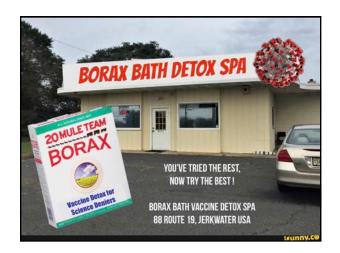






In a now-deleted TikTok that gained hundreds of thousands of views, an osteopathic physician named Dr. Carrie Madej listed ingredients for a bath she claimed will "detox the vaxx" for those who obtained a Covid-19 vaccine under the mandate.

Among the ingredients listed are baking soda, epsom salts, bentonite clay, and borax. In the video, Madej falsely claims the baking soda and epsom salts will detox any "radiation" in the vaccine. Bentonite clay will extract the "poison." She then recommends adding a cup of borax, as the substance will "take nanotechnologies out of you."





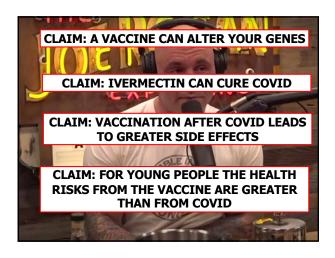


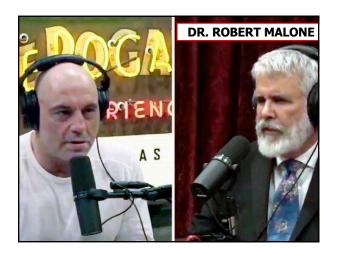








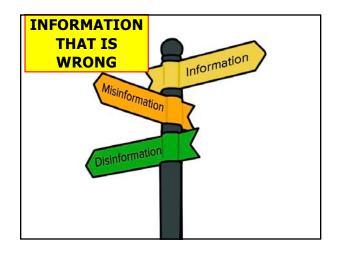


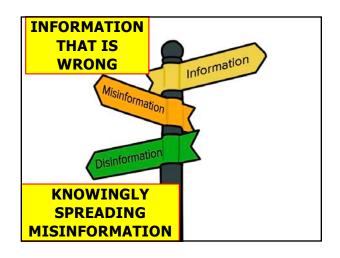


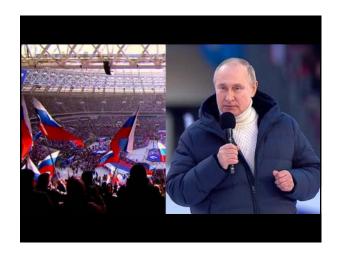






















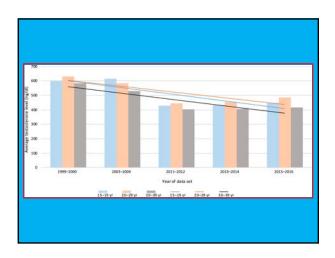




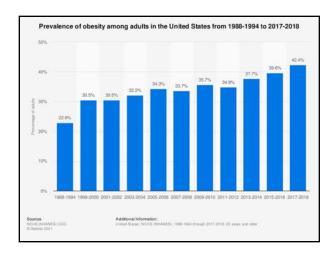






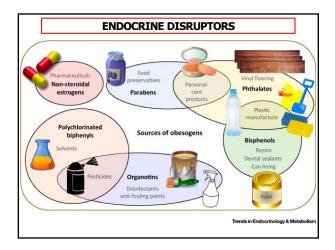






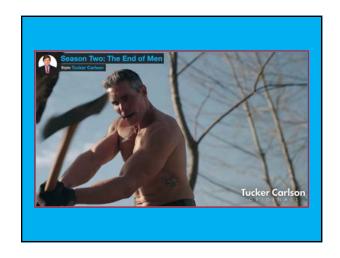
FAT CELLS METABOLIZE TESTOSTERONE TO ESTROGEN, LOWERING TESTOSTERONE LEVELS.

OBESITY REDUCES LEVELS OF SEX HORMONE BINDING GLOBULIN (SHBG), A PROTEIN THAT CARRIES TESTOSTERONE IN THE BLOOD. LESS SHBG MEANS LESS TESTOSTERONE AVAILABLE TO BIND TO RECEPTORS.











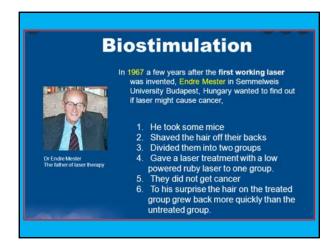












Photobiomodulation: The Clinical Applications of Low-Level Light Therapy

OXFORD

Graeme Ewan Glass, BSc, MB, PhD, FRCS (Plast)

Abstract
Background: Low-level light therapy (LLT) is a recent addition to the partheon of light-based therapeutic interventions. The absorption of redinear-infrared light energy, a process termed "photobiomoduation," enhances mitochendrial ATP production, cell signaling, and growth factor symbolisms, and alternatives oxidates trees. Photobiomoduation in now highly production, cell signaling, and growth factor symbolisms, and alternatives oxidates trees. Photobiomoduation in now highly control, and the production of the producti





Figure 2. Clinical example of skin rejuvenation (rhytids and dyschromia) with LLIT. A 73-year-old female treated with a homeuse dual-wavelength LLIT device at 470 and 808 m for 20 minutes/day for 12 weeks, (A) Pretreatment and (B) 1 week after discontinuation of treatment, LLIT, low-level light therapy.

CONCLUSION:
LOW LEVEL LIGHT THERAPY IS
HERE TO STAY. HOWEVER, ITS
UBIQUITY AND COMMERCIAL
SUCCESS HAVE OUTPACED
EMPIRICAL APPROACHES ON
WHICH SOLID CLINICAL
EVIDENCE IS ESTABLISHED.











