Introduction and Margaretu2019s Background

welcome, Doctor Margaret Christiansen. I'm so glad to have you today. No. Everyone, Margaret and I have known each other for many, many years. Margaret is a institute for functional medicine faculty, and she's one of the faculty that welcomed me into the Institute for Functional Medicine.

Margaret's been teaching for, 12 years. She has her own amazing health journey, because she encountered, serious mold issues which impacted her health and her family's health.

Which, led a new focus. From hormones to hormones and, bio toxin illness. So, welcome, Margaret. Is there anything that I left out on that intro that you'd like to add?

No, no, that's all good. I mean, I mean, I think that the number one challenge, an issue with both men and women and hormonal issues and, that are happening is, is environmental toxicity.

And, if if we don't understand that we are being poisoned, by, by so many of the different, factors in our environment and our government, is completely, blind, not interested and co-opted by all of the forces that are keeping us sick.

I think that's just something really, really important to to know. You know, one of the things that I think would be really helpful for our audience to hear, is a brief story of one of your recovery, patients who who had, you know, serious disability.

It was able to get things reversed. As they learned to address their, toxin issue. Sure. Okay. Well, we can just talk about a, you know, a 40 year old professional who had to, who had such severe chronic fatigue and fibromyalgia, who had to quit their, quit their job because they couldn't keep going.

Environmental Toxins and a Recovery Story

Brain fog was so bad. Having a hard time taking care of her kids. You know, certainly couldn't work at the same time. Had to, you know, it took 30 minutes just to take a shower because you had to think about it, you know, the next right step.

So, you know, and who went to, you know, all the conventional, docs, and was told, oh, honey, you're just depressed. You're just stressed. You're, you know, you're over 40 now.

You're, you know, kind of early perimenopause. So here's a man I depressed and go see a a pain medicine specialist and get some physical therapy and, and, that, you know, and then it was left high and dry.

And then, you know, when we, you know, figured out that, and did, you know, appropriate testing, we got all the hormones and looking for environmental toxicity.

She happened to have very high levels of mold, mycotoxins. And, when you start learning about those and, and the many other environmental bio toxins. And I'm going to include the spike protein in that, no matter where that it's from, because that's where we're, we're seeing devastating fallout from, from a hormonal standpoint.

But, you know, when we understood, okay, you have massive nutrient deficiencies, you have some genetics involved with poor detoxification pathways, and you've had multiple exposures over time, different types of fat soluble toxins.

And and the mycotoxins just happened to throw you over the, you know, it completely over the edge. But, you

know, when that started, we just started doing detoxing protocols, starting with, absolutely.

Diets, you know, an anti-inflammatory diet, which certainly all your listeners know about, organic, and why that's so important. Really, loading up on electrolytes and fluids and minerals to, to get the nervous system back on line, improving the quality of sleep.

She learned how to turn off the news to stop watching all this crap that's on television. Brought to you by Pfizer. And, and then, we really worked on a lot of lifestyle, issues, supporting, mental health and well-being.

And stress mechanisms and, you know, and now she's quite successful. You know, back working and, has now gone on to become a grandmother and, and. Yeah, so, so I'm curious, how long did this journey take for this woman? So had, lots of, Yeah, this one was probably, it took eight years to find out what it was that was going on with her. So.

But once when she's once she turned it around within within a year, things were were way better and. Yeah. So, so I think that's really important for someone who's listening.

It may take a long time to find someone who can investigate thoroughly understand these, environmental factors that are contributing to why you became so ill.

Right. And then to help guide and support, your body ability to repair. Yeah. So, no, your, original training is in Ob-Gyn. Yeah. Joanne. Yeah. So, there's probably a connection between hormones and what you're doing now. Yes.

Oh. Do you want to comment on that? Yeah, sure. So, I mean, I think, I think, you know, something critical to understand is that we have what's called the HPA axis.

I'm sure you've had other people talk about the hypothalamic pituitary adrenal axis. So that is our brain telling our bodies, hey, ovulate or not, have a period or not wake or sleep or not time to eat or not.

You know, I'm not interested in sex or not. All of that is connected. And, when we were trained, it was just the HPA axis. But now we understand, it's it's everything the the hypothalamus, pituitary and adrenals are totally tied to the gastrointestinal tract.

That's where all of our hormones are really metabolized and balanced in our in our lives, in the gut. So you got to clean all that up. And, our immune system is so, so completely tied into hormones.

And, and again, our gut function. So, I mean, and that is what you have taught, you know, folks, from a neurological standpoint, and, you know, we need but 80, 80 to 90% of the neurotransmitters are produced in our gastrointestinal tract.

Hormones, the HPA Axis, and Gut Health

And that is where our hormones are balanced. So, so we have to understand how our hormones being produced in our body, what are the raw materials, including cholesterol.

So get off the damn statins. I mean, I tell you what, you know, and I don't mind being very colorful. Yeah, well, you know, and explicit about, I mean, the lies, the lies, the lies, the lies that we have been told.

And we cannot trust any of our big name medical journals anymore. Particularly not because what happened in the last four years and, Yeah. So, I mean, all the hormones are interconnected.

So your insulin is connected to your thyroid is connected, your adrenaline is connected to your cortisol, it's connected to your estrogen, progesterone, testosterone, and then your neurotransmitters are in there too.

So, you when, when really trying to figure out if you have infertility issues, if you have Ms.. Because estradiol is

actually a hormone that can be very helpful for that, as can progesterone, if you have for a moment let's let's talk about that's trio.

Yeah, sure. What why is estrogen all, good for all of us with them as well, y'all. So there's there's three major estrogens in the body. Astron, estradiol and astral.

And estrogen is is probably the more toxic the most if you're going to call estrogens toxic. Although I have I have a lot of issues with that. And then estradiol is the one that we think about commonly.

That's what causes our periods, grows breasts and all that. But S3 is the one that we make in very highest amounts during pregnancy. And S3 all is one of the things that helps the vagina get very stretchy.

So you can get a bowling ball through there. And, it also has a lot of, effects on the brain that are nourishing to the brain. It helps make new neural connections.

It's calming, but it does not have the same growing effects as estradiol. So as we all can be very useful. And when I'm prescribing, hormones, I use a combination of estradiol with or biased, topically.

So it has a lot of benefits for the brain. And, and, certainly we know that women during pregnancy who have minutes, they tend they tend to get better.

They have high levels of oil as well as high levels of natural progesterone. And yeah. So did that answer your question? That that is really good. So still and there's some, really interesting studies that have used S3 all in the same miss that with favorable outcomes.

Yeah. And so, I know practitioners are using astral topically. They're using a, sublingual. I, I don't think anyone takes it in a tablet form. You want to comment?

Yeah. Yeah. You want it when taking estrogens? You know, from my standpoint in the education that I've, you know, that I've learned about and given, with estrogens, we don't we want to use it topically, rather than orally, because when you use anything orally, it's going to go through your liver first and you only get about 25% of what you're taking orally because it's it's metabolized in the liver.

But that's where it can cause all the problems and increase rates of clots and, you know, blood clotting and that kind of stuff. So so my preference is usually always to use, estrogens topically, whether you use a patch or you get a compound, a cream.

Some people use the trophies that I've, which is the little, sublingual things, which does go into the bloodstream, but you're also swallowing some of that.

So you have to be mindful of that. Okay. Okay. And then you mentioned progesterone. Let's talk about why would you Astron might be useful. So progesterone is it is such an under an under educated on hormone, for for most of us so natural progesterone we, we produce in the second half of our menstrual cycles when we've ovulated.

So in the first half of our cycle, our, our egg is growing and we're pretty where we're, we're producing estrogen and that's what grows the lining of the uterus.

And then in this and then you ovulate and after ovulation you start producing that. Excuse me, natural progesterone and natural progesterone has all kinds of beneficial effects, not just on the uterus.

It helps to stabilize the lining of the uterus and, you know, prepare it for a baby to be there.

Estrogen and Progesterone Basics

But it also has, wonderful effects on the bones, on the on the breasts, on the heart, on the brain. It's very calming

and helps with sleep. And progesterone is what goes out the window when you're under high stress.

So, you know, women may notice that, they are their, their menstrual cycles get a lot shorter if they're, if they're, under a lot of stress and they'll have, you know, much heavier bleeding.

Well, part of the reason is they're not making natural progesterone. The stress hormones are signaling. Turn off the enzymes that make it to give you enough natural progesterone.

So, and progesterone is incredibly important for fertility. And we know it's been used in, actually traumatic brain injuries, right after traumatic brain injuries to, to help, kind of heal and seal the brain.

I use it all the time, particularly I now progesterone is one that I give orally. I'll give it topically. But if I have somebody who's having challenges sleeping, oral progesterone can be very helpful.

It's very calming. On the on the, on the brain, in the nervous system. And, unfortunately, the more stress we're under, the less we produce after four.

Do we produce less anyway? And then if you are in synthetic hormones or, birth control pills or whatever, and especially these ones I hate, there's these continuous ones where you go for three months without having a period.

You produce no natural progesterone. And the other thing we need natural progesterone for is our thyroid gland. It helps to, to to take T4, which is thyroid hormone that our thyroid gland makes and turn it into the active form called T3.

That's, that's what actually tells your mitochondria to produce energy. And so you need progesterone around for that. So if you've been on synthetic hormones forever and ever, you're having no periods or, you've been under such sci, you know, high stress all the time, then your progesterone levels are going to be low.

And, and it's very protective for breast cancer. We know that natural progesterone, not progestin, that's what's found in birth control pills. Fake progesterone.

It's it's it's a fake molecule. But, that is, natural. Progesterone is very important. And we use a lot in fertility clients and, as well, like I said, for sleep, we used it for men. You can put it.

You put on men's testicles, it improves their testosterone levels, helps them with sleep as well, and helps with the brain injuries. And so and so you can take progesterone by mouth.

You could take it in the evening. And, super helpful. Is anyone using this topically? Oh, yeah. Yeah. No. So progesterone can be used topically as well.

And, Yeah. And so in fact, it's available over the counter, topically. And, and so that's usually what I pay, you know, for if I have anybody who's on regular pills, they are also on topical natural progesterone in the second half of their cycle, along with, really high quality methylated b-complex, and some multivitamin with minerals.

So I'm thinking of the, women who are on contraception, because they are taking a highly effective DMT. So they've been caution to use a, oral contraception or some type of contraception. Right, right, right.

Do you have suggest, comments for them in terms of. Yeah, again, I would, I would do the same thing. I would get yourself I would put yourself on some natural progesterone in the second half of your cycle, you know.

So like day 14 to 28, to use, you know, 15 to 25mg of topical, progesterone and then, you know, also, if you're under a lot of stress, and all that, you may want to add some pregnant along with it, and, or, some topical, some DHEA, which you can also take.

And these are, over-the-counter, bags that people can get, and of course, we're not giving medical advice. We

want you to be sure to discuss this with your discuss with your health care practitioner.

One person may not know enough about natural progesterone. Yeah. Yes. Or find your, friendly functional medicine practitioner who can there. You can support these conversations.

That's right. So we've been talking about the the dance of insulin, all the sex hormones, neurotransmitters, and I guess thyroid hormones, and they're all, deeply interconnected.

And it sounds like stress would make all of them but get dysregulated, right? Right. And, you know, and yeah, the reality is that we all have stress. I mean, and, you know, God knows in the last four years, too, I mean, it's been, you know, a global, problem of frightening.

So the question is how do you respond? How how does your brain respond to stress? What did you grow up with? What were you taught? How are you? And the the fabulous news is, and this is all your work as well as neuroplasticity, is that we can learn to help, to change how we respond to things so that, so that when the inevitable stressors come along, whether it's work or children or, you know, relationships, global warming, the wars around the world, whatever.

What how are you responding? And, and this is where a lot of brain retraining can come in. And anything such as, you know, tapping meditation, yoga breathwork, all those things to.

We have to get ourselves and our mindset into a place of stop reacting to every little thing. And, you know, again, there's fortunately there's a lot of there's a lot of tools out there for that.

And I'm sure that's, you know, part of your, the programs for, for helping people. Because when you get a big diagnosis like Ms., you know, you're immediately go into fear mode.

So, yeah, how do we how do we, you know, bring that back. And, you know, for people of faith to tapping into that can be, you know, immensely helpful, to, you know, figure out what is the meaning and purpose behind, you know, my suffering.

And, and, you know, I, you know, I can just tell you that my own, my own journey and that of my children, I'm who are now adults and, two of my four, you know, severely special needs, I've had to tap into many, many, many, many different resources to help me.

You know. Absolutely. We we all are going to experience loss and trauma. And unless we have a premature death ourselves.

Stress, Trauma, and Brain Retraining

Right. Otherwise, the reality of living is we're going to lose stuff that really matters to us. And, how we figure out how to manage that. You know, I know that you've had some, major losses that you've had to work through.

Margaret, could you come at what what you've done to, work through those losses? Sure. Well, number one, I think if you are a person who is in the healing professions at any way, shape or form, and you're really doing your job and you're listening, then we are hearing ourselves many, many stories of distress and trauma and all that.

So I think having a really good therapist is really helpful. So I have a trauma therapist that I've worked with for many, many years. So that's one, you know, the second thing I would say, I've been involved in 12 step programs for 23 years, and so I've used the 12 steps as a 12, 12 step, to the 12 step.

So that would be that would be it's found an AA or Al-Anon. So Al-Anon is for friends and families of, you know, alcoholism and codependency basically.

So so those are tools. And those are been an amazing, incredible tools to get through one day at a time. And so I

would, you know, totally promote that there's many different forms of 12 step, you know, 12 steps around.

And then I have a daily meditation practice. I move my body every day. I, I turn off all electronics at 8:00. I try and go to bed by nine, I, go to the gym or for a walk, you know, five out of seven days.

You know, so it's it's multifactorial. I've been in support groups, I've, you know, I've been in community. And then what I've done is I've learned, and this is Victor Frankl's work, Man's Search for meaning, you know, how do we take our suffering and and find meaning and purpose and what what we've done?

This has been wonderful, Margaret. And I love, Viktor Frankl. He's been, a source of immense comfort to me as I've gone through my own personal experiences with, loss and suffering.

And, again, thank you, everyone, for joining us today. And I hope you found our conversation insightful, engaging. And if you're a summit purchaser, stay right here because we will dive even deeper.

And if you're not, click on the button below or to the side to get access, of a world of information, get ready to reclaim your health. Now, if you're watching this, thank you for being a valuable member of our community.

Let's dive in. So, you know, we talked a little bit about, hormones. Could you talk a little bit more about how hormones actually work to impact how our cells do the biology of life?

Sure. Well, I mean, hormones are signaling molecules. So they are, you know, we have, we have many, many different kinds, and they signal the different cells in our body, to do different things to space.

And then on their produced in one area of the body, and for example, we'll just start with the hypothalamus. That's the master regulatory signal. And it sends a signal down to the pituitary gland to say, hey, I think it's time to eat or I think it's time to reproduce, or I think it's time to sleep and, and then the pituitary gland says, okay, okay, which, which area of the body do I need to signal?

Okay. Well, I'll send a message to the adrenal glands to kind of turn down, slow down. If we're going to go to sleep here. And hey, maybe I'll send the, the ovaries, a little, a little push for a little testes and testosterone production here and, and the adrenals.

And maybe we can be interested in having some sex and so on the, on the, on the various different organ reset on various different organs in the body.

There are receptors for the hormones. So you have receptors for estrogen, for testosterone, for progesterone, for neurotransmitters, for insulin, for, you know, thyroid.

And and so it will it'll tell whatever part of that body is what it's time to do. You know, if it's, you know, if you're in puberty and you're a woman and, and we're going to grow some of that estrogen is going to tell you to grow some breasts if, if you are trying to have a baby, then it's going to tell the lining of the uterus to, to to get the egg.

So the basically they're, they're communication or messenger molecules and they have receptors that then that then you know, dock on to the cell whatever, wherever the cell that is in the body.

And then it gets translated, it goes to the nucleus of the cell and makes the protein or makes whatever thing it needs to do in order to accomplish the task that it's been given.

So it's a very simple explanation that's a bit, I think, very understandable. Now, when we began, we talked about, some of the toxins that can interfere with hormone function.

What what are some of the toxins, the common toxins that, we may be encountering and maybe some that, we should all be on the line. Well, I think that the the number one, the number one thing that has historically is probably pesticides.

And, you know, I'm particularly talking about atrazine and glyphosate. Glyphosate is also known as roundup. Atrazine, I think you know a lot about as well.

And I've been in the corn fields, and these are hormone disrupting chemicals that are neurologically disrupting chemicals. They're fat soluble. They stay in your body.

Like I said, it's actually water soluble, but most of them stay in the body for a long time. And if you have any understanding of, neonatal development, you understand that very teeny tiny, homeopathic amounts of hormones are necessary to switch on.

Like, what sex are you going to be? Or you know how the baby's going to develop. So, hope that answer your question. Yeah. So, and everyone is listening.

You should know that in Iowa, 80% of the private wells, contaminated with atrazine. Yeah, yeah. So, it's it's very, very common. Right. And so we've got the pesticides you mentioned, mold, toxic mold and would just say genetically modified foods.

So GMOs because, again, the genetically modified foods are, are grown and corn is the biggest one. Are grown to tolerate being doused with atrazine, a roundup or whatever it is, and not die everything, or else all the weeds die.

But the food keeps growing and it's now covered in, roundup or, you know, glyphosate or atrazine or whatever it is. And then it's turned into food and we're consuming that.

And that's basically 95% of now of our food supply. And, this is why we are seeing such amazing drops in fertility. So I would say that, you know, so, pesticides and, and, you know, petrochemicals in general, all the gasoline byproducts, all the plastics and the microplastics.

I just talked to Doctor Lynn Patrick, who told me that we're all consuming a credit card size of microplastics every week. So those all have hormone disrupting, you know, challenges.

Mycotoxins is a very common one, that come from mold and mycotoxins. Look and can act like different hormones in the body, as can these petroleum products and plastics.

So that and spike protein.

Toxins, Testing, and Detox Support

I would have to say that right now, the biggest, most damaging problems that we are seeing are coming from this, you know, manmade, spike protein that is causing devastating autoimmunity, including we're seeing, you know, we've seen an 18% on the vast data shows 800% increase in all autoimmunity, since the rollout of the mRNA injection.

And, there's some for if you're not aware of this, a 900% increase in reports of Ms.. So, when if people are concerned that they're having, toxin exposures that are interfering with their hormone balance.

I think there are some obvious things that you want to suggest, avoiding GMOs. Right? Going organic. What else could we be doing again? Water. Turning off your Wi-Fi, particularly at night, decreasing your level of exposure to emfs.

Like I said, I think turning off, turning off the news and mainstream media legacy, you know, because we are being fed such lies. So those those are things that I, that I, I, you know, highly recommend.

I mean, and then I think, you know, again, having your hormones assessed and when you're, when we're looking at it, we're looking at a complete thyroid panel that looks at looks at not just one, three, two, three three T4 reverse T3 powered antibodies.

Those are critical having adrenal stress index done. Look and see where your adrenal glands are. What's an adrenal stress index. So an adrenal stress index is is a is a test. It's usually a combination of, urine and saliva, but it can be done in different ways.

That is measuring your cortisol output, your major stress hormone throughout the day. And then we can also, so that's basically looking at your stress response.

Do you, are you making high cortisol throughout the day. So you're still in a very high response or your, your cortisol bouncing up and down throughout the day.

Or are you now flatline because you've gone on such stress for so long that you're not even having a normal response? So I think, you know, in terms of where we start, it starts with the adrenaline and cortisol piece and then optimizing thyroid with with again, diet and with nutrients.

Iodine is, is critical. And this idea that we're not supposed to give iodine to people if they have Hashimoto's is B. S., just, talk to Doctor David Brownstein, and we're all very iodine deficient, so I don and other minerals.

I think are critical, and are simple things that we can do and then whatever we can do to sleep and poop. So those are, those are the, those probably are the top things that I would just start with.

And then yeah. And then, you know, what do you do to last? I love, but what makes you laugh, what makes you laugh and making sure that you are laughing every single day?

I don't care what's going on. I don't care how bad things are. Find something to laugh at, you know, and actually, I have people do, forced laughter, set their timer.

So, you know, start with 30s. That'll feel like a really long time. Do you? Ha ha ha ha. Oh oh. And, then then, you know, we we try to go for a couple of minutes, forced laughter and that, leads to measurable changes in our cytokine levels. So, this is really, wonderful advice.

Now, you there's there's there's also simple somatic therapies you can do. There's something that's called, you can go to havering.org, havering.org and just, just learning how to do some self-soothing yourself.

So this is completely free. We have the greatest amount of, oxytocin receptors and dopamine on our, on our palms or forearms. Our shoulders, our cheeks and forehead.

And you know, why is that? Well, I'm mom is bundling up her baby, and she's smooching all over it, right? And she's kissing the forehead and this and all that.

So, so we can do this to ourselves, and you can go to haven.org and look it up. All the science and all that and just teachers. That's super simple. That's just really super simple.

And then watch some comedy. If you're going to turn on the television and put it on comedy. Charlie Chaplin, you know, had some great, slapstick humor.

So I want to, summarize this. So you're telling me that, a really powerful technique is to take my hands, gently massage my face, my forearms, my shoulders, probably the back of my head, the back of my neck, and, I could do that myself.

I could have my my children, my spouse do that, and that, you think would lead to a probably a reduction in the, calming of the innate immune system. Yeah. Yeah, I prefer yeah, yeah.

And it just calms down. Lots of different. Well, it helps you again. Just making is you're making more oxytocin, which is very and, again, very calming in the system and, and pleasurable.

And there's a lot of, you know, we do a lot of folks do a lot of brain retraining, in limbic system retraining, primal trust is one of them. I like that one because, it's very, well, trauma informed.

There's Annie Hopper's Diana Ross, there's Gupta amygdala retraining. There's other thing. So, okay, this this is all a little bit too fast. I can't take notes.

So that limbic retraining, you can do this again. Yeah. So primal trust is is, One of them, doctor Kathleen King, she's amazing. That's hers. Annie Hopper has a dynamic neural retraining system, or Diana Ross.

Gupta has Gupta amygdala retraining, I think. So it's called a Gupta program now. So these are all different ways that we can engage, learn how to engage our prefrontal cortex, our thinking, rational part of our brain and our community, you know, and our relational peace and our brain.

Learn how to gauge this and get out of our limbic brain, which is sort of your, reptilian, lower brain that kind of runs the show and it's running the show, you know, 99% of the time, unless until you recognize that.

And that's part of, how we that is a huge piece of how I get people out of chronic fight or flight. Now, I want to touch back on one more thing before we sign off.

You had mentioned iodine and other minerals. So, I know a lot of people are very afraid of iodine.

Minerals, Iodine, and Closing Advice

They don't want to give more than, you know, 150 micrograms, because of, thyroid concern. So, more all I would say about that is, is y'all get, get, get Doctor David Brown Stein's book on iodine, why you need it and his thyroid book, because there is so much massive misconceptions out there about iodine.

You know, I'll start people just on, on, on low dose, like, you know, a very low dose liquid, like, you know, starting medical programs. But I get a montauk point.

I think it's 12.5, micrograms. Yeah. Milligram. Yeah. I don't know, whatever I had on tablets, we have, yeah. And it's amazing. When I started doing that, I got I got off my thyroid meds.

Yeah. And I actually motos. So iodine can be very helpful. But you mentioned that there are other minerals, so I'm will put you on the spot. What are some of the other minerals.

Well I mean I've, you know, I just, I, we use liquid minerals, combination. So it's got, you know, magnesium, manganese, molybdenum, a little bit, you know, tiny bits of copper, you know, ideally.

Yeah. I'm sorry. Chromium. Yeah. Chromium. Yeah. Chromium. Zinc. Yeah. These, zinc, I think is critically important, especially with everybody who's got insulin resistance.

And and I think so, so many of us are mineral depleted in, a whole bunch of minerals. And what you may not know is minerals are co-factors for many of our biochemical processes.

Right. For many of our vitamins, for many of our enzymes. And if you don't have the minerals, that reaction isn't going to happen. Absolutely. You know, and it's it's such a it's it's, it's so, so important.

And, and I mean, this is one of the things that I learned from about some membrane health. And Patricia Kane, it was, was not only do we need lots and lots of good fats, and a calling for a healthy some membranes, but you've got to have the electrolytes and minerals at the same time because of exactly what you said.

They're involved in so many as cofactors and so many different enzymes in the body, but also in communication and neurons. You have to have adequate electrolytes, and minerals in order for, for our neurons to be talking to each other.

So if nothing else to start, you know, really try to hydrate. I mean, you can get Celtic Sea salt. That's got a little bit of minerals in it. I mean that's that's one of the inexpensive ways to do it.

Doesn't have iodine in it. And but yeah, I take a nice I, I take a mineral complex every day. So I like, sea salt, like, cookie with seaweed. And, do you eat seaweed?

For all these trace minerals? Well, Margaret, this has really been wonderful. I always loved catching up. You have, so many wonderful insights, and your own personal wisdom.

So. Thanks. Thank you so very much. Thanks, Terry.