

With the Wind with **Dr. Paul** — Show 194, Pediatric Perspectives: How to Avoid Winter Sickness Naturally with Lawrence B. Palevsky, MD

Speakers Times

- **Lawrence B. Palevsky, MD** — 64.7%
- **Dr. Paul** — 34.0%
- **Unknown** — 1.3%

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Dr. Paul

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Dr. Paul

Get this book for your loved ones, for your family, for yourself, and let's get healthy.

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Do. You.

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Dr. Paul

Good morning PhD. Welcome to Pediatric Perspectives where we are looking at children's health challenges from a different perspective, one that includes critical thinking. One that's not afraid to ask the tough questions and bring you the honest truth. I am honored to bring our guest today, Doctor Larry Skin. Larry, you are one of the most passionate pediatricians. You're so dedicated to children's well-being and to this whole cause of trying to make our world a better and safer place for our kids.

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Dr. Paul

And you're still in the trenches seeing kids. So I am excited to talk to you about what are we seeing right now? It's winter time. This is respiratory viral season, and I'm interested just to know, what are we seeing? And then what we'll kind of dive into. What can we do to help keep kids out of the hospital?

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Lawrence B. Palevsky MD

Well, it's good to see you again, Paul. Thanks for having me on. We always have some really, really fun, discussions. So typically in the winter and, this year is no different. We're seeing a lot of kids with coughs and colds and fevers, a lot of rashes. I've seen some people would like to call them rhodiola, but they look they look different than just the plain old rhodiola.

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Lawrence B. Palevsky MD

But a lot of upper respiratory material, coughing and mucus coming down the nose. And, parents are running to the emergency rooms a lot. And what we're hearing from pediatricians and from parents all over the place is, walking. Pneumonia is going around. So you're getting a lot of kids who are getting antibiotics, and they're getting, beautiful or inhalers to help with their wheezing.

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Lawrence B. Palevsky MD

And some of them are getting steroids, and, they're supposed to be getting better. As you know, I have a different view of what's going on. Because in our world, Paul, anything that happens with kids is pretty much diagnosed as an infection. And I don't see these respiratory illnesses as solely being caused by infections. So I think our treatments are different, at least in my practice.

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Lawrence B. Palevsky MD

My treatments are different. Yeah.

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Dr. Paul

So when I was in practice, which was not that long ago, I retired in December of 2022. I remember in the winters leading up to my retirement, there was definitely an uptick in, you know, what I would have called restaurant viruses. And I know you and I have sort of slightly different opinions about that, but we used to have available to us and God forbid, it's a PCR based testing.

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Dr. Paul

We went through a nightmare with PCR and Covid. Nevertheless, they would we could also back up these tests with viral culture. So for pertussis, for example, we were able to back this up with viral culture. But the thing was, I mean, kids who have a cough and who have a pneumonia, I love that term walking pneumonia.

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Dr. Paul

It just means you have pneumonia. And I diagnose pneumonia as I can hear it rattles in the lungs. And if they're well enough not to be hospitalized, they're walking. Is that your definition of walking pneumonia?

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Lawrence B. Palevsky MD

Well, again, if I'm going to diagnose a pneumonia, I'm going to make sure that when I'm listening to the child's lung that after I get the child to cough several times, I still hear very slight what's called rattles, which are little sounds on inhalation at the very, very, very end of the breath that they take in the end of inhalation.

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Lawrence B. Palevsky MD

Correct. And a lot of times what I hear from kids, you know, from families is that, the oh, there's there's lots of noise in the lungs. Your kid has walking pneumonia. I'm like, that's not that's not how you diagnose it. You have to make sure that what you're hearing, if you're a physician, isn't there after you get the kid to cough a number of times, because a lot of the kids, as you know, as I know, they have a lot of mucus in the airways, and that can sound very junky, but that doesn't mean that's in the lungs.

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Lawrence B. Palevsky MD

Correct. So you got to clear the airways several coughs and then listen. And it's only at the end of the inhalation if you hear those small little what's called crackles or rattles, then I would say maybe there's a pneumonia. But sometimes if the child looks well and there's no evidence of a low oxygen saturation and all they have is a cough, I would treat it differently than antibiotics.

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Dr. Paul

Yeah, no, I agree. Because most presentations of a restaurant illness are going to be non bacterial. You don't need antibiotics for something that's not bacterial. I was taught and you can comment on this. My experience if, if we were to do a chest X-ray on every kid who was really sick and had a cough, we would rarely find pneumonia.

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Dr. Paul

Correct? It was bacterial pneumonia. Oftentimes it would be like on one side of the lung, not just generally everywhere. So there are clues to when it's bacterial and if it's truly a serious, seriously ill looking child with what really is clearly bacterial. Those are those rare instances. You and I would probably do antibiotics right.

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Lawrence B. Palevsky MD

Right. Well, they're they're there are two reasons. Two main reasons. When I look at the children, there are two main reasons that you are going to see, a cough and then a production of mucus. One is that the kid inhaled some degree of air pollution, mold, toxin, anything that's coming down from the sky that doesn't belong in the sky, that is somehow not accidentally getting into our airways, that's going to cause a respiratory lining.

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Lawrence B. Palevsky MD

Irritation. So that inhalation of poison is going to cause inflammation in the airway, and that's going to cause mucus production, and that's going to cause a cough. And the other reason kids would cough up mucus is actually because material that's in the body, most often from the digestive system and most often from material that causes inflammation. And it goes right through the bloodstream, up to the heart, right up to the lungs, and tries to make its exit through the lining of the airways.

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Lawrence B. Palevsky MD

And so bringing inflammatory material up through the bloodstream to the lining of the airways is going to cause inflammation. And the result of that information is the production of mucus. And so those are the two main reasons children will develop mucus and cough along their airway. Certainly. Of course, if they didn't inhale, the foreign body, but this is just air pollution, intentional or unintentional and then eating incorrectly.

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Lawrence B. Palevsky MD

And the body is built to remove wastes effectively. And so that's why the kids get respiratory illnesses. So in the winter when kids are still living a schedule like they did in the summer when they're still eating foods like they did in the summer when holiday season comes along and they're eating more sugar, and when they're inside and not getting vitamin D and their sleep is off, they're going to get more inflammation that needs to come out of the body and it comes out through the airway.

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Lawrence B. Palevsky MD

So the purpose of the cough, the purpose of the mucus production, is to move stuff out of the body. And so it's only when the body is unable to effectively move it out is when you might see a pneumonia.

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Dr. Paul

Yeah. So how often do you end up with a kid hospitalized for upper respiratory whatever?

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Lawrence B. Palevsky MD

No. None.

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Dr. Paul

Never. That's impressive. I remember when I was the busy pediatrician, it would be once or twice a year. They would have oxygen levels dropping, you know, 90 or lower. And an infant. That's concerning because their work of breathing is now to that point where they're, you know, breathing 60 breaths per minute, their oxygen's dropping. They're struggling. And mostly they were hospitalized for oxygen for support.

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Dr. Paul

Or if it was found on bloodwork and chest X-ray that it looked bacterial. They might be put on an antibiotic.

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Lawrence B. Palevsky MD

Right. Oh, I mean, I just had a seven month old baby who was in another country, and the kid developed a respiratory illness. They parents went to the ER because they were worried and they checked for Covid, flu and RSV. And the kid came back as positive for influenza A and RSV. So of course, my question is, well, what does the kid have.

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Lawrence B. Palevsky MD

And those those PCR tests are what's the best word I can use for it? Correct. You know, they're irrelevant. And so I don't understand why it's done. Because you can pick up the the swabs are programmed to pick up certain sequences of DNA and RNA.

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Dr. Paul

And so the test is right. They're looking for a certain sequences. And, they do this cycle of amplification where if you do too many cycles, you're going to almost anything becomes positive. Right. So that certainly was what we saw with Covid. So parents who are listening have heard that there's a lot of RSV going around that COVID's coming back and now we're going to have bird flu.

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Dr. Paul

Oh my gosh. There's been an announced death from bird flu. So our parents supposed to be worried about these various, viruses that that the public health wants parents to be worried because. Well, I shouldn't say because but one would wonder if it is because they have a vaccine. And so the pressure is you need to go vaccinate.

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Dr. Paul

You have a, if I'm not mistaken, a pretty unvaccinated population. And so maybe you can help parents put their minds at ease as to, you know, for an unvaccinated population, what's been your experience?

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Lawrence B. Palevsky MD

Well, again, I'd love the opportunity to, go over my approach again. The most common reason for children to get a respiratory illness is, again, either because they're eating improperly or because they're stressed and or because they're inhaling things from the air that are toxic to the lining of their airway. And unfortunately, we live in a culture where we only believe a respiratory illness is caused by an infection.

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Lawrence B. Palevsky MD

And when you see multiple people getting sick at the same time, then of course, that leads down the rabbit hole of, well, it has to be an infection because everyone's getting sick. But no one would consider the possibility, Paul, that really everyone's getting sick because they all inhaled the same mold, or they all inhaled the same toxins that were sprayed in a in a fake fog, or they all were inhaling the same heavy metals that were rained down on us from geoengineering, or they were all eating very similar diets that were high in sugar, which lowers your immune system, which makes you susceptible to getting sick.

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Lawrence B. Palevsky MD

And so you don't have to get sick just because it's winter. And this idea, Paul, that because it's winter, all of a sudden the respiratory viruses are grouping together, going, let's go to, you know, winter, let's get into the United States. You know, that's preposterous. I mean, it's it's really it's it's close to being, a simpletons way of looking at life.

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Lawrence B. Palevsky MD

Because these viruses are always here. They don't migrate. They're not like birds who migrate for the winter. And, the the idea that the viruses aren't here other than in winter is absolutely, non-medical and nonscientific. So if we can broaden our approach and understand that the body gets sick because it's purging and excess waste material, and if we look at the diet and if we look at our air quality, and if we look at our environments and our stress levels and how much we're inside versus outside, we can figure out why those kids who are eating properly and who are outside more, and who are not in areas where there's increased mold and toxins

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Lawrence B. Palevsky MD

from the sky, but they're not getting sick as often. Paul.

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Dr. Paul

Yeah, I would add an interesting observation that took me a little bit to figure this out. You figured this out a long time ago, but I'm in my office about 15 years ago or so, and I had been getting the flu shot because, of course, I'm a doctor, I'm seeing all the sickest kids, and I'm thinking, yeah, I need to do my part.

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Dr. Paul

Maybe it was 20 years ago. There was a time I was doing that, and a couple of my nurses would just sit there behind their nurses station and I would tell them, you know, you're going to get exposed to all the worst stuff you need to get the flu shot. And they would just smile and nod and say, we'll see, doc.

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Dr. Paul

And, you know, after 2 or 3 years of that same scenario where I'm trying to lecture them to get their flu shot, I get the flu two or 3 or 4 times that season. They don't. I woke up to it, stopped getting the flu shot, and I rarely got sick. The same we witnessed for Covid folks who went and got the Covid shot.

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Dr. Paul

We're getting Covid more often and the severity of their of their illness was actually worse. You know, so this whole I'm glad I got the Covid shot because imagine how terrible it would have been if I hadn't. Yeah. It just lies against the data that we saw. So yeah, you figured it out early. So.

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Lawrence B. Palevsky MD

Well, what's interesting, you know, Paul, we all figure it out when it's time for us to figure it out. When, you know, for those of us who do figure it out. But the thing is that you don't get the flu from the flu shot. You get poisoned from the flu shot. And the way the body handles the poisoning is to purge the poisons out, which is why you get sick.

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Lawrence B. Palevsky MD

And I, I brought this up. I mean, this was, included in the truth about vaccines, documentary that was done by Ty Bollinger back, and I think it was 2017 where, you know, I said, you know, people think that you get the flu from the flu shot. No, you get poisoned from the flu shot. If people really knew what was in that shot, they would certainly never drink it, let alone put it in their arm.

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Lawrence B. Palevsky MD

And the fact that the poisons are injected and you get sick is actually a sign that your body is healthy, and it knows to take that material and say, get the out now what rhymes? Chances are you've really suppressed your immune system for that period, so your resilience has gone down. But hopefully the serial illnesses help you come back to a baseline so you can further purge the poisons that you were injected with.

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Lawrence B. Palevsky MD

Yeah.

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Dr. Paul

Now I think there are enough studies showing that vaccines alter the immune system. You know, whether it's shifting it, you know, more towards allergy and auto immunity. You're

less able to actually resist infections or detox for that matter. So but that would explain probably why you don't vaccinate in your practice.

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Lawrence B. Palevsky MD

Well, I learned in 1998, Paul, that, there was mercury in vaccines. And when I used the precautionary principle and then peeked a little bit under the rock and found out, oh, my, mercury is not even the only problem with vaccines, I started to accept families into my practice who were willing to do either delayed schedule or no schedule at all.

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Lawrence B. Palevsky MD

And then by 2002, I decided if parents wanted the vaccines, I would not stop them. That's not my job to stop them. But they would have to go somewhere else to another pediatrician because I wouldn't offer it in my office because of the precautionary principle. First, do no harm. And what I was seeing in the literature very early on was deeply, deeply disturbing.

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Lawrence B. Palevsky MD

And and the fact that there was such a, a paucity of literature to actually prove what all the pediatricians were yapping about, about safety and effectiveness, like, you can't find any of that in the literature at all. So, no, I was quick, I was quick, and, you know, again, first do no harm. And and that's what we're here to do.

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Lawrence B. Palevsky MD

Yeah.

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Dr. Paul

So you've had over 20 years of doing pediatrics without vaccines. I'm just curious because when I coach families who are debating should I do vaccines or not, they're worried about these diseases for which there are vaccines.

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Lawrence B. Palevsky MD

Right.

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Dr. Paul

So if it's a real threat, you probably would have seen a lot of these diseases. From polio to whooping cough to there is no diphtheria anymore that I know. And there's almost no tetanus, but measles, mumps, rubella and chicken pox and, blood infections from the bacteria that cause infectious pneumococcus and amorphous influenza type B, how much of that have you seen?

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Dr. Paul

How many kids in the last 20 years have been hospitalized for a vaccine prevent, quote, preventable, a disease for which there's a vaccine?

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Lawrence B. Palevsky MD

So, I have seen chickenpox, and, I have seen pertussis. And, what most people are not aware of is that the pertussis vaccine doesn't work. And, you know, the tragedy, Paul, is that our medical system convinces people that if you get vaccinated, you are automatically immune. And that is a joke, that is medically unsound and not proven anywhere in the medical literature that you are automatically immune once you get the shot.

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Lawrence B. Palevsky MD

And, you know, based on what you said, people are going to think, well, well, the reason we're not seeing as much of the vaccine preventable diseases is because all these other kids are taking the hit, right? They're getting vaccinated to protect those who are not getting vaccinated. And if I had an hour or two, Paul, I would show how herd immunity that we discuss is absolutely incorrect.

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Lawrence B. Palevsky MD

And it's false. And we are dispelling myths about what herd immunity is. And I really wish that parents would stop repeating this nonsense about if you get vaccinated, you are protecting other people. That is not true. That is never been proven. There's no such science behind it. I have seen kids with measles. I have seen kids with, mumps, but rarely, as I said, varicella, chickenpox and pertussis are things that I have seen.

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Lawrence B. Palevsky MD

Yeah. And again, polio was predominantly caused by lead arsenate and DDT exposure in the environment. And there was no polio virus itself that was causing the disease. But, we would have to go back into, I think Suzanne Humphrey's book would, help with that dissolving things. And I think, some of the information in turtles all the way down may help with that information.

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Lawrence B. Palevsky MD

And in fact, governmental files going back to the 1950s will prove that polio was not a viral illness. But in fact, a such, a consequence of environmental poisoning.

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Dr. Paul

Yeah. So did you have any hospitalizations or deaths from diseases for which there are vaccines?

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Lawrence B. Palevsky MD

No. And I never saw Haemophilus influenzae b meningitis. Or if we got titers, I saw it in the 1980s when. Yeah, you know, when I was a resident because I was I was a third year medical school in 1985 when the first HIV vaccine came out, which was ineffective. And they did not incorporate the effective vaccine until 1987.

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Lawrence B. Palevsky MD

But that was only for 18 month olds and above. And then it wasn't until 1989 that they started to give it to two month olds, and by 1989, the incidence rate of amorphous influenza B, meningitis and epiglottitis had already started to go down. Yeah.

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Dr. Paul

No, that was my experience. We trained roughly around the same time.

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Dr. Paul

So I wanted to just highlight something for our viewers, my data, which compared vaccinated, unvaccinated, found that the unvaccinated were by far the healthiest. They were getting the fewest infections of any kind. You've had the same experience over 20 years. The unvaccinated are rarely sick. They certainly don't get very sick. When they are sick, they get over it quicker.

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Dr. Paul

So then, you know, the question for any any parent who's wondering, well, is it dangerous not to vaccinate? Am I riding on the immunity of the people who are vaccinating? No, it's backwards. Our unvaccinated families are providing a shield of protection because they just don't get sick, right? Sick people get other people sick.

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Lawrence B. Palevsky MD

Yeah.

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Dr. Paul

And so you're vaccinated? Sick all the time, kid is the one that's going to expose that, you know, chemotherapy. Immunosuppressed patient or grandma, if you will. And, we need to quit demonizing those who make the sensible, logical decision not to vaccinate. Once you look at all the data right.

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Lawrence B. Palevsky MD

Well, the one thing you know, you and I have heard during our time in the office is especially in families where, the eldest is vaccinated, second or third is partially vaccinated, and the third or fourth or fifth are unvaccinated. And this is exactly out of the mouths of the mother. Yeah. When my unvaccinated kid gets sick, he or she recovers so quickly.

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Lawrence B. Palevsky MD

Right. You hear that over and over again and then. Oh, yeah. My eldest, who is vaccinated, always takes the longest to get better. Always drags on. Always sick for a longer period of time. Yeah. And the other thing that, you know, you mentioned that I just want to grab on to is people actually believe that if you're vaccinated, you no longer have the germ inside your body to convey or pass on or transmit to others.

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Lawrence B. Palevsky MD

And that is a boldface lie because it's never been shown. Paul, and you and I know this, I'm really speaking to the parents. It's never been shown that when a vaccine is put into a child, that organism against which that child is vaccinated is gone from their body, no longer to be spread to others. And on the corollary of that, and therefore those who are unvaccinated, would be the only ones to be transmitting the germ because they didn't get vaccinated.

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Lawrence B. Palevsky MD

I mean, that is such trash. It's not even science. And, you know, we need some really good opportunities to take it step by step by step to show families that being vaccinated does not impart immunity to others because we don't even know if your child getting vaccinated is immune in the first place. And certainly it doesn't stop them from having the germ in their body, or even exhaling it or touching the germ on to somebody else.

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Dr. Paul

Yeah, I would highlight whooping cough. In this scenario. We are having a huge outbreak of whooping cough in the United States right now. I just was reading in Oregon. It's the worst since 1950. Yeah, early in the 50s. We have a highly vaccinated population against whooping cough. So this is vaccine failure. And in fact, the studies are showing the vaccinated against whooping cough are the ones who are getting whooping cough more often, and they're the ones transmitting it to others.

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Dr. Paul

So this is an epidemic or a huge outbreak of the vaccinated, and it's your vaccinated relatives and caregivers who are the greatest risk to your little newborn, who can't get vaccinated. Or actually, you and I know shouldn't be vaccinated. So you need to keep sick people away if you have a young infant because whooping cough can occasionally, it's not that deadly, but it can be deadly to an infant.

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Dr. Paul

Kind of in the 1 in 1,000,000, one in 4 million range.

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Lawrence B. Palevsky MD

Yeah. I mean, I agree, Paul, we're we're seeing a lot more pertussis or what looks like pertussis. You know, some of it, it could be para pertussis. And we're seeing more of that. You know, it's the 100 day cough. Parents really need to understand that this cough can linger. Please utilize Suzanne Humphrey's Vitamin C protocol for pertussis treatment.

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Lawrence B. Palevsky MD

It's very important. And I also encourage families to really take out of your kids diets during the time of their pertussis illness. The sugars, the flour products, the baked goods, the juices, even the fruits, the yogurts, the ice creams, the dairy. These are very mucus producing foods and it will only worsen their conditions. You may actually see the kids get better just by removing those foods from their diet and giving them a warm, cooked winter stew like soup like, nurturing diet.

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Lawrence B. Palevsky MD

And the other thing is, you know, we said it already. The pertussis vaccine doesn't work. And the fact of the matter is that we are all breathing in *Bordetella pertussis* bacteria, all day, every day, nonstop. And the presence of the bacteria in the lining of our airways is not sufficient for us to get the bacteria to act, be activated, and secrete the toxin that causes the cough.

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Lawrence B. Palevsky MD

It's the toxin that's secreted by the bacteria under conditions in the body, in the airway, that make the child susceptible to overproducing. The toxin, which then causes the spasming cough, the pertussis, vomiting. There's sometimes the, guy, you know, the exploding blood vessels in the face and the neck and.

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Dr. Paul

Broken blood vessels. They're not exploding. This is what our parents to think. Oh, my gosh, their face is going to explode.

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Lawrence B. Palevsky MD

Right? So it's the toxin. The bacteria are present. The vaccine does not make the bacteria go away. We all inhale it. We all breathe it in. We're all probably colonized with the bacteria. It's the conditions that we put in the body, the toxins we breathe in, and the improper foods that we eat that make us susceptible to to have the bacteria start secreting the toxin and cause the illness in the lining of the airway.

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Dr. Paul

So I want to leave our families and our viewers who have children and might still be worried about how do I know when to go to the hospital? In your office? I know in mine you probably use a pulse oximeter.

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Lawrence B. Palevsky MD

Yeah. So I have.

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Dr. Paul

If you have two. It's rare because your kids are so healthy, but if your child is working hard to breathe, they're coughing and they'll certainly if they're turning blue, you need to know where their oxygen, that you can actually buy a little pulse oximeter. It's a tiny little box that just fits on the finger. And you know, tiny newborns.

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Dr. Paul

It won't work, probably, but any few months old on up, you can usually make it work. And that will give you a heart rate. It'll give you their oxygen. And if their oxygen is below 90 or approaching that level, you need to have them at least looked at by somebody who understands children, right? Somebody who really understands how to care for young children.

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Dr. Paul

And, do you have any other tips for when you might want to go to the hospital?

00:32:14:37 - 00:32:53:30

Lawrence B. Palevsky MD

Yeah. I mean, children, when they lose oxygen, what are the first signs of hypoxia is irritability. So somnolence or lethargy or not being able to wake up. That's not often the first sign of hypoxia. That's actually a sign of something more significant. So if your child is irritable and, you know, cranky and, you know, just not easy to console and has a respiratory illness, that's usually the first sign that the child needs oxygen.

00:32:53:44 - 00:33:23:36

Lawrence B. Palevsky MD

So if you don't have a pulse ox, utilize that those criteria. You know, I have a whole checklist on my website, Paul, that I give out to the public for free. Dr. Pulaski, the spelling of my last name.com. And you can go to the section if your child is sick and there's a whole checklist that I offer to parents in my practice and in the public to know what to look out for when it's time to go to the emergency room, you know, is your child awake?

00:33:23:37 - 00:33:49:07

Lawrence B. Palevsky MD

Is your child alert? If your child is sleeping, can you arouse your child? Can your child talk? Is your child making eye contact? Can your child keep his or her head up and look at you? Is your child able to walk around? Is your child able to do anything? Is your child eating or drinking or peeing or pooping?

00:33:49:12 - 00:34:01:10

Lawrence B. Palevsky MD

Is the child breathing so fast that the child can't speak? Those are problems, and those are times when you are you're going to need to consider going into the emergency room.

00:34:01:10 - 00:34:13:43

Dr. Paul

Yeah. If you're nursing and they can't maintain a latch, they're pushing off and gasping for air. They probably need to be seen. Or if you're saying would be if your happened to be bottle feeding and they just can't keep the bottle in their mouth, they're gasping for air.

00:34:13:48 - 00:34:39:33

Lawrence B. Palevsky MD

Right? Yeah. Paul, that's a good point. I want to I want to reiterate what you said, if you don't mind. Yeah. Babies. Babies are the only creatures who can breathe through their nose and swallow at the same time. And so when the nipple of the breast or the bottle is in their mouth, if their nose is clogged, they will pull off the bottle or the breast.

00:34:39:38 - 00:35:09:30

Lawrence B. Palevsky MD

True. If their chest is so significantly inflamed that it's hard for them to breathe and swallow at the same time, they will also pull off the breast and the nipple. So remember babies, if your baby is still able to drink from the bottle and still able to drink from the breast, it's very possible that their respiratory status is still good enough to avoid the emergency room.

00:35:09:34 - 00:35:29:26

Dr. Paul

Yeah, agreed. Well, thank you, Larry, for those tips. I'm going to have you back for another episode because I'm going to really pick your brain on all aspects of pediatric health, what it takes to have a healthy baby in our crazy world today. But, I appreciate you sharing your website. And folks, you can go to that website.

00:35:29:26 - 00:35:32:05

Dr. Paul

Just tell us once, once again, that website.

00:35:32:10 - 00:35:39:49

Lawrence B. Palevsky MD

It's Dr. P a l e v is Victor Skycom doctor Lipscomb.

00:35:39:54 - 00:35:41:46

Dr. Paul

Thank you Larry, it's always a pleasure.

00:35:41:57 - 00:35:43:13

Lawrence B. Palevsky MD

Thank you Paul. Pleasure.

00:35:43:18 - 00:36:06:40

Dr. Paul

Well, folks, I also coach at Kids first forever.com. And you can see my other show with the Wind at Doctors and science.com. It's always a pleasure to have you on. I look forward to seeing you next week. I'm Doctor Paul.

00:36:06:45 - 00:36:08:14

Dr. Paul

I look forward to running

00:36:08:21 - 00:36:32:39

Dr. Paul

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00:36:32:45 - 00:36:33:32

Dr. Paul

I'm **Dr. Paul**.