

**Julie Tyler:** Where do you fit as far as having gone through medical school and at some point deciding I guess you wanted to incorporate more pluralistic modalities or alternative approaches, complimentary however you want to term it, and the reason for that and how colon hydrotherapy fits into that and whether you see it really having a place or not, and what is your thought on autointoxication as far as the colon harboring these toxins whether the contents of the colon are in fact toxic? And can they reenter the system and cause psoriasis and autoimmune disease and any number of symptoms that we now label as disease?

**Dr. Stephen Holt:** Right, okay, well we have to basically pare down these questions and we have to perhaps be a little more simplistic in the questions we're asking. In essence my interest is basically related to the fact I am a board certified gastroenterologist. I also am trained in clinical pharmacology and of course internal medicine and I'm also a board certified nutritionist. Naturally digestive health in general and colonic function which is an important component to digestive health are extremely interesting areas where I not only have the opportunity to treat people but I also have a special interest and have done much research in that area. And I've been practicing now for 40 years, which seems like a long time to me.

**Julie Tyler:** Yeah. It's marvelous to have both the traditional medication training in terms of being a gastroenterologist but also having the nutritional background seeing how the gut-brain, that connection has been very well-established at this point.

**Dr. Stephen Holt:** Yeah.

**Julie Tyler:** I mean you kind of have to have to look at whenever you're making any kind of lifestyle change that will affect the colon or the gut, you're inevitably...it's changing the diet, it's looking at ingestion, indigestion, absorption, all of these things.

**Dr. Stephen Holt:** Well absolutely and I think we tend to over-compliment ourselves in the modern movement of alternative medicine because some of these concepts have been around from time immemorial. I mean if you're looking at mind-body connections and spirituality you're looking at the fundamental basis of Ayurvedic medicine.

**Julie Tyler:** Which is 4,000 years old.

**Dr. Stephen Holt:** Traditional medical systems, probably the oldest medical system, and traditional Chinese medicine and the variations on a theme of those specialties. We see them as specialties but they were global treatment programs at one stage that were used by many, many people and there's a reactivation of interest in that area. In essence I think that there is much misinformation out there.

**Julie Tyler:** About?

**Dr. Stephen Holt:** About colon hydrotherapy, which was something that you really wanted I know to focus on. There is really a lot of misinformation on colon function, what is normal colon function. There are people that go to the extremes of tending to bowel hygiene. Some people who will actually do things that are quite damaging like purging their bowel continuously in a manner that's inappropriate and potentially unhealthy and on occasion quite dangerous. So we have these extremes of opinion and somewhere on this spectrum of opinion exists a reasonable point of view. On the one hand conventional medicine seems to reject practices like colon hydrotherapy perhaps ill-advisedly and not necessarily based on real data but more on oh, that's passé, it's old-fashioned, it's not true. But not really demonstrating why it's not true. Equally we have a precedent where many, many people describe benefits of colon hygiene, colon hydrotherapy. Striking benefits in some circumstances even people claim relief of psychiatric problems.

**Julie Tyler:** Something that shouldn't be a surprise because there have been documented individual cases in the case of Kellogg for example in Battle Creek, Michigan who was treating patients who suffered from a whole host of psychiatric problems and I have personally interviewed therapists and individuals who have said "I suffer from manic depression." Various forms of up and down or just severe depression and younger kids getting colon therapy because their parents are looking for something-maybe they're falling in the realm of autism. But they're immediately finding patients are calmer. The agitation seems to go away. I just find that it's not really a new phenomenon.

**Dr. Stephen Holt:** Yeah, understood and you used the word "phenomenon" and the reports you're talking about are still regarded as phenomenological. They're not regarded as hard scientific observations.

**Julie Tyler:** No, I know.

**Dr. Stephen Holt:** So, let's really pare it down and let's pare it down to the point of real controversy on both sides of this dichotomy of opinion, does it work, does it not work?

That's the first question. Does it work? Well the question is does it work for what? The idea of regularity of bowel habit is ingrained in people's minds. Certainly in the Victorian era there was almost an obsession with regularity of bowel habit. However, bowel habit has a range of normality. It's not an all or non-formality. A colon hydrotherapist or a colon therapist may argue somebody is constipated if they don't open their bowel every single day. Whereas many gastroenterologists or other scientists or physicians would accept opening of bowel once in three days is still within a normal range.

**Julie Tyler:** Normal range.

**Dr. Stephen Holt:** So between once a day and once in three days I happen to think-

**Julie Tyler:** Is that just normal for Western or developed society because we've gotten so used to the diet that-

**Dr. Stephen Holt:** You've questioned-

**Julie Tyler:** Presented itself over the last 150 years?

**Dr. Stephen Holt:** You've posed a very interesting question because definitions of normality of any body function are geographic, ethnic, specific, context related, I mean you certainly can alter the frequency, consistency, regularity or lack of regularity of your bowel by changing your diet. You can go on to a dietary intake that is low in roughage that's constipating the, will reduce your stool volume. So there are obvious external factors that affect many of these circumstances.

**Julie Tyler:** Doesn't it become more striking when you look at some of the studies that were done in the earlier part of the 1930s or '20s where you had physicians studying different indigenous cultures in Africa and looking at their diet and recognizing some very basic things about the diet. It was primarily plant-based. The amount of cooking was less, and the bowel habits were more frequent, three times a day. They looked at samples, they were larger, and then when you look at the incidents of diverticular disease or diverticulitis, colon cancer and these types of illnesses were not found in those cultures. So isn't that...does that logic follow?

**Dr. Stephen Holt:** Well, I'm not doubting what you're saying. I think the interpretation of what you're saying may be an oversimplification. There is no doubt some of the studies

you are referring to which are in African natives show that the African native on a maize or high fiber diet may pass up to one kilogram of soft stool on a daily basis. And of course they are not stricken in the same way that we may be in Western society by things like chronic spastic bowel or chronic hemorrhoidal problems or the prevalence that you mentioned of colon cancer. But again bear in mind what happened in the '30s isn't necessarily relevant, 1930s to what's happening today. We have a whole new toxic environment to deal with than we had 50 years ago, 20 years ago. Everything is changing.

**Julie Tyler:** So doesn't that mean that those organs that are responsible for detoxifying the body have even more of burden and are stressed that much more?

**Dr. Stephen Holt:** I think a lot of us believe that. I certainly believe that, but it's more than just the colon. So I see colon hydrotherapy as a useful intervention but part of a much more holistic treatment program. I don't see it as an isolated intervention necessarily. The well cared for person who goes to a colon hydrotherapy session is a person that receives nutritional counseling, can receive certain perhaps natural supplements that are used frequently with colon hydro therapists with benefit.

**Julie Tyler:** Do you have colon hydrotherapists who you consider colleagues or that you're able to discuss these issues with? I just ask because it seems to me in my travels speaking to these colon therapists, the good ones that are there to really help their clients inevitably it's colon hydrotherapy as a tool and it's in tandem with changes in lifestyle, i.e. more water in the diet, more fiber in the diet, eliminating too much sugar?

**Dr. Stephen Holt:** Unquestionably but this is the story of medicine these days where we're moving away...in fact super specialization may have hurt general healthcare in some ways because we're now moving toward a much more holistic approach to wellness. It's not just...take this, it's good for your heart.

**Julie Tyler:** Is this something that threatens the medical community, the traditional medical community?

**Dr. Stephen Holt:** No. I don't think it...I think that's overplayed, this notion that conventional physicians feel threatened by that kind of approach. Obviously classic...our pathic...conventional medicine is much more about receptor orientated medicine, drug treatments, and we have some wonderful conventional approaches. So alternative medicine is not the be-all and end-all of everything, it's not the absolute key which is why

people have gone to this idea of integrated medical approaches. So I could make myself very unpopular, but since I also have a naturopathic degree as well as a conventional medical M.D. I feel reasonably comfortable in comparing both disciplines. My opinions may not be held by everyone, but I think every degree of medical care that focuses has limitations. We're looking these days at much more holistic approaches. I'll give you one example of something that's removed from what we're discussing apparently but very relevant perhaps the most challenging disorder affecting Western civilization, something called-

**Dr. Stephen Holt:** Well I was going to actually change the tempo slightly and the subject by giving an example of a public health initiative that truly is a humongous problem for society that cannot be addressed by unitary or single type interventions and it's something called metabolic syndrome, popularly called syndrome X which we believe now affects about 70,000,000 American people and this disorder is really a variable combination of everything that we talk about every day, our cholesterol, our waistline, our obesity, our blood pressure.

**Julie Tyler:** Our alkalinity.

**Dr. Stephen Holt:** Well you've picked-

**Julie Tyler:** Our blood sugar levels.

**Dr. Stephen Holt:** A subject that is probably I wouldn't go toward alkalinity not at the moment. I think that's a terribly how can I say, controversial area in some respects. But more specifically this disorder is pre-diabetes so it's involved with not sky-high blood sugar but certainly a tendency toward the development of diabetes. Now this condition underscores heart disease, the commonest killer of Western society.

**Julie Tyler:** And you said how many millions of people?

**Dr. Stephen Holt:** Seventy million Americans, at least, one in four of the population.

**Julie Tyler:** Suffer from what they call metabolic syndrome.

**Dr. Stephen Holt:** Metabolic syndrome, a variable combination of those things that I just mentioned. Obviously this is a fundamental cause of heart disease. It's the number one

killer in terms of general disease. It also is associated with immune deficiency. It's also associated with a variety of other diseases including a higher prevalence of cancer especially pancreatic cancer. So it comes with a number of risks that people don't really recognize. It's the commonest cause of menstrual irregularity in a pre-menopausal female, polycystic ovary syndrome is caused by metabolic syndrome. Now you see imagine this X and imagine these four factors that I talked about which is high blood pressure potentially, obesity, high blood cholesterol and the fourth factor here is insulin resistance but let's call that a tendency to high blood sugar. Those four factors are not amenable to one single intervention. They are amenable to a whole lifestyle program of intervention where you'd have dietary fat control. You'd have calorie control in your diet. You'd have exercise and you'd have high fiber intake and you'd do all of those things that were beneficial to improve your immunity to take care of this whole hodgepodge of conditions that's health challenging. Now why do I raise this in the midst of a discussion where you're focused largely on colon hygiene or colon cleansing? Well I'm saying you know again-

**Julie Tyler:** Or just the validation that colon therapy has a place in...as a modality to address certain problems. That's really what this is about.

**Dr. Stephen Holt:** Well it does but we're scratching our head. I begged the question "Does it work?" And I answered it by "Does it work for what?" I then asked the question and these questions are asked in my book: if it works, how does it work?

**Julie Tyler:** Right.

**Dr. Stephen Holt:** Interesting.

**Julie Tyler:** Yeah.

**Dr. Stephen Holt:** Now you raised one issue that I talk about in my book that I think is a lot more important than people hitherto supposed. This brain-gut connection I think is extremely important.

**Julie Tyler:** There's a whole new field of neuro-gastroenterology.

**Dr. Stephen Holt:** Well of course and I talk in my book about something that I call colon calisthenics, which is a strange almost New Age term.

**Julie Tyler:** Which I came across already in my research. There have been physicians who were proposing that in the early 1900s, calisthenics specifically geared toward the colon, keeping it conditioned to promote regularity.

**Dr. Stephen Holt:** Well-

**Julie Tyler:** I just think it's gotten lost, yeah.

**Dr. Stephen Holt:** In and around the First World War approximately just prior to 1912 there was a very famous article which I think really was a milestone article that talked about the pelvic brain.

**Julie Tyler:** Yes.

**Dr. Stephen Holt:** And that particular article pointed to this intense neurological series of connections that were existing in the pelvis that were obvious anatomically in their proximity and attachment to the colon. So in other words the colon was characterized as well an intelligent organ.

**Julie Tyler:** Autonomous.

**Dr. Stephen Holt:** With autonomic function, yeah, it raised a whole series of issues. Now I want to get back to a concept that I talked about in one of my books I wrote 15 years ago called *Natural Ways to Digestive Health*. I talk about the intellectual quotient of various body organs and the colon is probably one of the cleverest. Arguably something like the liver is one of the least intelligent organs, but one of the more complex chemical areas of the body. Obviously a prime example of the highly intelligent organ is the brain.

**Julie Tyler:** Right.

**Dr. Stephen Holt:** And the digestive tract has been described as the "second brain".

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** There is as much nervous tissue or more nervous tissue in the gastrointestinal tract than in the spinal cord. So we have a number of reasons to sort of keep arguing but what we're lacking is outcome studies. We're lacking well-controlled...

**Julie Tyler:** We're lacking the why because...

**Dr. Stephen Holt:** Clinical outcome studies.

**Julie Tyler:** You started by saying you want to know why colon hydrotherapy may work? Why does it alleviate these anecdotal stories?

**Dr. Stephen Holt:** Well a good example, I mean just reflect: one major aspect of motor movement function of the intestines not just the colon is gastrointestinal hormones. And...

**Julie Tyler:** Such as serotonin?

**Dr. Stephen Holt:** You name it, you know, vasoactive intestinal peptide, all sorts of different hormones that control secretion of organs, secretin in the pancreas. All of these gastrointestinal hormones are all potentially triggered by an intervention that would exercise the bowel if you think about it. When we eat we distend our stomach, which secondarily results in the secretion of hormones that alter digestive function. I'm giving one microcosm of an example of how complex the act of exercising the colon with irrigation, which is what colon hydrotherapy is...how complex that physiological outcome could be in hormone secretion, nerve response and other physiological responses.

**Julie Tyler:** Do you mean in a positive way?

**Dr. Stephen Holt:** Positive or negative way, whatever, but most people describe the outcome of colon hydrotherapy as resulting in positive sensations, feelings of wellbeing. And in fact if you speak to people who have undergone colon hydrotherapy they will say in a rather indistinct manner "I feel great. I feel better. I feel a lot more vital."

**Julie Tyler:** It's even more than just energy levels and feeling less agitated and more relaxed. I mean people have described skin problems, acute skin problems that have gone away.

**Dr. Stephen Holt:** I'm not denying the number and diversity of reports of benefit, but they still remain anecdotal, uncontrolled observations largely. I am not going to question the voluminous amount of information where in fact, in sanatoriums, the mental institutions colon hydrotherapy was used as a primary treatment for psychiatric disease applied to disorders like schizophrenia arguably in some way beneficial. Now a lot of people just question the validity of the claims of benefit and that gets back to this issue of body intoxication and cleansing and let me explain that I think there's a lot of misinformation about body cleansing out there. Oh, yes, I'll do a colon cleansing. In fact I just five minutes before I came in here I just received-

**Julie Tyler:** You had a colonic?

**Dr. Stephen Holt:** No.

**Julie Tyler:** Have you ever had a colonic?

**Dr. Stephen Holt:** Yes. Five minutes before I came in here I received a phone call from a very senior physician in Houston and she wants to undergo a colon cleansing program and she wants to discuss on an individual basis the role of each herb that are found in some of these mixtures of colon cleansing in how it would benefit...

**Julie Tyler:** You mean the colon cleansings that people digest that people ingest.

**Dr. Stephen Holt:** Ingest.

**Julie Tyler:** Versus...

**Dr. Stephen Holt:** Colon cleansing formulas that contain anything ranging from purgatives to a variety of so-called cleansing herbs.

**Julie Tyler:** Herbs, wheatgrass, coffee etcetera.

**Dr. Stephen Holt:** Yeah. What is described actually in Ayurveda medicine is Amla body cleansing. They use a variety of herbs. But anyway just before I came in here I was having that conversation so it's sort of fresh in my mind. And we were discussing on an

individual basis was this a safe approach? What consequences could there be of taking colon cleansing? And the answer is...

**Julie Tyler:** And are you specifically speaking of colonic therapy or are you speaking of she wanted to undergo cleansing that was ingestible.

**Dr. Stephen Holt:** She was talking...well we can get really confused if we're not careful.

**Julie Tyler:** Exactly because colonic therapy, hydrotherapy is definitely different than... there are lots of colon cleansing agents that you can go and buy at the store.

**Dr. Stephen Holt:** Let me explain because I don't believe that...perhaps I didn't go into sufficient detail. The act of cleansing the body is something that involves the liver, normal kidney function, believe it or not normal respiratory function. These are all pathways of excretion. The colon, the bile that feeds in basically to the digestive tract are just routes of...excretory routes of whatever it is we're excreting, be it toxins, whatever. So certain organs are responsible for handling certain toxins...I mean most chemicals or drugs that are taken into the body, many regular treatments are actually metabolized or chopped up chemically by the liver and then eliminated often in the urine, sometimes in the stool. So again I want to make it perfectly clear that when you talk about cleansing you really are right to suggest you need to add the specificity that you're talking about of colon cleansing. But colon cleansing is terminology applied to colon hydrotherapy.

**Julie Tyler:** Yes, colon hydrotherapy being one way to cleanse the colon.

**Dr. Stephen Holt:** But it's also applied to taking mixtures of herbs which themselves have body cleansing properties including the simple act of purgation which is removal of stool which is a simplistic way of looking at what colon hydrotherapy does which is flush out the colon. Now am I suggesting for one minute that every time I see somebody and suspect that they are toxic I immediately say, "Go get a colon cleanse"? It doesn't really work like that.

**Julie Tyler:** But the first thing is that you even recognize that people can be living in a toxic state and I don't even know that the general medical community even speaks in those terms. I don't think they even cite toxicity in the body as being something...that people are generally walking around toxic. Do you ever hear a traditional doctor refer to someone's "toxic colon"?

**Julie Tyler:** I think physicians are conscious of environmental toxicity. I think one of the issues is they don't perceive a really evidenced based way of dealing with it.

**Dr. Stephen Holt:** But I have to say it strikes me as being a little illogical and hypocritical and short-sighted when we know that the number one side effect of many, many pharmaceutical drugs happens to be constipation. You see it in every TV commercial and you read it on every prescription bottle so those chopped up chemicals if...they're being processed by the liver and they're not sitting in the liver, let's say they are being eliminated through the liver and also through the bowel somewhere, something is breaking down because it's causing constipation. People are constipated as a result of these pharmaceutical drugs that they are taking and we only have to look at a 500,000,000 dollar laxative industry to know that this is going on. So how does the medical community get away with saying well there's no evidence? I don't understand that.

**Dr. Stephen Holt:** Again, I think we're going to run great risks here of confusing too many issues. Pharmaceuticals can indeed cause constipation. I'm not certain what you're implying when you look at simple constipation induced by say a short-term constipating type agent. Whether or not that has any real overall long-term significance for causing illness or problems is arguable.

**Julie Tyler:** Right, the occasional "I ate too much ice cream and now I'm a little irregular."

**Dr. Stephen Holt:** Whatever. I mean it's arguable that that really is a big issue.

**Julie Tyler:** But I guess the question is, is it an issue if someone is constipated more often than not over many, many years, is that colon able to harbor waste matter that can sit there for years at a time, what does it do to the walls of colon and where do those toxins go if they're not being eliminated?

**Dr. Stephen Holt:** Ah you see this is where now we'll get sparks. This idea of showing fecal matter that has been hanging around in people's bowels for years and scary photographs is complete, utter, bunkun.

**Julie Tyler:** You're not the first to say that. I had another GI say that same thing and yet I have talked to therapists who bring someone in for a series of colonics...

**Dr. Stephen Holt:** There's no question that...

**Julie Tyler:** ...Eliminating old, hardened, gray fecal matter, and it didn't come out the first session. I wonder what that's all about.

**Dr. Stephen Holt:** Yeah, but, you see, what's dangerous here is we get into these apparent confrontational statements of extremes of circumstances. Yes, I mean, I've seen elderly patients, especially octogenarians, who've not opened their bowels literally completely for months and have severe retained fecal matter.

**Julie Tyler:** So you have seen that first-hand.

**Dr. Stephen Holt:** But it's exceedingly uncommon. I mean, even to the point where one has to go in and manually evacuate the bowel.

**Julie Tyler:** And manipulate, yeah.

**Dr. Stephen Holt:** Yeah, which is not a pleasant circumstance for anyone.

**Julie Tyler:** So you've seen this in the very elderly.

**Dr. Stephen Holt:** Well, yeah, but they're extremely uncommon.

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** These people that would have us believe that young women are walking around with that kind of chronic excreta stuck in their bowel is just absolute sheer nonsense.

**Julie Tyler:** I interviewed doctors, a couple who had a son who was ill when he was under 10. He was very thin, and they accidentally discovered through X-rays that he was completely blocked in his colon. After they administered colon hydrotherapy and made other changes they brought him into a state of health whereby he was able to gain weight. How do you explain that?

**Dr. Stephen Holt:** Well, I can explain it in many, many different ways. First, in a young child like that I'd be thinking about congenital bowel disorders, such as Hirschsprung's disease.

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** And I'm not certain that I would jump to colon irrigation as the first intervention.

**Julie Tyler:** Right.

**Dr. Stephen Holt:** I think I'd do things like improve exercise, increase fluid therapy. But the answer to your question is to get a diagnosis. How do I explain it? Well, a competent practicing physician would look for a specific diagnosis. Now, there are circumstances that are not entirely clear where doctors have used terminology that's relatively meaningless, like "lazy bowel." I mean, one thing that's extremely common, especially in children who are developmentally disabled, especially institutionalized, the commonest prescription around there is for laxatives. They invariably become constipated and potentially impacted. But that situation usually results from a long-standing abusive circumstance when it comes to tending to the bowel.

**Julie Tyler:** Would you agree that there are millions of people walking around who have had long-term abusive lifestyle habits that have negatively affected their colon and so they are not eliminating the proper amounts as frequently?

**Dr. Stephen Holt:** I would subscribe to the notion that, yes, Western society has a circumstance with chronic dietary fiber deficiency. And in recent times lack of exercise, marginal things like healthy fluid intake, dietary changes that are negative, in some cases substance abuse that all can affect indirectly the bowel, yes, but when you say millions and millions of people, there's millions and millions of people...

**Julie Tyler:** We're a population of 350 million people in this country, and you're hearing numbers like one out of every three adults is obese, so there are millions and millions of people who are walking around who are overweight and their diet is poor and they're not absorbing nutrients any longer.

**Dr. Stephen Holt:** I want to engage you in something that is very important and...

**Julie Tyler:** Go ahead.

**Dr. Stephen Holt:** ...very important in my mind. And I need to be careful that I say it in a manner that isn't perceived as in any way challenging, but I want to deal with sequitur logic. I don't want to deal with all of this phenomenological "There are millions of people walking around with ba-ba-ba-ba-ba-ba." There are million people walking around that haven't blown their nose. So what? Now, I'm not minimizing the health challenges of today's society.

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** What I am saying is that we do live in a toxic environment, and I'm going to start to tell you some things now that will dismay you. Colon hydrotherapy is not a predictable way of eliminating toxins from the body. There are very few studies that have actually looked at specific toxic elimination. There is some evidence, and I cover it in my book, that indeed you may be able to eliminate heavy metals from the bowel but usually in very small amounts, not in the same way that you could eliminate heavy metals if you're doing things like chelation therapy when there's a real burden of a heavy metal like lead. You're not going to get that result from colon irrigation. So, yes, there's a possibility of augmenting body cleansing, but here's a good example. Many toxins in our environment that we're beginning to learn more and more about, dioxins, these fat-soluble toxins, they're not coming out by almost anything we do to detoxify the body, certainly not colon hydrotherapy. And I'll give you a very good example. I worked extensively with the 9/11 rescue workers who are the number-one medical example that's been discussed in the medical literature of "multiple intoxication." The first responders at 9/11, of whom I've seen many, many firefighters, were exposed to...

**Julie Tyler:** Asbestos.

**Dr. Stephen Holt:** ...organic toxins, you name it, asbestos, heavy metals, radiation...

**Julie Tyler:** Everything.

**Dr. Stephen Holt:** ...the whole caboodle. And in fact...

**Julie Tyler:** Every carcinogenic chemical.

**Dr. Stephen Holt:** ...they're getting sick with new diseases today, a decade or more later.

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** But the studies that were done on measuring fat deposits of fat-soluble organic chemicals showed that even 33 days on average of sauna treatment, sweating, was having marginal effects on removing those kinds of toxins. So anybody who thinks that colon hydrotherapy would do it alone is romancing...

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** ...some kind of crazy notion in my mind.

**Julie Tyler:** What I'm trying to get at is why does the medical community focus on the fact that there aren't any studies that definitely prove that detoxifying the colon through hydrotherapy has benefits?

**Dr. Stephen Holt:** I'm going to be kinder to my colleagues than many people are. I don't believe doctors have completely adopted that recalcitrant idea, that they've just shut their mind to this.

**Julie Tyler:** I spoke to the president of the ASGE about colonic therapy as a method for prepping the bowel for colonoscopies, and he pointed out that there are no major documented studies. I tried to bring up a 2006 study, but he wasn't interested in hearing that, and he basically discounted colon hydrotherapy as being useful on any level and said it's not been published in a major medical journal and "We're not interested." There are doctors that are saying it's quackery and unnecessary.

**Dr. Stephen Holt:** Well, again, there's a concept in science, in life, in philosophy. It's called "all or none thinking," all or nothing. And not that I'm accusing you of that, but there are degrees.

**Julie Tyler:** Sure.

**Dr. Stephen Holt:** There are gray areas here.

**Julie Tyler:** I'm accusing the medical community of that.

**Dr. Stephen Holt:** No, I think that you spoke to somebody who has a very fixed idea about the lack of usefulness of colon hydrotherapy, but I think what he's doing is...you know, I don't want to put words in this gentleman's mouth, but I think he's saying in comparison to standard bowel preps using electrolyte solutions, with the convenience and cost-effectiveness of that, that that gives colon hydrotherapy as a routine bowel prep procedure a very limited role. Now, I couldn't disagree with that, and here I am a protagonist of alternative medicine. I couldn't disagree with that logical statement, but...

**Julie Tyler:** That it has even a limited application. You're saying that colon hydrotherapy even if it were accepted as a protocol...

**Dr. Stephen Holt:** I don't think on a cost-effective, convenient, efficient way colon hydrotherapy is a procedure of choice for standard bowel prep for colonoscopy.

**Julie Tyler:** Well, then what about the GI whose practice has grown 25 percent because he is known to be the doctor who offers this as an alternative to the prep drink?

**Dr. Stephen Holt:** Well, you're saying that...who is he?

**Julie Tyler:** Dr. Roland Shepard in Tampa, Florida.

**Dr. Stephen Holt:** I don't know him. I'm unaware of anybody's practice growing because they're offering colon irrigation...

**Julie Tyler:** Dr. Christopher Demetriou in Garden City, Long Island. Same thing. He wanted to pioneer this new approach to prepping the colon and...

**Dr. Stephen Holt:** What newer approach is it?

**Julie Tyler:** Colon hydrotherapy. He had heard about it. Somebody asked if he offered that and...

**Dr. Stephen Holt:** Well, colon hydrotherapy or irrigation is as old as the hills.

**Julie Tyler:** Sure it is.

**Dr. Stephen Holt:** You can find evidence of it in Inca society, where they used...

**Julie Tyler:** In the Bible I think even.

**Dr. Stephen Holt:** ...a tube and a bucket, you know, and it's being used...it's a very difficult, complex conversation that we're having, but I think what's going on here is what's sickening me in general, and that is if there's a simple, gentle, natural approach to wellness, take it.

**Julie Tyler:** That's exactly the point. Why is there so much effort toward drugs that address constipation and...

**Dr. Stephen Holt:** Please let me finish on this...

**Julie Tyler:** I just wanted you to know that I am in agreement with you.

**Dr. Stephen Holt:** Let me finish on this thought. Prepping the bowel routinely for a colonoscopy...colon hydrotherapy is not a simple, gentle, natural approach. It's a far more complex approach than taking GoLytely colon prep fluid if that does the job. Now, would there be circumstances where I would pre-select colon hydrotherapy to prepare somebody for a colonoscopy? Of course. Well, I was making a very specific point, and it's based upon I would say a lot of experience, 40 years, I guess, but maybe too much experience. If I was looking for an efficient, effective way of preparing a bowel for colonoscopy, especially in these days where colonoscopy is done at the drop of a hat in anybody over the age of 50, in some cases 40...

**Julie Tyler:** In some cases 40.

**Dr. Stephen Holt:** ...depending on risk, then obviously a standard preparation with a substance like GoLytely or the equivalent of one of these electrolyte solutions that flushes out the colon is a lot more cost-effective, much less expensive, much less cumbersome than colon irrigation.

**Julie Tyler:** Yes, of course, when you factor-in the machine and everything.

**Dr. Stephen Holt:** So you mentioned two physicians to me, neither of whom I know or have heard of, who apparently have expanding practices because they have a predilection for using bowel preps with colon hydrotherapy.

**Julie Tyler:** Just as an option.

**Dr. Stephen Holt:** I don't know why, okay? I don't know what it is that the patient is thinking that gives them the impression that's superior. But I've done colonoscopies on people where I've prepped them and re-prepped them and re-prepped them, and I still can't get them clean enough, so I've had to resort to a colon irrigation to completely cleanse the colon with prolonged fluid orally without solids for a few days to actually completely clear-out their gastrointestinal tract, which is obviously pretty lazy, not moving. So, again, I don't think there's one simple answer to every question, but I don't believe that you've presented any compelling evidence that using colon hydrotherapy is a superior approach to colonoscopy preparation.

**Julie Tyler:** Did you ever experiment with it yourself consistently?

**Dr. Stephen Holt:** Well, I was trained in Edinburgh, Scotland, which is a very interesting academic environment where it's not uncommon for junior professors to extensively experiment on themselves. And those that are in the gastroenterology department obviously experiment on their stomachs, bowels in many different ways. So the answer is yes. I have personal experience of experimentation, including the administration of experimental treatments and drugs. I'm trying to get at the issue here that I'd believed for many years based on traditional teaching that colon cancer was much, much more common than we'd recognized and in fact was something we should aggressively screen for. But in fact about 10 years ago I was criticized for that. "Your approach is too aggressive. This type of aggressive approach to screening for colon cancer is unnecessary." Now we know it to be absolutely necessary.

**Julie Tyler:** It's the third-biggest cause of death in this country.

**Dr. Stephen Holt:** Yeah, it's certainly up there. It's certainly the second most common cause of cancer death to my knowledge behind the lung, and breast is close. But we've got evolving medical opinions. We've got a situation where somebody needs to take the initiative and really look at the literature from a critical perspective, which is what I've attempted to do in my new book. My new book...

**Julie Tyler:** About colon hydrotherapy?

**Dr. Stephen Holt:** Yeah. My new book is going to get me some friends, but it's also going to get me some differences of opinions, because I'm not buying into this frenetic idea that everybody should be washing their colons with the frequency that...

**Julie Tyler:** Understood.

**Dr. Stephen Holt:** ...Some people propose. Now, could I be proven wrong? Yes, I think I could, but it's a question of practicality. Colon hydrotherapy is generally a comfortable condition, but you're talking also about something that really challenged me, and I'll explain what it is. When I go back in the literature I'm looking at studies that were performed in 1940, 1930, 1920. They're not relevant to what's going on today. The methodology used in the study was not very well-planned scientifically. The equipment used was completely different than modern colonic irrigation equipment.

**Julie Tyler:** And these were studies that showed that colon hydrotherapy was beneficial?

**Dr. Stephen Holt:** Well, it's very interesting. I think a lot of people quote these studies but don't actually read them.

**Julie Tyler:** I agree with you.

**Dr. Stephen Holt:** And having read them, these studies are often anecdotal reports without controls, without any statistical evaluation, and represent the opinions of people, which vary from negative to zealous. I mean, I just wrote a rebuttal to what I thought was a very unfair impugment, negative article on colon hydrotherapy...I believe it was published a couple of months ago...where I was quite critical of the authors of the study, who described a couple of cases gone wrong with colon hydrotherapy, but...

**Julie Tyler:** They didn't look at a greater body of evidence or information...

**Dr. Stephen Holt:** No.

**Julie Tyler:** ...to the contrary or supporting colon hydrotherapy.

**Dr. Stephen Holt:** No. And I just was asked to comment on another study recently in a plastic surgery journal that has similar principles associated with it but quite different where plastic surgeons are complaining that certain natural products taken preoperatively can increase bleeding risk for patients. Well, ask the patient what they're taking. And the title of this article is ludicrous. It says something like "The Unknown Risk of Whatever." Well, there's no risk if you speak to your patients. The risk usually goes away. But the bottom line is I conclude in my book that I do believe there are circumstances with certain individuals in colon therapy where results have been inexplicably outstanding. I can't explain it. Is it in some cases because this is a placebo effect? In other words, a psychological effect? Is the general sense of well-being psychological? Is the attention paid to the patient as part of a process of pampering...

**Julie Tyler:** But even if it is the second brain versus the primary brain, the result is still the same. Your body is happier and discomfort goes away.

**Dr. Stephen Holt:** You've just written my book, at least the introduction. I agree entirely with you, but, I mean, I'll give you a very good example. We're looking now at things like pain control, and we're looking at measuring magnetic resonance images in the brain by applying different methods of pain control. And one highly effective method of pain control that's coming back to the forefront of management is meditation, meditation for pain control. And we can see that there are changes on imaging in the brain that are favorable.

**Julie Tyler:** Yeah. Duh. I'm just saying we come back to these age-old remedies and approaches that...

**Dr. Stephen Holt:** Well, I'm glad that I've not only gotten my opinion across, I've actually brainwashed you into believing what I believe, which is, yes, it's a reinvention of the wheel, and it doesn't shock me that that occurs, but I'm unaware of any studies...I don't have access to this...where people have done something as simple as "What is the physiological outcome in an otherwise healthy person of colon irrigation?" So you irrigate somebody's colon and you measure physiological parameters. You measure brainwaves. You measure electrolytes. Now, people have done this to some degree...

**Julie Tyler:** Someone in California is working on this with a machine where they can look at all of these physiological responses as a result of...

**Dr. Stephen Holt:** Again, not novel, not new. It was done in the 1940s in Scotland.

**Julie Tyler:** But you said it wasn't relevant because the way it was set or up doesn't apply today. So this would be a new machine that would maybe be more accurate, or the experiment would be better.

**Dr. Stephen Holt:** Look, I would just like to see the following. I called for this, and it's not a terribly well-controlled study, but it would be a good start. Could anonymously we collect uncontrolled information from thousands of clients who've undergone colon hydrotherapy and give them a simple score retrospectively to see what outcome they've had and what is the most common favorable occurrence as a consequence of colon hydrotherapy? Let's start there. And we have so many colon hydrotherapists, and let's start having a scientific track of education for colon hydrotherapists that isn't necessarily quite so self-serving and taught by people who tend to have less objective opinions about what's going on. Now, it sounds like I'm fence-sitting, but I'm really not. All I'm pleading for is an evidence-based approach. And I've done much research in my time. I've never tackled this area of colon hydrotherapy, but it's increasing in popularity, it's part of the modern trend of socio-behavioral medicine, and it's not likely to be funded by any research organization, and that's the problem. Unless there's a drug involved to treat it, unless it's some sort of big public initiative, which it really is, but it's not one that's commonly discussed, it's like an issue that's taken for granted or sometimes just ridiculed. You know, "Don't talk about your bowel." But I think the bottom line is there's so much we don't know, and it was a challenge. I was planning to write a simple monograph when I started, and I stopped writing the book because it got more and more and more complex as I read more and more articles and I looked back to the time of Mayo Clinic researchers, certainly the gentleman Alvarez, Dr. Alvarez, who's responsible for completely pooh-poohing the idea of autointoxication...

**Julie Tyler:** Yeah, I've got him on my list...

**Dr. Stephen Holt:** And...

**Julie Tyler:** ...of influential individuals.

**Dr. Stephen Holt:** And a good pun there when I said "pooh-poohing the idea."

**Julie Tyler:** Yeah!

**Dr. Stephen Holt:** But I think, again, inappropriately impugned the potential benefit of colon hydrotherapy without offering any reasonable explanation as to why people have

described these benefits. Now, is there overall a study that shows there's unequivocally benefit? I think cumulatively unless there's a massive conspiracy of liars, which I don't believe there is, it does make people feel good. They feel better. And some with disease, like you mention, that may be toxic-related disease, like skin rashes, chronic itching, all sorts of different conditions, do improve. But the idea of systematic documentation of the outcome of the intervention...and then there's variability in the intervention. We don't know if different types of hydrotherapy are more beneficial. There's closed and open types of hydrotherapy. There has not been a satisfactory comparison of colon cleansing using herbal agents with hydrotherapy. So there's so much work to do here, and it's relevant to do it, and I don't see how it's going to get funded. I really don't. And this idea that colon hydrotherapy is dangerous, I don't think it's dangerous at all when performed by anybody who's adequately trained. I think one of the problems is that we've got a lot of people out there doing it who have no training whatsoever. Now, I don't buy that one. Such people should go to a society like I-ACT, enroll, take advantage of the education programs and do it properly. It's not a cottage industry. It's something that must be taken seriously.

**Julie Tyler:** I definitely would like to get your take on...I mean it seems like this whole business of autointoxication is kind of the lynchpin that unravels the argument for colon hydrotherapy within the medical community. You and I also spoke about James Whorton who wrote that kind of history book on the last 200 years and people's perspective on cleansing of the bowels.

**Dr. Stephen Holt:** I need to get that book. I don't know where that book is.

**Julie Tyler:** I think I just ordered that book online and I'll interview him next month in May, beginning of May. We're going to be up in Seattle, but it looks like your book is doing a similar thing in the way that it's recounting a little bit of the whole background of the argument, but I'm eager to see where your book is different and even more focused on actual colon hydrotherapy. He goes into the whole idea of cleansing in general so he addresses our obsession with fiber a hundred years ago and how industrialization changed the way food was manufactured and higher society wanting more refined foods, wealthier communities. It was no longer the style to eat anything that was dark bread and things like that so that was really interesting. And he goes into all the spas that cropped up around the laxative industry. He talks about all of that but I sense that your book is really focused on colon hydrotherapy.

**Dr. Stephen Holt:** Part two of it is, yeah. Part one is really focused on what you can do in the natural arena for the promotion of digestive wellness.

**Julie Tyler:** I have a better understanding of where you are with the whole thing. It's very complex, and because we can't rely on anything that's definite we are still left to our own anecdotal devices really.

**Dr. Stephen Holt:** Well, I understand, but some of the people involved are nuts. Some of the people are really nutsy, and I have lectured at the society and received a special award of distinction from them about my lectures on the subject of colon hydrotherapy. I didn't mention that, but...

**Julie Tyler:** I sort of already knew that. They really, really wanted me to meet with you.

**Dr. Stephen Holt:** And I think I was asked following this recent criticism when I gave the rebuttal...do you have a copy of that rebuttal?

**Julie Tyler:** No.

**Dr. Stephen Holt:** Well, I've got to give it to you.

**Julie Tyler:** I may have come across it somewhere.

**Dr. Stephen Holt:** I got to give it to you.

**Julie Tyler:** Yeah, I'd love to look at that.

**Dr. Stephen Holt:** And you can reproduce it if you want.

**Julie Tyler:** Yeah. There was another great rebuttal by Melisa Bunderson-Schelvan. She's a PhD and the scientific liaison to GPACT.

**Dr. Stephen Holt:** What's GPACT?

**Julie Tyler:** GPACT is the Global Professional Association for Colon Therapists. Amy Sanders is the president. Anyway, she wrote a rebuttal I'm sure similar to yours.

**Dr. Stephen Holt:** I've seen it.

**Julie Tyler:** Yeah.

**Dr. Stephen Holt:** I've seen it. I know it sounds terrible, because people hate this concept, but...

**Julie Tyler:** Which concept?

**Dr. Stephen Holt:** Well, I'm going to tell you. It's a reality. I mean, patients and medicine will listen to MDs.

**Julie Tyler:** Yeah, they do. You're like God.