph Mercola:

-osmolarity in there to keep the food in the cells.

Dr. Larry Palevsky:

And I do recommend that parents take either Celtic or Redmond sea salt and put it into the water to maintain those electrolytes. I'm not a fan of over-the-counter electrolyte drinks. Those are not electrolyte drinks to me.

Dr. Joseph Mercola:

You mean like Gatorade, right?

Dr. Larry Palevsky:

Yeah. That's one of them.

Dr. Joseph Mercola:

There are others. Yeah. So, do you have any views on saline rinses? Hypertonic saline, rinses like 2%, 3%, maybe even being more effective? There's been some research showing that, especially like a Neti pot or just nasal irrigation of the sinuses.

Dr. Larry Palevsky:

I'm a huge fan. I don't know, maybe over 20 years ago, I remember meeting with a family and I asked the 5-year-old girl to do a Neti pot, and she did it. And so anytime since then, when I recommend the Neti Pot, I invoke that story that if a 5-year-old can do it, any kid can do it. It's an amazing, amazing way to clean out the sinuses, open up the sinuses, and there's nothing like proper breathing to help with healing.

Dr. Joseph Mercola:

Well, it tends to be virucidal. Especially a hypertonic solution has clearly been shown in many studies to combat viruses. It just kills them dead because it's such a destructive stress when they have that high of an osmolality. And that's where they reside. The first place is the nose and the sinuses, not the lungs. So, I'm glad you found that useful.

Dr. Larry Palevsky:

Oh, yeah.

Dr. Joseph Mercola:

You still recommend it?

Dr. Larry Palevsky:

I still do, and I use it myself if I need to.

Dr. Joseph Mercola:

All right. Well, any other items you'd like to expound on in these crazy days that we're going through and the lull of the post-COVID progressing into who knows what?

Dr. Larry Palevsky:

Well, I think that we are at a time of tremendous censorship. And what I would say to parents who are looking for information [is], if you are being censored, I would hope that that would raise your alarm that something is being suppressed for a reason, which means that you would want to know what is being suppressed and why. Because in a true republic and in a true society of freedom, why wouldn't you have the opportunity to look at opposing views and come to a conclusion on your own? And so, I would ask you to continue to question, continue to look for answers. There are many, many resources that are available to you to find information that you could then go down a rabbit hole. And I will tell you that I have heard experts say that parents are not smart enough to understand the science of vaccines or the science of nutrition or the science of pediatric development or education.

And I will tell you that just hearing that should make for an alarm because you are smart enough. You've proven that you're smart enough. And it's your kid. It's your kid. So, understand that we are at a time where I strongly recommend that you take back your power to actually raise your kid, to educate your kid, to feed your kid properly, to understand what goes into your child and what shouldn't go into your child. And to be able to make those decisions as a family and not allow the state or some outside resource to take over your child's body and your child's mind.

Dr. Joseph Mercola:

Indeed. So, if people are in the New York metropolitan area and were interested in finding you, how would they do that? And do you have any social media presence or have you been censored and banned?

Dr. Larry Palevsky:

I have been censored a little bit, banned once, and I reopened an account and now, I could just see that they prevent some of my information from-

Dr. Joseph Mercola:

So, you're throttled or shadow-banned is what-

Dr. Larry Palevsky:

Warded, yes. Yes. So, my website is DrPalevsky.com, P-A-L-E-V-S-K-Y.com. I work at the Northport Wellness Center in Northport, Long Island. And I have an Instagram account, @Dr.Palevsky, a telegram account, @DrPalevsky. And I have a number of other accounts in MeWe and Rumble and all of that.

Dr. Joseph Mercola:

But nothing on Facebook or YouTube?

Dr. Larry Palevsky:

I have a Facebook account, but I personally never go on Facebook again.

Dr. Joseph Mercola:

It's probably a solid strategy. Even if you did, they'd shadow-ban you in a heartbeat, and-

Dr. Larry Palevsky:

That's okay. That's okay. I think it's a badge of honor if they shadow-ban.

Dr. Joseph Mercola:

Oh, yeah. Oh, yeah. Well, absolutely. Or ban you like they've done to many of us.

Dr. Larry Palevsky:

Well again, I think what it says to the public is, "We are controlling what information you should get and we're making you believe that it's for your good." If you want to be a sheep or if you want to be a part of the cattle, that's fine. But if you don't, I would certainly be concerned that that's what they're doing.

Dr. Joseph Mercola:

Yeah. Bobby Kennedy got into the anti-vax movement about the same time you did for the same reasons with the mercury in the vaccines, which it was [in] back then. They've removed it from many of the vaccines now. But the reason I mentioned that is that both Bobby's YouTube account and my account had no strikes against us in COVID. Zero. None. We followed the rules. We didn't post anything anti-COVID, nothing. Then we wake up one day in August of 2021 and find that both of our accounts are banned. Why? Because they had made a new rule in the morning and said, "If you ever posted anything that was anti-vax, you're banned." Which totally violates their terms of service. Because they have to warn you, give you a chance to rectify it. We never got one strike and they still banned us.

We wound up suing them and unfortunately, by the luck of the draw, we got the wrong judge because he had to sue them in California. So, that's a problem, and we got a liberal lefty judge

and she dismissed the case without even looking at the fundamental things. But anyway, it's a badge of honor for sure.

Dr. Larry Palevsky:

Yeah. If anybody is willing to do some critical thinking and look around you and assess, "Why is this happening all of a sudden?" What happened to the days where we had public discourse, public debate, disagreement, and still were able to go on with life in a real and functional way? Even if you don't agree with our positions, at least be concerned that our positions are being squelched. That's a power play and I would say it's not safe for you either. Even if you are on the side of the narrative that's being pushed. Because on a dime, you could be censored in no time.

Dr. Joseph Mercola:

They'll come for you too eventually.

Dr. Larry Palevsky:

Exactly.

Dr. Joseph Mercola:

All right, well thanks for everything you're doing and have done and continue to do, and you keep up the good work and keep up the good fight.

Dr. Larry Palevsky:

You too. Thank you. I appreciate you. All right, we'll talk again.

Dr. Joseph Mercola:

All right, thanks Larry.

Dr. Larry Palevsky:

Bye.