

The Key to Reversing All Autoimmune Diseases

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✓ Fact Checked

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STORY AT-A-GLANCE

- › Conventional medicine doesn't offer a lot of hope for rheumatoid arthritis (RA) sufferers, as it is focused on treating the symptoms – typically using highly toxic drugs
- › From the late 1980s and for the following 10 years, I treated over 3,000 patients with rheumatic illnesses, including SLE, scleroderma, polymyositis and dermatomyositis; lifestyle changes can be very effective
- › The vital elements to successfully reversing RA include optimizing your vitamin D levels, consuming a diet that's very low in seed oils, optimizing your circadian rhythm and embracing time-restricted eating
- › Following a carnivore diet, using low-dose naltrexone and addressing emotional trauma are other important elements of resolving RA

It has been estimated that over 54.4 million people in the United States have an autoimmune disease.¹ Some of the major ones would be rheumatoid arthritis (RA), multiple sclerosis and inflammatory bowel diseases like Crohn's and ulcerative colitis.

Since I have a massive clinical experience with RA I am going to use it as an example of how all autoimmune diseases can be treated. Why? Because they all have similar origins which are related to an antigen sneaking into your body and your immune system confusing it with one of your tissues that tags your tissue as a foreign invader. The antigen that gets into your system determines which of your body's tissues will be impacted.

From the late 1980s and for the following 10 years I treated over 3,000 patients with rheumatic illnesses, including systemic lupus erythematosus (SLE), scleroderma, polymyositis and dermatomyositis. RA has a devastating prognosis in many patients.

Rheumatoid arthritis affects about 1% of our population and at least 1.4 million Americans have definite or classical rheumatoid arthritis, although it's probably closer to 2 million.² This number has increased in recent years, as in 2014 only about one half of a percent of the population suffered from RA.³

Since around 7 million Americans have some form of inflammatory rheumatic disease,⁴ this means you likely know someone with it. It is a much more devastating illness than previously appreciated. However, most patients with rheumatoid arthritis also have a progressive disability. This is important as the suggestions I am going to include should help improve all autoimmune diseases.

Testimonial From One of My Patients

I ran into a former patient, Sarah Allen, after giving a presentation in Orlando several years ago, where she happened to be in attendance. After talking to her, I decided we needed to share her important story as it would provide hope for so many who struggle with this disease. She first came to see me in August of 2003. Even though she was only 28 years old at the time, she'd been experiencing symptoms of RA for about three or four years. Sarah explains:

"I thought I was very healthy. I was young. I was a competitive triathlete. I believed I had a pretty good diet. So, I didn't really understand why I was experiencing so much pain in my fingers and in my feet.

I had migrating pain, and a lot of tendonitis issues all throughout my body. It took the Western doctors a long time to diagnose me. It took about three years going to different doctors before they knew what was wrong. It didn't show in my blood; I didn't have the RA factor, and my C-reactive protein (CRP) levels were normal. But it showed up on an X-ray."

Hallmark Signs of RA

One of the hallmark symptoms of rheumatoid arthritis is pain in your hands and/or feet. It tends to affect the proximal joints more so than the distal ones, i.e. the joints closest to your palm, for example, opposed to the joints further out in the fingers.

So, if you have pain there, especially if it's symmetrical (affecting the same joints on both hands or feet), then almost by definition you have rheumatoid arthritis or an RA variant. It really doesn't matter what the blood work shows.

RA is far less common than osteoarthritis, or degenerative joint disease, which is not as crippling and is a very different animal and should not be confused with it. It's actually relatively easy to treat degenerative arthritis if you understand the components of a healthy lifestyle.

Rheumatoid arthritis is a far more complex disease. It's an autoimmune disease; your body is destroying itself, and it can be terminal – some people have even been known to commit suicide from the crippling pain.

It's quite notable that only a small percentage of people with the disease have a spontaneous, sustained remission without the help of medication.⁵ Some disability occurs in 50 to 70% of people within five years after onset of the disease, and half will stop working within 10 years.⁶

RA Is Typically Treated With Toxic Drugs

Traditional care also doesn't have a lot of good hope for RA sufferers. All they do is ameliorate or treat the symptoms – typically using highly toxic drugs, including prednisone, methotrexate, and drugs that interfere with tumor necrosis factor, like Enbrel.

This is why I'm so passionate about spreading this information because as Sarah can attest, there's an alternative, and this drug-free strategy really works. You don't have to suffer needlessly in a conventional treatment model.

Once diagnosed, Sarah went to a well-known rheumatologist in Milwaukee who told her she needed to stop running or risk becoming permanently disabled. He prescribed a low-dose of methotrexate, which is actually an anticancer drug.

While it can be effective, the complications and the side effects are atrocious. Sarah had to check her liver status every month, and even though she was only on a low dosage for about three months, she started losing some of her hair. A rheumatology researcher at the Mayo Clinic whom she went to see told her to keep taking the drug, but expect it to shave 15 to 20 years off her life.

"I was really afraid of what that drug was going to do to my body," Sarah says.

"The physical therapist who recommended I get tested for RA said there was a lot I can do naturally. So I read a lot of books about rheumatoid arthritis and different alternative treatments.

I read there's a possibility of it being connected with an infection, and that a low dose of antibiotics was being prescribed. I then came across your name in a book. I looked you up, found you in Chicago, and made an appointment."

Dr. Brown's Protocol

The book she's referring to is "The Road Back: Rheumatoid Arthritis – Its Cause and Its Treatment," written by Dr. Thomas McPherson Brown and Henry Scammell. Brown was a well-respected board-certified rheumatologist (he passed away in 1989), but he, like me, was a rebel.

He didn't agree with the use of prednisone, which was the standard of care for RA in the '40s and '50s. He believed RA was an infection caused by mycoplasmas, so he used the antibiotic tetracycline instead.

Eventually, he modified his treatment to more potent discriminating forms of tetracycline, such as minocycline. Brown ultimately helped bring over 10,000 patients into remission. I first saw his work in a "20/20" special done shortly before he died in 1989, and it really inspired me. I decided to study his work, began using his protocol on

RA patients in my practice, and was really impressed with the results. Eventually I modified the protocol to the point where I abandoned antibiotics altogether.

There are a number of physicians that still use his protocol,⁷ but it would be uncommon to find ones that will be using all of what I consider the vital elements to successfully reversing RA that I list below. If you see one of these physicians, I would encourage you do integrate every one of the elements below.

So, listed below are the steps that I believe are absolutely crucial to integrate in the reversal of not only RA but all autoimmune diseases.

Optimize Your Vitamin D Levels Without Pills

Since RA is an autoimmune disease it is vital to optimize your vitamin D level. That is the most basic and least expensive strategy that one can easily implement. The early part of the 21st century brought enormous attention to the importance and value of vitamin D, particularly in the treatment of autoimmune diseases like RA.

From my perspective, it is now virtually criminal negligent malpractice to treat a person with RA and not aggressively monitor their vitamin D levels to confirm that they are in a therapeutic range of 50 to 70 ng/ml.

It is also vitally important to understand that your body was designed to get all the vitamin D it needs from the sun. I have not swallowed vitamin D in two decades, yet am able to routinely get my levels up to 90 ng/ml. So the KEY is to get about one hour of sun exposure a day around solar noon, which is 1 p.m. if you are in Daylight Saving Time, with minimal clothing on. Ideally you can walk during this time so you get your movement in.

The reason why this is so important is that getting vitamin D from the sun also provides many other benefits than vitamin D optimization, such as:

- It increases subcellular mitochondrial melatonin which will radically lower oxidative stress where you need it most: In the electron transport chain of the mitochondria.

Not only is melatonin a powerful antioxidant, but it causes your body to produce glutathione which is essential for controlling oxidative stress.

- Males will be pleased to know that a 2021 study⁸ showed that sun exposure for around 30 minutes near solar noon will increase testosterone levels.
- It will increase structured water in your body, which greatly facilitates red blood cell transport through your capillaries.
- It will increase nitric oxide to help optimize your blood pressure.
- It will help convert vitamin A (retinol) to retinoids which is required for optimal immune functioning.

Many are likely concerned about sunburn and skin cancer when considering solar skin exposure. The key is to understand that the largest factor contributing to this is excess omega-6 fat that contains linoleic acid (LA). Seed oils and processed foods need to be avoided as reviewed in another section on this page.

They are loaded with LA, which is the main reason why skin cancers like basal cell and squamous cell carcinoma occur. If you have a low LA intake you will likely not burn or get skin cancers.

Sadly, most are unable to get enough UVB from the sun in late fall to early spring unless you live below the 20th latitude. Ideally it would be far better to optimize your vitamin D by safe exposure of your skin to UVB. Even better would be to make sure that you get concurrent near infrared (IR) exposure at the same time as this will increase melatonin to suppress any free radical damage from the UVB.

Make sure to take 500 mg to 1000 mg of magnesium and 150 mcg of vitamin K2, (not K1) which are important cofactors for optimizing vitamin D function. And, remember the only way you know what your vitamin D level is, is to test it. Most people I know are shocked how low their level is when they finally get around to testing it.

Ultra-Low Seed Oil Diet

While considered an essential fat, when consumed in excessive amounts – which over 99% of people do – LA (an omega-6 polyunsaturated fat or PUFA) acts as a metabolic poison.

Most clinicians who value nutritional interventions to optimize health understand that vegetable oils, which are loaded with omega-6 PUFA, are something to be avoided. What most fail to appreciate is that even if you eliminate the vegetable oils and avoid them like the plague, you may still be missing the mark.

Chances are you're still getting too much of this dangerous fat from supposedly healthy food sources such as olive oil and chicken (which are fed LA-rich grains). Another common mistake is to simply increase the amount of omega-3 that you eat. Many are now aware that the omega-3 to omega-6 ratio is very important, and should be about equal, but simply increasing omega-3 can be a dangerous strategy.

Over the last century, thanks to fatally flawed research suggesting saturated animal fat caused heart disease, the LA in the human diet has dramatically increased, from about 2 to 3 grams a day 150 years ago, to 30 or 40 grams a day today. LA used to make up 1% to 3% of the energy in the human diet and now it makes up 15% to 20%.

It is my belief that this radical change has had the most catastrophic impact on human health in the history of the human race. This dietary change has undoubtedly killed millions, probably hundreds of millions, prematurely and still continues to do so because people, and more importantly, nearly all physicians simply don't understand this.

At a molecular level, excess LA consumption damages your metabolism and impedes your body's ability to generate energy in your mitochondria. It is also likely the primary factor for the increases in obesity, cancer, heart disease, diabetes and dementia that have exploded the past century.

There's also compelling evidence showing eliminating seed oils from your diet will dramatically reduce your risk of sunburn and skin cancer. Susceptibility to UV radiation damage is controlled by how much LA is in your diet. It's like a dial that can control how fast it happens, and how fast you get skin cancer.

You can use the tables below to help you get a handle on the amount of LA in your diet. You can also use Cronometer.com to enter the foods you eat to identify just how much LA you are eating.

Seeds/Nuts	% Linoleic Acid
Poppy seed	62%
Hemp	57%
Wheat germ	55%
Walnut	53%
Pecan	50%
Pumpkin	45%
Brazil nuts	43%
Sesame	41%
Peanut	32%
Pine Nuts	33%
Chia	16%
Almond	16%
Flaxseed	14%
Pistachio	13%
Hazelnuts	12%
Cashew	8%
Macadamia	2%

Cooking Oils	% Linoleic Acid (LA)
	Average Value (Range in Parentheses)
Safflower	70%
Grape seed	70%
Sunflower	68%
Corn	54%
Cottonseed	52%
Soybean	51%
Rice bran	33%
Peanut	32%
Canola	19%
Olive oil	10% (3% - 27%)
Avocado	10%
Lard	10%
Palm oil	10%
Tallow (CAFO)	3%
Ghee (CAFO)	2%
Coconut oil	2%
Tallow (Grass Fed)	1%
Ghee (Grass Fed)	1%

Time Restricted Eating (TRE) and Circadian Rhythm Optimization

In July of 2022 we learned that fewer than 1 in 14 adults in the U.S. have optimal cardiometabolic health.⁹ This means they lack the ability to seamlessly shift between burning fat and carbs as their primary fuel source and as a result have impaired immune function.

It would seem profoundly obvious that having an immune system would not be good if you had an autoimmune disease. Fortunately, there is a simple inexpensive intervention that can help most everyone with this issue and it is called TRE.

Research by [Satchidananda Panda, Ph.D.](#), suggests 90% of people eat for more than 12 hours a day, and over time this habit will wreak havoc on your metabolism and limit your ability to metabolize fat as a primary fuel. When you eat throughout the day and never skip a meal your body adapts to burning sugar as your primary fuel, resulting in the downregulation of enzymes that utilize and burn stored fat.^{10,11}

As a result, you become progressively more insulin resistant and start gaining weight. Efforts to lose weight also become ineffective for this very reason, since to lose body fat, your body must first be able to actually burn fat. Many biological repair and rejuvenation processes also take place while you're fasting, and this is another reason why all-day grazing triggers diseases while fasting prevents them.

Time-restricted eating is just what it sounds like. It's a form of intermittent fasting where you eat all of your meals for the day within a restricted window of time, ranging from six to eight hours. That means you're avoiding food (fasting) for 16 to 18 consecutive hours. Eating within a six to eight-hour window is likely close to metabolically ideal for most. Eighteen-hour TRE windows work better for overweight people and 16-hour TRE windows are used for normal weight individuals.

The key is to make sure you don't start your TRE window too late in the day. Ideally the last food you eat should be at least three to five hours before you go to sleep. The last thing you want to do is eat right before bed as that will impair your health.

Contrary to longer fasts and calorie restriction, TRE is a strategy that can work for just about anyone. Remember, you're not actually limiting or counting calories. Weakness and lethargy, which are signs of undernourishment, simply don't occur. It's a practice that should make you feel fantastic and actually reduce your hunger over time. Wouldn't it be great to not be controlled by hunger and sweets anymore?

Circadian Optimization

Satchin Panda is one of the leading researchers in circadian rhythm and [I interviewed him about his book](#), "Circadian Code: Lose Weight, Supercharge Your Energy, and Transform Your Health From Morning to Midnight." He has many great tips in his book on how to optimize your circadian cycle. This is important as it supports a healthy immune system.

If you think about the times you got sick in the past my guess is that many of those times were related to altered or impaired sleeping schedules. This is a classic illustration of how important this strategy is. Here are some tips to optimize your circadian rhythm:

- Be sure your sleep timing is close to the natural day and night cycles. The closer you are to the equator or vernal or autumnal equinox the easier that is, as the day and night time is evenly divided between them at 12 hours each. The further you move away the worse the change is all the way to the polar extremes of 24 hours of night in the winter to 24 hours of light in the summer.
- Ideally you should not have any blue light after sundown. Unfortunately, the invention of the electric light bulbs has trashed our circadian cycles. The ideal light would be a candle as it has the right wavelengths and intensity.

Alternatively, a 3-watt non-flicker red LED light¹² is acceptable and will not likely impair your circadian cycle. You should also make certain that there is no light in your bedroom while you are sleeping; use a sleep mask, if necessary, to get into complete darkness.

- EMF exposure, especially in the night, can disrupt your cycle and your health. It is ideal if you turn off both your Wi-Fi and phone at night, or at least keep it in airplane mode. The last thing you need at night is exposure to these fields, as it will impair your health.

Low-Dose Naltrexone (LDN)

One new addition to the protocol is [low-dose naltrexone \(LDN\)](#), which I would encourage anyone with RA to try. It is inexpensive and nontoxic and I have a number of physician reports documenting incredible efficacy in getting people off of all their dangerous arthritis meds. Although this is a drug, and strictly speaking not a natural therapy, it has provided important relief and is FAR safer than the toxic drugs that are typically used by nearly all rheumatologists.

Naltrexone is similar to Naloxone (Narcan), which is a narcotic antagonist to save people's lives in opioid overdoses. In low or even microdoses it is one of the few pharmaceutical drugs I wholeheartedly endorse and it is remarkably safe.

Naltrexone blocks the opioid receptor only briefly, and by a different mechanism. When used in low dosages as LDN, the chief benefit is actually in the rebound effect, after the opioid receptor has been briefly blocked. Naltrexone is one of the few interventions that actually enables your own body and immune system to be able to function better and restore function.

Naltrexone is a drug and requires a prescription from a doctor willing to work with you. Dosing guidelines can be found at ldnresearchtrust.org/2022_LDN_Guides. I also did an [interview with Linda Elsegood](#), a Briton who founded the LDN Research Trust in 2004, and Dr. Sarah Zielsdorf, who has a medical practice in the Chicago about the book they wrote.¹³

Carnivore Diet

I would strongly recommend implementing every one of the above strategies. If you are still not getting the improvement you need and deserve, then it may be time to consider removing all vegetables from your diet.

In the video above, Mikhaila Peterson, the daughter of best-selling author Jordan Peterson, discusses how she resolved her juvenile rheumatoid arthritis (JRA), which is

relatively uncommon, but notoriously challenging to improve. Her results are nothing less than spectacular and certainly provide enough anecdotal confirmation to give this unconventional but safe approach a try.

For the scientific justification and help in implementing a carnivore diet, one of the best resources out there is Paul Saladino, who wrote the book, "The Carnivore Code: Unlocking the Secrets to Optimal Health by Returning to Our Ancestral Diet," and also has a podcast on YouTube called "CarnivoreMD."

The reason why avoiding plants might provide relief with autoimmune diseases is that they are loaded with self-defense chemicals and antinutrients such as the following:

Nightshades – The solanaceae family of flowering plants includes a number of species that are outright poisonous. But the nightshade family also includes tomatoes, potatoes, peppers, eggplant and goji berries, which are well-known to promote inflammation and joint pain in some people.

Phytic acid – A natural substance found in plant seeds (including grains and legumes), this compound is known as an "antinutrient" for its ability to bind to minerals. Phytic acid impairs the absorption of iron, zinc, calcium and other minerals and can promote mineral deficiencies.

Oxalates – Compounds found in dark leafy greens, such as spinach, kale and other "superfoods." Most people can break down oxalates in the gut. For others, however, these compounds turn into sharp crystals and can lead to chronic pain, inflammation, oxidative stress, kidney stones and autoimmune disease.

Lectins – These plant compounds can promote leaky gut, alter the microbiome, stimulate the immune system and trigger inflammation. The highest levels are found in whole grains, legumes and dairy.

Salicylates – These are naturally-occurring pesticides that plants use to protect against insects, fungus and bacterial infection. In humans, they can cause a wide

range of symptoms from tinnitus to ulcers. High concentrations are found in avocados, berries, grapes, almonds, honey, dried fruits and many spices.

FODMAPs – Though not technically a defense mechanism of plants, these compounds are a collection of short-chain carbohydrates that are not properly absorbed in the gut. FODMAPs can cause severe digestive distress for some people. High-FODMAP foods include a wide range of fruits, vegetables, cereal grains, condiments, drinks and dairy foods.

Saponins – Antifeedant compounds that protect many plants from predation by insects, microbes and fungi, saponins have soapy, foaming characteristics. They promote leaky gut and can cause bloating, gas, nausea and diarrhea. Legumes (soy, beans, peas and lentils) as well as quinoa are rich in saponins.

Goitrogens – These compounds can reduce iodine uptake in the thyroid gland and slow the production of thyroid hormones. The result can be an enlarged thyroid (goiter) and a host of metabolic disturbances. The most common plant goitrogens are compounds known as glucosinolates found in broccoli, cauliflower, Brussels sprouts, cabbage, kale, arugula, radishes, turnips, collard greens, bok choy and other similar vegetables.

Phytoestrogens – These naturally-occurring plant chemicals have a molecular structure quite similar to estrogen. Used as a natural defense against herbivores, they can disrupt animal fertility. In humans, phytoestrogens can cause hormonal dysfunction and may promote cancer. These compounds are most common in soybeans, flax and sesame seeds.

Prolamins and glutelins – Consisting of a wide range of proteins used by plants to store energy in seeds and found primarily in grains and rice, this group of compounds harbors the primary environmental factors in causing Celiac disease.

Early Emotional Traumas Are Pervasive in Autoimmune Diseases

With the vast majority of the patients I treated, some type of emotional trauma occurred early in their life, before the age that their conscious mind was formed, which is typically around the age 5 or 6. However, a trauma can occur at any age, and has a profoundly negative impact.

If that specific emotional insult is not addressed with an effective treatment modality, then the underlying emotional trigger will continue to fester, allowing the destructive process to proceed, which can predispose you to severe autoimmune diseases like RA later in life.

In some cases, RA appears to be caused by an infection, and it is my experience that this infection is usually acquired when you have a stressful event that causes a disruption in your bioelectrical circuits, which then impairs your immune system.

This early emotional trauma predisposes you to developing the initial infection, and also contributes to your relative inability to effectively defeat the infection. Therefore, it's very important to have an effective tool to address these underlying emotional traumas. In my practice, the most common form of treatment is called the Emotional Freedom Technique (EFT).

Although EFT is something that you can learn to do yourself in the comfort of your own home, it is important to consult a well-trained professional to obtain the skills necessary to promote proper healing using this amazing tool. There are, of course, many other strategies other than EFT that can address these; EFT is just the one that I have the most experience with.

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