# VIEWPOINTS

# S.A. Decker Weiss, NMD, FASA, PLC, Founder and Executive Director Global Medical

*Interview by Sheldon Baker* 

Dr. Decker Weiss was a 20-year practicing cardiologist who decided to take a turn about three years ago and join a think tank research group called Artis Research. In his medical career, Dr. Weiss became an expert in diagnostic (lab) markers involving inflammation via the central nervous system (lecturing on it at Cleveland Heart), when he realized that there was an application to his work in PTSD, and potentially radicalization. With the Artis team, Dr. Weiss launched a research study on Syrian refugees and Israeli's and Gaza's (Palestinians), looking at the very first predictive lab markers for radicalization. The research was simply a breakthrough and was presented to world-leaders in the field at the CRIC (College for the Resolution of Intractable Conflict) School of Oxford University. Dr. Weiss has now spun Peace Possible™ out of Artis Research to focus on advancing refugee care, as well as applying the research in the field to diagnose, prevent, treat, and reverse radicalization. Dr. Weiss launched field clinics in Ukraine and Poland as the war broke out and is continuing his efforts to get critical supplies to the war as needed. Dr. Weiss has also authored the book, The Weiss Method, a natural way to reduce the risk of heart attacks and reverse heart disease. A graduate of Western Illinois University, he went to graduate school at Grand Canyon University, graduated medical school from SCNM and Harvard University's Kennedy School with a graduate degree in Leadership and Public Policy in 2020.

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*Integrative Medicine: A Clinician's Journal (IMCJ):* Let's first talk about your medical career. What stands out the most?

**S. A. Decker Weiss, NMD, FASA, PLC:** There is undoubtably an A and B response. The thing that stands out most for my career would be getting into residency fellowship and being on staff of the hospital as an atrophic physician and being a cardiologist and naturopathic physician. It was a good step forward for medicine. I was the lucky guy who got to do it.

For me, personally, being able to run field clinics in Iraq as Mosul was falling and they recovered sex slaves. The ISIS captures were coming through and being a naturopathic physician, I don't do a lot of world and global health work. Bringing in 30 to 50 young women at a time helping process them from this horrible world into a functional world again, required everything that I had as a physician from medications, anti-infectives, stitching, homeopathy and providing nutritional supplements to help calm shock and help revive their sense of well-being as well as getting them sleeping again. You would think like a clinic on the edge of Mosul while the city is being recaptured would be strictly like a medical trauma thing. It really wasn't. It was an opportunity for every skill I had as a physician. It was a great day for me and my non-profit.

*IMCJ*: I am aware you were the first naturopathic physician to complete a hospital internship and residency. Have others done that?

**Dr. Weiss:** There have been some residents who have gone through a similar program in Connecticut. They were modeled more specifically for an atrophic physician and learning some hospital-based medicine stuff. Mine is a little different because I was thrown in with the residents and fellows.

*IMCJ*: Talk about Global Medical and the clinic's experience in international healthcare.

**Dr. Weiss:** We launched Global Medical as a nongovernmental organization (NGO). There was a parent group called Artis International and Artis Research. They were spun out of the George W. Bush White House as a collective think tank to study why terrorism and cycles of violence occur.

To Artis founders Scott Atran and Richard Davis, politics didn't matter. The politics we wanted to study is why there's a Gaza, a Rohingya, and Bangladesh. Why is Iraq so factionalized and look for the underlying causes of those things and work on those. After 9-11, all the money for terrorism and cycles of violence went to find the terrorists and kill them. There were no whys. When they launched Artis International, they knew there was a brain chemistry pattern. They knew there were behaviors related to chronic inflammation, but they didn't really have a doctor to look at it. I had an opportunity. I sold my practice I had at the time wanting to get into international work and I was recruited by Artis International as a senior fellow. Then a couple of weeks later, I'm interviewing in the House of Lords. It was very surreal.

For a few years I launched research projects in Syria, setting up clinics, but also getting neurotransmitters and doing surveys, not just about setting up clinics and helping people immediately, but working on underlying causes and building trust in those communities. The way physicians have gone about world health in the past was with temporary setups and then winding it down versus establishing greater presence, which is what I did.

The mission of Artis was to find research studies and go after them and get grants. I wanted to do my own thing, so we originally launched Peace Possible and then changed the name to Global Medical. I set up clinics in conflict zones and conducted research through those clinics as to why cycles of violence war and all cycles of poverty occur.

#### IMCJ: How many clinics do you have now?

**Dr. Weiss:** Right now, we are down to two clinics because we just handed off our Ukraine clinics to the United Nations as it is going to be an ongoing war. I am still going to utilize them for research. We have two clinics in Iraq, but they are not used much as we are shifting those Iraqi efforts to Bangladesh to work with the Rohingya. It's been great for me. I've lectured with this data that I've generated at Oxford University. I've met with members of parliament in England and in Israel, leadership in the U.S. and in militaries globally presenting this data, educating folks about why their people are feeling the way they do and hopefully finding some ways to get the violence and the war, and cycles of violence and poverty to end.

*IMCJ*: How do the Red Equal Field Clinics tie into your group?

**Dr. Weiss:** We had to change the Red Equal name because somebody else had it. Now under Global Medical, we have the Peace Possible Research Institute, and it is where we publish our data. We're not sure what we're going to call Red, which basically was everybody's blood is red, everybody is entitled to healthcare, and everybody is entitled to recovery and thriving in life. Our clinical settings in Iraq were Red Equal. The clinics in Ukraine were Global Medical's Red Equal clinics. We're looking at new names now. My daughter, who goes by the name Wolf and has traveled with me to Senegal feels simply Global Clinics works. She will also be deploying with me in Iraq as we finish up our Yazidi clinics. *IMCJ*: Do some people compare you to Doctors Without Borders (DWB)?

**Dr. Weiss:** They do, but DWB is just a big operation. I'm a doctor and I don't have borders. We are smaller and targeted. We will do similar things, but I am generally faster getting into many areas than DWB. They are like the Titanic when they get there. They operate big hospitals. I tend to get there early, set up my clinics and hand them off to another group. But it is an honor to be associated where people say you are like Doctors Without Borders.

We also have an additional research mission with the integrative models that we practice. Bringing in those integrated models into something that is not available to other doctors and the staff is important.

DWB diagnosis' and treats and they do quite a good job of it globally. The bigger theme of Global Medical is diagnosing, treating, and researching. You get research studies about cycles of violence coming in, diagnosing, and treating. Adding that third component of researching is really what makes us different.

*IMCJ*: It seems like you have many challenges.

Dr. Weiss: It's not just about setting up your shingle and saying we have free medicine. That's part of it. But developing relationships and the trust to create an ongoing relationship to help get them out of poverty and out of cycles of violence is important. Part of the challenge is the willful face and all that is the dietary changes that the children who are going to be either soldiers, businesspeople, or students. In a lot of these locations, what are they going to do? What are their options? Do they even have an option to be anything but a soldier when we're looking about getting them out of the chronic cycles of violence of poverty? Is sugar in the diet? Exposure to alcohol at an early age or medications and other things that may not be beneficial. We need these types of models of basic nutrition to get into these areas so they can think clearly. Otherwise, I'm just treating the next generation of soldiers.

There is another point. When we went to Senegal, we found a very poverty-stricken area, but they were happy, but were just fully miserable. They know what they have, and they work with it, and that is simply just amazing because we see kids who are just so scared to even leave their house.

*IMCJ*: Do you focus on crop management, soil contamination and water that adds to poor health?

**Dr. Weiss:** I don't. I partner with a lot of groups on those issues. But you bring up a great point. Take the Dominican Republic and Haiti for example. I have worked on the board of both countries. It's not like the Dominican Republic is great, but on one side of the fence they have trees and social systems. On the other side, there may be

opportunities and jobs, but no trees, not anything. It is a completely failed state, and you try and bring in NGO's that will reteach them how to farm and how to manage resources. We've partnered with four or five different groups to try and do that. But when we move from medicine into those fields, you get a lot of government resistance. I tend to stay out of it, because otherwise that starts to involve the big donors such as U.S. aid and Red Cross. If those countries grow too much, they no longer don't get donations. There are a lot of obstacles for people becoming autonomous, especially in Haiti.

*IMCJ*: How did you get involved in Ukraine and its war effort?

**Dr. Weiss:** When the war broke out, I received a lot of calls because of my expertise in setting up clinics for refugees. My learning came from Iraq, so I knew how to do it. And through all the chaos, you must create a quiet atmosphere for a doctor to work, just logistically.

## IMCJ: Where did you go first?

**Dr. Weiss:** When the war broke out, there was a big need right on the Ukrainian border towns. I went there with the help of the Artis research team. One of the things about global medicine is getting access to these regions. When you don't have credentials and don't know people you can't even get into these areas. Luckily through my Artis research, I get to go almost anywhere and have political connections worldwide. I was able to literally walk up to passport control, walk into the border of Ukraine, meet with leadership in a specific Ukrainian town, including mayors, all those folks and said we're going to set up two clinics, one on the Ukraine side (one in Poland) for refugees. It was like a triage clinic with an ambulance service that had a fast lane because we were on passport control and could easily get delayed and clogged.

#### IMCJ: How did that work out?

**Dr. Weiss:** When somebody came in who was really sick, they were not going to get treated in Ukraine. They needed to be transported to Poland. So, we set up a fast ambulance service and we set up our big clinic over on the Medica, Poland side. We partnered with a group called Humanity 1st, and it was impressive. We had a little ER. We had a cardiovascular unit with every piece of monitoring, echo, ultrasound and more. We even delivered a couple babies. We were seeing about 150 daily in all sorts of shapes and sizes.

# *IMCJ*: You were quite a hero.

**Dr. Weiss:** That was my first involvement. Going in based on reputation. That was really cool. People realized they

don't have to talk to a big group. A group that's going to come in needing funding and government. I'm just one guy who can bring his team in. And my daughter is part of that team because she handles my social media that helps generate money so I can do all this. The UN contacted me and said they could take over my clinics and put in salaried doctors, not volunteers. They would even hire local doctors from Ukraine and Poland and pay them a nice wage. As a result, we had a handoff ceremony in Aviv about six months ago.

### IMCJ: What is your role now?

Dr. Weiss: Now what I'm doing is I'm the official doctor and supplier for the International Legion. The International Legion does not get a ton of support from Kiev. These are volunteer soldiers from all around the world. American, Chinese, and Israeli guys. Women too, and we had a few Kurdish women. We've supplied the medic packs for them with pharmaceuticals. There was a COVID outbreak, and we had the help of a couple supplement companies. Pure Encapsulations and Atrium Innovations provided zinc and quercetin, NAC and more. So, we had these supplies and while enemy soldiers were suffering with sore throats and battling COVID, Ukrainian and International Legion soldiers had vitamin D in the middle of winter in Bakhmut. That felt good. What I try and do is keep things small. As a result, we get very targeted supplies. And by staying small we get access. At the end of June, I will be returning to Ukraine bringing more supplies and working as a doctor in their resilience clinics.

*IMCJ*: What other capacity will you be in?

**Dr. Weiss:** In addition to being a doctor, also looking about how to set up mass casualty operations, things like that, in case the war continues to spread. It's about the Senegalese kids knowing somebody far away cared about them. These kids could be future soldiers. Or future leaders. They're the future Global Medical. We want them involved in knowing that we're not just sending money and good wishes. There are people with names and faces. We care about them. To me, that's medical. Someone's naturopathic physician.

*IMCJ*: If I understood you correctly, what you were providing was family and chronic care. And how about military field casualties?

**Dr. Weiss:** I am not a surgeon. This time outside Lviv I'll work in wound clinics where they'll bring a lot of soldiers from the East and West for recovery, wounds, amputations, things like that, and more surgeries. But sometimes I have filled in at a family practice clinic or a pediatric clinic because what happens throughout the country like Ukraine, all the resources are directed to the front lines.

Anyone who can move a scalpel is going to be there. A lot of times basic medical needs aren't met. We will bring in the trauma packs, train the medics, train the genetics on the meds because even the International Legion folks don't get a lot of training there. But frankly, a lot of these folks trained me because now they've been in the field so much. Then I will work more in post OP wound care, things like that and running my research information. We need to find out right now are we creating the next Afghanistan. We need to know for resources and for intelligence and for everything we are doing worldwide. Is it going to be at war in 20 years or are we going to have this war and then it's going to be over? We just do not know. Global Medical doing the data and the research, then presenting it to world class institutions like Oxford University. We will know what the data shows within six months. That is part of what we are going to be during this June trip.

*IMCJ*: The calendar countdown on the Global Medical website is for your travels back to Ukraine?

**Dr. Weiss:** Yes, I'll be back in Ukraine at the end of June. I will probably be there 10 days, maybe longer. I also must go into Iraq with my daughter to work in the Yazidi clinics and take part in a few meetings to hand off those medical locations.

IMCJ: You are truly providing global resources.

**Dr. Weiss:** We're shifting our resources a little more back to Ukraine and then to Bangladesh, and depending on if we are needed, I may rotate back to Ukraine. I may also go to meetings in Belgium with EU, then back to Bangladesh and start looking at setting up our clinics for the Rohingya.

*IMCJ*: Please share one personal and touching story from your experience in your Ukrainian health efforts that would capture the hearts and minds of our readers.

**Dr. Weiss:** Yes. It is a little personal, but there are a few I think are important to share. I did not have much of a family life and I had three great aunts who filled in and did everything mothers and fathers could do. My favorite was Aunt Mickey. She was wild, loud, and always had a cigarette hanging out of the corner of her mouth. Flaming red hair and wore crazy clothes. She also worked extremely hard. She lost her daughter, and we went through that together. We were quite close, but she passed away. She had stress in her life and lost her husband early. I always miss her. Now, my mom's and my aunt's side of the family are from Belarus, which is a Slavic nation. I would be looking at and seeing the Ukrainian people that resembled my Aunt Mickey and my mother.

I'm sitting there in my clinic it's freezing cold and just seeing patients and this lady walks up with flaming red hair

and a cigarette in her mouth. She looked to be in her 60s. She has got her dog under her arm. She looks like she's going off to Paris for fun. And she just starts talking to me in Ukrainian as if I'm her best friend. And she continues to talk. Finally, I got an Israeli who spoke Ukrainian and English to come over and translate. She said she has a headache. She had lost her blood pressure medicine and was exhausted as she had travels for three straight days. I learned she was from the eastern part of Ukraine. And she looked and sounded like my favorite aunt. I was trying to hold it together. I asked if he she had lost anybody and she told me her brother was killed in a bombing and she started to tear up. I asked what was next and she there was family in Chicago, even though she did not know them well. Her goal was to get over the boarder by bus so she could sleep, and the Polish government would be able to fly her to Chicago. I said you don't know you are really going, and she responded by saying for the first time in her life she did not know where she would be living. I told her I didn't feel I could let her go, to experience an adventure like a college kid. I told her she needed medicine. Suddenly, she gave me a big hug, and in Ukrainian she said, 'you're a good boy, thanks for being here, but I'll be ok. And I hugged her back and we both cried. I tried to give her some money and she wouldn't take it. I remember taking her to the bus and thinking this woman who had lost her brother a few days earlier, and now is not sure where she will live. She left and I never saw her again. It was a very real experience. That experience stuck with me.

This is what Ukrainians go through every day when a bomb hits their building. They're displaced and don't know where they're going to live. These are people who, when they move into a home, live there for life. There are almost no mortgages in Ukraine. They just move into a home with their family and add more living space.

IMCJ: Any other heartbreaking stories?

**Dr. Weiss:** Here's another story. I was exhausted. It was about the third day I was working in Ukraine. It's cold and it was a combination of frozen water and mud everywhere. This guy pulls up with this trailer and he takes a grand piano out and it's got these big knobby tires on it. It's literally like an off-road great grand piano. He pushes it just to the area where the refugees come through to come under the buses, hundreds and hundreds of people going through, and the weather is miserable. It was probably 30 degrees and between sleet and snow the whole time. It's just wet and cold all the time. And somehow, he got there and just started playing classical piano for days. I just sat there and realized during this inhumanity there's still beauty.

*IMCJ*: How about your corporate sponsors and those that are supplying vitamins.

**Dr. Weiss:** It's the whole Pure Encapsulations family of companies. The parent company itself plus Genestra Brands, Seroyal, Douglas Laboratories, Garden of Life,

and Unda. They've donated pallets and pallets of supplements that I literally pull together. I check all the dates, repack them and ship it off. It's multivitamins for schools because they can't afford anything, and supplements for cough, cold and flu. We have flooded Ukraine with nutritional supplements. Again, it's having access. It's very hard for a company that doesn't have access to drop off such products in Kiev. You're just going to get sucked in 80 different directions. We literally bring it right in through Medica on trucks, directly into places that need orphanages and places like that. The orphanage numbers in Ukraine are increasing because people are dying. And there's going to be more and more orphans.

McGuff Medical has given me great discounts and donated a lot of supplies. During the early part of the war, they gave me tons of exactly the right bandages, and they discounted much of the medications including antibiotics and bleeding medications, as well as other supplies. The Harris Goldsmith family, with Ukraine roots, has also donated a large amount of money. It was a nice surprise.

*IMCJ*: Have you reached your goal of raising \$25,000?

**Dr. Weiss:** We are now at \$15,000 and I'm really happy with that. We expect to have \$25,000 by the end of 2023, so I should not complain.

*IMCJ*: How much of your own money have you contributed to this cause?

**Dr. Weiss:** Ten percent is my own dime and 90% donations. With Ukraine, it has been from many Ukrainian families who have lived for Ukrainian heritage and donated a lot of personal items. A lot has been deployment specific. When I was working in Syria and border areas, there was a Syrian wealthy businessperson that funded \$35,000 and that got all those clinics up and running. Regarding the number of supplies, we have delivered well over \$2 million in supplies. Please know, I want us to be careful. Supplies are important, but we need the money. Fortunately, Global Medical is blessed.

*IMCJ*: What other types of supplies are you looking for, money aside, in terms of companies or individuals that might want to get involved?

**Dr. Weiss:** For Ukraine, trauma supplies. SWAT and triangle bandages, chest seals and anything that's cloth and has a good cap level for tourniquets for loose limbs that would help save lives. We brought several pallets of good tourniquets, and they're always needed. Beyond that, technical needs include solar panels that charge laptops, backpack covers, portable blankets, and little thermos bottles with a filter that cleans the water. Clean water for many areas is needed because the Russians bomb the

water filtration plants. Sometimes the kids can't get back to school because there's no water and this is a need for them.

*IMCJ*: It sounds like the Ukrainian people are doing surprisingly well from staving off the Russians and surviving, despite everything that we hear.

Dr. Weiss: They have. Zelensky is an excellent leader, and he doesn't have division within his country. Zelensky was elected on the fact that they may end up at war because he was for joining the EU, which for a lot of people and for the Russian government wasn't going to happen without a fight. But he never thought they would be attacked, and they weren't anywhere near going into the EU when the war started. What they have done smartly is have the will of the people to fight when you're the underdog. These are the things we study in our research. When you're the underdog, you must have a willingness to fight. The other guys don't necessarily have that. The Ukrainian people have that. Where the Russians bombed schools, hospitals, and churches, and declare their church inactive (the Ukrainian Orthodox Church is a big deal in Russia), and when the Russian Orthodox Church came out and said you are not real, you're only Russian. That hurt a lot of people. Russia is trying to take their souls away with all these things. Ukrainian people responded with Slavic's don't bomb Slavic's and we don't attack each other. Zelensky and his government, as soon as people didn't have electricity, brought portable generators into the area so they wouldn't be cold. When the water stopped, he got tanks of water into those areas. There were short bursts where people didn't have heat and water, but it didn't last long. So, the Russians were not able to succeed in breaking the will of the people, and it's very hard when you have a very long front, and you don't have a big commitment from your own population. While the Russians still favor Putin, they don't really favor the war significantly. They are willing to put up with it for him, but not willing to fight.

The international volunteers in Ukraine are still coming in. There are just as many volunteers going in today as there were when the war started, so there is not really a fatigue factor. Those are the things that I would give credit to the Ukrainians for doing. Russia could hit them with a half a million soldiers and we could be talking about something different, but right now the Ukrainians do have the upper hand.

IMCJ: Was Covid an issue you had to deal with?

**Dr. Weiss:** It was obviously important for soldiers not to be battling COVID while they were and are on the front lines. The Russian soldiers had to deal with that. Not that our guys didn't get sick, but they got over it a lot faster.

*IMCJ*: You mentioned the battle flags prior to our interview.

**Dr. Weiss:** Yes. Let me talk about the battle flags. They are given as an honor. We have a flag that flew over Kharkiv during a battle. They wrote in the Ukrainian language 'Glory to Ukraine', the Ukrainian salvo, and signed by several soldiers with the International Legion and some American volunteers. There are also flags flown at schools signed by the children. We have been giving those to our donors. Incidentally, there was an attack at a school and the children, by choice, came out of their shelter to sign a flag that was given to us. In the morning, the school had been bombed. Windows were blown out and sandbags placed in front of the school. By the time I got there that day, they had installed a bunch of new blast proof windows that came in from Germany, and that is how they live now.

This group had not been exposed very much to violence and yet they came up from the bomb shelters as they wanted to show, as they told me, that they were tough. They wanted to show they could do this. We are going to do another flag for our school exchange program so they can take turns hanging them in front of their schools.

IMCJ: Anything else to review?

**Dr. Weiss:** I have another story to share. The second time I was in Ukraine I was meeting with the UN. They had a representative named Roman. Roman is a barista and he

had a dream life. He was married to a Polish beauty, and he lived in Kharkiv. He had a coffee shop, had a good business going, and he went to work one day and saw that his shop had been bombed. The families that lived in the building next door were all killed as well. It was in the first two weeks of the war.

So, he put his wife and his four-month-old daughter in a car, drove to the border and dropped them off so they could go back to Poland where it was safe, and he stayed on the border to volunteer and work with the UN. When I was there, he was making coffee that soldiers could drink at the front. He figured out a filter system and now he is on the front lines making coffee for soldiers. I asked him if he would ever fight. He said he was too little, and guns scared him so all he does is make coffee.

*IMCJ*: Should individuals and organizations go to your website to learn how they can contribute?

**Dr. Weiss:** Yes. Global Medical at gmedical.org is our website. And drweiss@gmedical.org is my e-mail. People often like to e-mail me with a note or letter to give to kids to draw pictures.

