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Dr. Peter J. D'Adamo Interview

Genetics Scientists Uncover The Final End to All Diets!

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Dear Student,

I'm Michael Senoff, founder and CEO of HardToFindSeminars.com.

For the last five years, I've interviewed the world's best business and marketing minds.

And along the way, I've created a successful home-based publishing business all from my two-car garage.

When my first child was born, he was very sick, and it was then that I knew I had to have a business that I could operate from home.

Now, my challenge is to build the world's largest free resource for online, downloadable audio business interviews.

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I've learned a lot in the last five years, and today I'm going to show you the skills that you need to survive.

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Now, let's get going.

Michael Senoff

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Dr. Peter J. D'Adamo Interview

Genetics Scientists Uncover The Final End to All Diets!

Thanks to a powerful new diet designed to work with your unique body chemistry. Dr. Peter J. D'Adamo, naturopathic physician and author of the best-selling diet book "Eat Right 4 Your Type", has made his amazing diet program even better. His new book, "Change Your Genetic Destiny" builds on his original program by incorporating groundbreaking research from the field of genetics. In this audio interview, Dr. D'Adamo explains his remarkable new approach to achieving optimal health.

Here's what you're going to learn in this interview:

- The shocking reason why one-size-fits-all diets don't work
- Four ways that your blood type affects your health
- Revolutionary insight into how your genes affect your health
- How to identify your unique genetic type
- Why you are not doomed to repeat your family's health history
- How you may be damaging your body without even knowing it
- Why you should take control of your health right now

Your body is unique. Stop trying to follow the latest diet trends because they seem to be working for other's. Dr. Peter J. D'Adamo has designed a scientifically based diet that's designed to work for you because it addresses your body's unique needs. Listen in and you';; learn the secrets to better health. Enjoy!

Hi, this is Chris Costello and I've teamed up with Michael Senoff to bring you the world's best wellness related interviews. So, if you know anyone struggling with their weight, with cancer, diabetes, ADHD, autism, heart disease, or other health challenges please send them to Michael Senoff's HardToFindSeminars.com.

Chris: Dr. Dadamo, thanks so much for joining us today.

Dr. Dadamo: My pleasure, Chris.

Chris: So you're the author of Change *Your Genetic Destiny* and also *Eat Right For Your Type* and very interesting books talking about blood types and some really fascinating subjects.

Dr. Dadamo: Actually I have studied it for a very long time. Certainly my first book's now out almost 15 years. Still happen to start on Amazon with the intent to help. But yes, my father worked on it for a greater time before I did. So we've been in this area for probably the better part of half a century.

Chris: So you're actually a naturopathic doctor. Now what's the difference between a naturopath and just kind of your regular physician?

Dr. Dadamo: Well, I mean it's a small profession that is licensed to provide sort of the same level of primary care. We have a focus on more lifestyle of things like nutrition. We're skilled in a lot of traditional medicine. For instance Naturopath and **(Inaudible – 0:16:7:0)** tend to be very versed in things like botanical medicines and herbs and vitamins and things like that.

So I'd summarize it by saying it's a healing art that basically has as its prime focus health promotion, disease prevention, a wellness based approach. We just say that there's nothing wrong with the other approaches. It's more of a disease based approach and we try to essentially use as little of the other system as possible. So it's kind of science based. I mean most of the stuff we do would make perfect sense to any scientist.

We go through inordinate efforts to try to keep the person healthy and then hopefully minimize the use of the other systems by virtually teaching them things they can do themselves like eat right, stuff like that. Well the link between blood type and diet is actually something my dad worked on prior to my getting interested in it. And so as I said before he spent the greater part of the 1950's and 60's trying to figure out why some people did better on one type of diet and other people did better on another type of diet.

And at the time there really wasn't many other **(Inaudible – 0:2:12:2)** you could look at. I mean they didn't have genetic testing to the degree they have now. So one of the few things you could test for relatively easily was blood type. It's interesting that he sort of went on that premise because he did come up with an observation that really is quite powerful even to this day.

That roughly 40% of the population should be on a more a limited carbohydrate high protein diet. And another 40% of the population would be better suited to be on a Mediterranean or more plant based diet comped with carbohydrates of NDA's. So, right off the bat you've got something along the lines of 85% of the population that you can make a very powerful yet very simple decision about.

Who goes this way and who goes that? The interesting thing is, of course, to this day how that duality exists on the diet book shelf between those two basic approaches, and yet in each one of those books that are out there, be they Adkins or the Ornish Diet, they have a certain exclusivity that the one is basically which put everybody on a low fat diet that is basically low carb high protein.

And yet you know they ask people who are adherent and believers and detractors, so you know that each one is representing a percentage of the food. So maybe the major breakthrough was simply to be able to say that most approaches are going to be valuable, but you need to study who that approach could be the most beneficial for. And it turns out that blood type is a big influence.

Yes. Medicine is having a hard time with personalization in general. Because like I said before, largely medicine is a disease care system. So in essence you're waiting until the

person has a pathology. And there's very little about personal relation you need to worry about when a person has high blood pressure or a person has high blood or cardiovascular propositions.

The idea of personalization is that you're trying to come up with a way that you can optimize versus habit, the choices that they make. You get them a better than average level of wellness. So that basically they're that much more suited to do. There's a whole lot more about food on a personalized aspect than it is about medicine in general.

I was trying to break it down into a couple of small little niblets so that people can sort of get a feel for the basis of what drives the theory. First is the notion that our blood type is limited to our blood, which is not true. So, you need to understand that the thing that makes us have blood type A or blood type O is a chemical that's found all through our body.

It's found actually more in your digestive track than it is in your blood. So the thing that makes me blood type A is actually a chemical that's found throughout my digestive system. And so much as how we, I mean logically how our immune system deals with the food that we intake is the latest dynamics about things like how it relates to the blood type chemicals in our digestive track.

And many foods contain proteins that actually reacts directly with these blood type chemicals in our digestive track and can cause all sorts of difficulties. So the first way the blood type influences diet is actually the physical manifestation of your blood type influences certain relationships with food. And if a person has a different blood type, these foods would react perhaps in a different way or not react at all.

I'll give you a perfect example. I said I'm blood type A. Now if I was to just heat up a plate of lima beans and eat that, you could have believe it or not damage occurring to my intestinal track and if some of it got into my blood stream my cells of my blood would actually start to clump up. Now, if you gave that plate of lima beans to my wife, whose type O, nothing at all will happen.

Because the clumping is the latest (**inaudible00.05.29)** in that food that only clump certain chemicals of a certain blood type. And if you don't have that blood type you're left completely alone. Now, what happens when you clump up, right? You get more inflammation and certain stuff on your kidneys. It causes damage to your intestinal track.

It slows down your metabolism. So the first link between blood type and diet is that we consume many of them, interact directly with our bodies by interacting with our blood type chemicals in our digestive track directly. The second link is that blood type needs to control level of certain types of fluids that we make in our digestive track.

For instance it's known that blood type O, since the 1950's they've known that this blood type has more ulcers than the other blood type. They know that blood type A gets a certain type of anemia that only stayed in one **(Inaudible – 0:6:16:5)** So there you have one blood type that makes a lot of acid in their stomach and one blood type that gets the type of anemia that you only get when you don't make acid in your stomach.

So you can imagine who'd be better on the protein diet and who will be the person probably with the acid levels that are pretty high. And the person who's going to mess up the protein is going to be the person who just can't make a lot of acid in their stomach. So the analogy is a lot like automobiles. If you buy an economy car and put in high octane gasoline it will run okay for a while, but really the engine isn't designed for that type of gasoline.

Now if you by a Porsche and put in economy gasoline it will run okay for a while, but the engine really is designed to have a different type. And people are like this as well. So the single thing that you're doing, second theory, is that you're giving a person a diet that's in alignment with their capacity digestically. That seems to be linked to this generic cells in their blood type.

There's countless, tens of thousands of people who have actually seen myself and my father, but there's probably about five million people who bought that book and if we include the worldwide sales maybe close to 10 million. I get a kick out of watching a football game because I look at the

aerial shot of the stadium and then I try to multiply that, figure out how many people have read my book.

Other things that we've done over the years on my website would be allow people to leave sort of **(Inaudible – 0:7:30:1).** We stopped doing it because it was bogging up the server there were so many. We stopped at around, I think, 15,000.

And then we ran a computer program to analyze the data and came up with an interesting thing. That enormous numbers of people had improvements in things that didn't seem to be typically thought to be improved by a diet. For instance, we found that people who were type O who went on the type O diet often reported an improvement in thyroid condition.

We found that people who were type A that went on the type A diet often reported an improvement in Psoriasis. People, for instance, who were type B who went on the type B diet came to report that there was an improvement in migraine headaches. So, what would be the relationship when basically you're looking at food as medicine at this point not just simply used as a device to get into a dress for your sister's wedding or something like that? We're looking at a powerful effect. And actually it was this powerful effect of food that actually prompted me to go from writing books about blood type to writing books about using this diet to influence the expression of your genes, which actually occupied the last few years of my life and is built on the work with blood type but is actually kind of a little different. Because when you give a person a diet based on their blood type you're really going to the scientific literature and whatever analysis you're doing and you're constructing a picture of that blood type. The physiology, the type of illnesses they get, the elements of their immune system. All those things.

And then you adapt a diet to that manifestation, that genetic manifestation. So you're more or less fitting a person with what we know about that gene blood type. Now 4 years ago I realized that there was another way of doing it because there's a revolution going on in genetics right now.

Chris: Also, Dr. Dadamo, why don't you go ahead and give out your website?

Dr. Dadamo: You can go to the website that's named after my last name. Dadamo. D-A-D-A-M-O, www.dadamo.com and that's the major website. That one basically has message boards and blogs and bulletin boards and forums. And then there's the helpful online community, moderated family friendly. All the things you'd want in a place to go for information to help get set up. That's the major one for that. www.dadamo.com. Well you know the genetics that you may have learned in high school or the genetics that I certainly learned, although it is valid, the idea that being a dominant or being a receptive and when you get green or brown eyes or blue eyes and that's pretty much the end of the story.

That's valid. I think the notion of what Darwin called math book selection and evolution that's valid as well. Except that that's been viewed as the way that we adapt to standards in our body and that is no longer valid. It turns out that actually we are far more able to respond to the environment, not by waiting for some random mutation to occur over millions of years, but, actually it takes the genes that we already possess and actually adjust the gene, add little volume control on it in response to changes in the environment.

So roughly 70% of your genes including almost all the genes that control your metabolism, the sensitivity of the hormones, most of the elements of your immune function, literally have little volume controls on them that regulate, not the gene itself, but the excretion of it. I mean a good example; I use this one a lot because people understand it. If you smoked a cigarette as a high school student you probably had a relatively **(inaudible 00.10.49)**. But if you kept it up and eventually you become habituated and maybe even addicted because you find it so pleasurable, now believe it or not that was a genetic event. You actually turned on genes that were involved in detoxifying nicotine that you hadn't turned on before. So in response to an environmental change the body actually went and readjusted the expression of certain genes.

So let's then imagine that this goes on all the time. If we change environmental situations, we change the response to

aging or certain types of physical and mental stress. And the book was written with the notion that if you could identify certain characteristics, you could actually engineer certain diets that would actually help to optimize the expression of your genes.

So the idea was to understand, number one, that this gene expression occurs in two basic areas. It occurs in the prenatal period and it occurs in the preceding three or four generations in this sample. Reason being that when you are conceived you not only inherit the genes from your parents, you inherit the volume control settings of those genes.

So what the parents did one way or the other to make those volume controls better or worse was what actually was passed on to the offspring. So it's like if somebody gave you a stereo set and decided that they'd like the treble one way and the bass the other and that's the way they gave it to you. But then you decided well I like the treble this way and the bass that way and you passed it onto your kids.

So not only are you giving them the stereo set but you're giving them the settings of the stereo set as well. So not only can you do amazingly wonderful things to make the genes in your family genetically improved, we understand why certain things run in families when it's very evident that the reason it's there is not because the family has a gene that some other family doesn't have.

The reason **(Inaudible – 0:12:35:2)** for diabetes, and we're up to 45, and there's no single gene, or the gene for autism where they're certainly up to like about 19. All kinds of 33. So in essence it's not the case. What is even more depressing is that we humans have 27,000 genes but earthworms have 44,000, so we're not at the top of the heap because we're more complicated. We're at the top of the heap because we evolved.

When we go from that genetic blueprint a whole series of other things start to take over that involves the expression of those genes. That's where we have the complicated notion. It's not because we're genetically more complicated. It's just that our genes are programmed to blossom to a much greater degree than others.

I'm Chris Castello reporting for Michael Senoff's www.HardToFindSeminars.com

Chris: Sounds like you're saying we have a lot of control over the expression of those genes.

Dr. Dadamo: We do. And actually the studies are actually mind boggling. There's a very famous study that looked at mice that were bred to be overweight, develop diabetes and die of cancer in one year. So it was a mouse that was a laboratory species that was engineered to have these characteristics inbred into the strain.

So they discovered if they took the pregnant mice and gave them some simple things, anything you could buy at a local health food store, folic acid, choline, Vitamin B12, certain other things that increased what is known as methylation, which is a chemical reaction that really kind of their chemical equivalent of the volume control thing, that you could actually engineer out those characteristics in the next generation of mice.

And that generation of mice that actually go on to pass the improvement on, at any stage that you can identify as being inherently inheritable in some sort of family dynamics. Like I said before why is the Jones family more prone to Alzheimer's and the Smith family is more prone to colon cancer? It's not that the Jones family has a gene that the Smith family is missing for one thing and the Smith family has got a different gene.

That 70% of their normal genes are adjusted in some cockamamie configuration that result in them getting zits. And in the other family those same 70% of a fundamentally normal gene are simply adjusted in a way that winds up with an expression that occurs and produces this problem in that family. The single biggest influences are going to be the prenatal experience, immediate family history to a few generations going back.

Not a million years ago, but things that you are doing and your grandparents are doing are the things that you're dealing with the legacy of. Strangely enough somebody wrote a very provocative article in one of the scientific journals. They said "You know the places that your

grandparents were exposed to may well wind up being the thing that gives you the cancer that you get today.

And the mercury and the fish that you're eating today may well be the thing that gives these problems to your grandchildren who is three generations down the road."

We're looking at things like breast cancer and prostate cancer and thinking that these things are things that develop in the course of a person's exposure maybe in their later life to a chemical or pesticide. But there's a lot more evidence that suggest that this was the result of imprinting. That this is the result of how these genes are actually adjusted in prenatal life.

So if you can adjust it one way theoretically it's possible given enough influence you can adjust them some other way. But if you can't, it must be if you get to my age when your 55 years old and your genes are not that adjustable at that point. You've lost what geneticists call elasticity. So you can do something else because, you see, you can measure the recording of the actions of those genes on your own body and come to certain conclusions and then adopt a strategy that is really the equivalent of financial planning for yourself.

It's just like the diet; we start financial planning and say "Well we've got this now, this is the kind of retirement we figured for you." You can do an analysis of yourself, come to the conclusions of the areas that are weak or as a result **(inaudible 00.16.19)** increase in this area and you can actually put together a protocol that actually kind of reverse that. So you're actually changing destiny in a different way.

Chris: And people can find out more about that, Dr. Dadamo, if they read *Change Your Genetic Destiny*?

Dr. Dadamo: Yes. It's in the book. It's very simple. Believe it or not. A lot of these things that we're talking about represents the most basic things you can do. If you can measure one finger and compare it to another or you can measure whether your torso is longer than your legs or whether your upper leg is lower than your lower legs, you know your blood type. At that point you're going to simply do some simple things like

look at your fingerprint patterns and make some analysis there.

Then you go to a look up chart and calculate your gene type. You go to that chapter. You read about the diet. You look at the supplement recommendation and away we go. If you just want to learn about the genetic destiny book you can go to www.changeyourgeneticdestiny.com. Or you can go to the main website which is simply www.dadamo.com. D-A-D-A-M-O- dot com. And even people who don't know their blood type, you can buy a little home blood typing kit or you can go give blood at the local blood bank. But you can get this whole gene type thing figured out in a half hour probably for under $15. Compared to the thousands of dollars people can spend on genetic testing that's probably not going to be very relevant for them.

Chris: Now what do you think about all the information now that's out on gluten free, casing free diets and what role does that play?

Dr. Dadamo: That's a great question. Because one of the things you'll discover when you do fingerprint analysis is you'll discover whether you do or don't have something called white line. White lines are just simply like what it says. If you look at your fingerprints and there's a bunch of white lines that goes through the fingerprints horizontally you almost always have gluten problems.

So people who have this phenomena, which is not uncommon, are going to be advised to watch the gluten in their diet. Now, how would your fingerprint have anything to do with whether or not you're sensitive to gluten? Well, the same job that most people understand that your fingerprints don't change, right? That's why the FBI keeps them on records.

But the height of your fingerprints go up and down. And the height of your fingerprint is associated with the genes that actually makes the lining of your intestinal track as well. When the height of your fingerprints is so low that you start seeing creases underneath the fingerprints, this is what gives you the lines and takes the print, it means that your intestinal track is compromised and you're probably gluten sensitive as well.

Can you imagine that this is something so simple and yet believe it or not they're doing intestinal biopsies to figure out gluten sensitivity on people when they can just look at their fingerprints? Fingerprints are a great resource because they are not completely genetic and they're not completely environmental.

In other words they represent many of the developmental aspects that occur that we are so interested in when we're trying to figure out a person's gene type.

The great thing about fingerprints is you can compare the patterns on each finger and that gives you an idea of something called symmetry. The more symmetrical a person is, in other words the more your left side is like your right side, the nicer time you had inside your mother.

Believe it or not when you were getting made the left side of you didn't know what the right side of you was like. And so if they got it really good they're relatively similar. But if you had a lot of stress in utero you actually wind up with the similarities between the left side of the body and right side of the body. This is well known as biology.

As a matter of fact it's also well known when you go see a plastic surgeon that most woman who want to find some pictures they could take that they would like to have themselves turned into, always picks some actress who has very symmetrical features. And it's known in biology for instance when people are so photographic. When you saw men photographed as woman or woman photographed as men and ask them to pick who you would think that that biological partner for you would be, people always pick the face that's got the most symmetry.

So we know from a very ancient biological developmental thing to look for symmetry in a mate because it equates to fitness.

For more interviews on health, mind, body and spirit go to Michael Senoff's www.HardToFindSeminars.com

Chris: That is amazing. So it kind of fits into that whole idea of balance.

Dr. Dadamo: Go look at any Hollywood villain. If you see who makes a career playing a villain and they will always have, on purpose, they generally have an asymmetrical face. They don't have an asymmetrical face on purpose, but they're thought to be effective portraying the criminals because they're inherently kind of made uncomfortable by people with a lot of asymmetry.

Symmetry and balance is very common. For instance I live in Connecticut and we have the Connecticut **(inaudible 00.20.33)** and they have lost it. And **(inaudible 00.20.37)** will have a good year and a bad year. Maybe all of a sudden there will be no lobsters in Long Island Sound.
And they know thing are going to be bad, believe it or not, when they start pulling lobsters out of Long Island Sound, they start measuring the claws. And if the claws are very dissimilar they know that next year there's not going to be very many lobsters. The more the right side of you is like the left side of you, the nicer time you had inside of your mother.

Chris: The Institute for Human Individuality. What is that?

Dr. Dadamo: It's just a group of people who put on seminars. We try to get the brightest minds in the field to come and present their findings and develop these approaches for more use in a clinical environment type position. And we kind of foster research, try to get students into medical colleges that is actually supporting us as well.

Well the most interesting thing would be to run a leg race between the odds that the government will solve all these degenerative diseases through taxpayer funded research versus the odds that if we change your diet over a sequential generation and actually engineer your tendency to get these illnesses out of your family. I would spend my money on getting it out of the family.

Because we've spent trillions of dollars and know an awful lot more than we did before, but we're no closer to actually solving cancer though. But wouldn't it be interesting if rather than sitting around and waiting for somebody to come up with a magic pill to basically treat cancer, we could figure out in those families where cancer runs right through the entire family how can we get it out of that family's gene note?

Then we don't even have to cure it. We just have to deny its existence. So if you want to know what's going to happen is the world's going to get smarter. The world's going to get more networked. It's going to get more based upon individuals taking it upon themselves to learn about the things that they need to do, and really the world is going to divide into two camps. Those who are willing to do it and those who's going to be willing to wait and have someone else do it.

One person said that the problem with the American healthcare system is we park the ambulance at the bottom of the cliff.

Chris: If people want to really take charge of their health and change their genetic destiny and their health, pick up a copy of *Eat Right For Your Type* and *Change Your Genetic Destiny*. And what's that website again?

Dr. Dadamo: You can just put in blood type diet or gene note type or change genetic destiny into Google. It's going to come up number one in the search engines anyway.

Chris: Dr. Dadamo, thank you so much for joining us today.

Dr. Dadamo: Oh I appreciate it, Chris. Thanks for having me.

That's the end of our interview and I hope you've enjoyed it. For more great health related interviews go to Michael Senoff's www.HardToFindSeminars.com