Ep 559: Why Health Creation is a Life Long Skill with Mel Hopper Koppelman Transcript

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Introduction to chronic illness recovery

Hey, Health Winkies! On this episode of the Health Fix Podcast, I'm interviewing Mel Hopper-Kopelman, and she is a master in terms of helping folks with chronic illness recover.

Now, let's face it, we are in a state of skyrocketing of chronic illnesses. And patients can spend thousands of dollars on supplements without getting better.

And this is where Mel comes in. She is working on not chasing biochemistry, but really helping people understand the fundamental laws of healing and repair.

Her mission is to help transform how we approach chronic illness and really bridge the gap between ancient wisdom and modern neuroscience. Now, she and I dive in, deep in this podcast talking about some of the limitations we have as functional medicine providers, naturopathic medicine, providers and conventional medicine and providers.

And we talk about the wisdom of Chinese medicine which I absolutely love and why we need to really start to think about how our development neurologically as we get older and as even form in our moms has a lot to do with what happens in terms of health as we get older.

Now, it's no secret, a lot of people are talking about trauma being stuck in the body, how trauma impacts health, and how adverse childhood events impact health.

And yes, this is kind of where Mal is diving in, but she's also bridging that gap of how this mixes in to ancient wisdom, much as what's going on in Chinese medicine.

Mel is the program director at Synthesis Health Lab. It's the go-to place for folks who've tried everything and just are looking for something to help them heal.

They've hit dead ends with copious supplements. They've try all the lab testing. they've spent a ton of money and they're still just wondering what the heck do I do at this point?

How do i get my life back? Mel has two master's degrees in 15 years of clinical experience and she's combining that, like I said, with Chinese medicine and neuroscience and developmental nervous system science to create her methods to help people to overcome chronic fatigue, autoimmune conditions, fibromyalgia, and more.

So she has guided folks all over the world with her five-step process and really has some fascinating stuff to report. And so in this podcast, we're going to dive deep about what she's doing, how this connection between immune system and nervous system, and neurodevelopment all kind of are in play here as to how or why I guess we could say some folks will develop chronic illnesses and why others do not.

So fascinating podcast here. I hope you guys enjoy it. Let's introduce you to Mel Hopper Kuhlman. Welcome to the health fix podcast where health junkies get their weekly fix of tips, tools and techniques to have limitless energy, sharp minds and fit physiques for life.

Hello, Mel. Welcome the Health Fix podcast. Thanks for having me. I'm excited to be here. My goodness, when just our couple minutes of chatting and just looking through all of my research I did for this podcast to chat with you, I was like, wow, okay, we, We definitely have some similarities in terms of practices working on folks who are just long term illness, been a multiple doctors, not finding answers.

and just helping to shed some hope out there. And the big thing that you had mentioned just a couple seconds ago, and I had to quote it because it's just too good, is health creation as a lifelong skill.

So folks, I want you to be thinking about this, because I think a lot of people, correct me if I'm wrong, a lotta people feel like they fix something, they're gonna go to a healthcare provider, their gonna fix it, there done, the never have to deal with it again, And life is just gonna on in pure bliss for the rest of the days.

Help me explain how health creation is a little bit more than just the set it and forget it kind of situation. And I know that's a huge loaded question, but give us like your foray into diving into coming up with that particular statement.

Sure. Well, I actually kind came up just now, But the idea is along, you know, a faithful one. So it's helpful frame for a variety of reasons. For many people, depending on where they are in their health journey, then they may have a specific symptom or they have gotten as far as getting a diagnosis or a number of issues, a problem they want to solve.

Depending on how they go about that, they're going to find different types of answers and different. Types of frames. If you go to an industrial medicine doctor, are they going look at you in a certain way?

And if you. Go somewhere else, we're gonna look. At you a little bit differently and then you do your own research and you find actually something else is really important to you, you know, and so.

Health creation as a lifelong skill

So one thing is that we want to kind of move our thinking from the short term to the long term, especially if we're not dealing with an emergency, right?

If you have an Emergency, you should go to The Emergency Room, but we are talking about ongoing chronic health issues. So we really need to widen our lens.

But the other frame shift is we aren't talking you know, getting rid of your disease or getting your symptoms, health creation is actually a bit different.

And so using that lens, I don't know. I think it's more accurate for what's involved, especially if you're unlucky enough to have a complex chronic illness.

You know that the things you've already tried aren't going to work, that those lenses aren' t most of the time doing what you need them to do. And so you're already, a lot of these people, not everyone, but a lotta people in this boat, they are already spending a little time trying to create their health.

So it's not like this is a new thing for them to do. It's more just a shift how they're approaching it and learning how to cultivate health, which ends up meaning that the body no longer needs to produce these symptoms.

— So true, so true. And I think one of the biggest things I run into, and I'm sure you've seen as well, is that folks have their list of their symptoms and there's this this over anxiety to like get check them off the boxing and erase them and and we forget about Well, what behaviors led us to this point?

What things set us off the rails to get to that point. What are some of the things that you find in terms of looking at chronic illness, complex illness?

Would you think that folks should be starting to think about first when we're looking restoring health versus taking off, getting rid of all the symptoms?

That's a good question. work with people who maybe are a little bit different than average because a lot of them have already been just working so hard at it.

I don't want to give this impression that people come in already with perfect lifestyles and that's it, but these are people that tend to be more aware than, let's say, the average person, so they've already tried a lot of things.

If I'm going to give a blanket statement, it's really about thinking about what can we get rid of, what we can move away from, and what less can be doing.

So we tend to have this idea, which is kind of handed to us from our consumer's culture, that we're missing things and that need more of everything, more nutrients and more gadgets and practices.

more and more, more more. And so then it becomes a stress in itself. So if we can become aware first, especially if people have issues like fatigue or cognitive fog, then if you can look at what less we could be doing or like the 80-20 of our practices, what's the 20% that's really helping us the most and the 85% we heard we maybe should be, but we're not really sure if it's helping.

And if we can kind of remove that, then we just create more space and maybe even like a little more of like kind, of a relaxed vibe around the whole exercise.

And that gives us more room to navigate. That makes sense. If you look at Instagram or TikTok, for example, and you see, you know, an influencer, let's call it someone in a space where, functional medicine space or something in that case, You will see like everyone's like my eight step morning routine and then like, my 20 step nighttime routine.

And you gotta have the like the blue light blocking glasses and, stand on your head before, just kidding guys, that's not true. But, standing on you head and do this and that and next thing you're like Health is a full-time job and I have no joy because I'm spending all the time doing the health things.

Do you find that to be the deal? Oh, a hundred percent. The messaging we're getting, and that's more common to the people who are coming in. They're like, I'm taking 40 supplements.

I meditate or try to meditate an hour a day and I am doing this and doing that. And these are people that are saying not for lack of trying. Again, that is not everyone, but that the kind of people I tend to connect with on their health journey.

But you're absolutely right. And yeah, it's hard because we want, I think it is nice to have our vitality in service of something, right? So that we're not spending all of our time just becoming well, that were able to go out and express, you know, our creativity or our love or passion.

in the world. And when we become ill, then that becomes the focus, understandably, right? Because you can't, you know, depending on what's going on for you, it's hard to do the life things that you want or need to when your brain's not working or when you're in pain or your digestion's all over the place or you are inflamed.

And so we do need to get there. And there's also this bit of navigating balance and also a huge aspect of navigating psychology so that people, you know, most of us have aspects of our psyche that are unconscious and sometimes are kind of working against ourselves, that we're doing things that, we know we shouldn't be doing.

Actually, I'll call this one out. Well, if I call it out, and this used to be me as well, people who are very intensely achieving on health, but are also, let's say, drinking a lot as well, or have these kind of shadow activities.

And that's a really common pattern that I see in modern times. So it's like these personality parts aren't quite synced up, and again, because there's so much pressure in the system that we need to release valves.

Being able to talk openly about those things is, I would say just as important as having a good treatment plan. It's huge.

Internal family systems and inner conflict

It is huge because yes, sometimes as a doc we'll be talking through all the things and then someone will say like, you know, I have a couple glasses of wine each night, or you Other things like smoking like I'm a closet smoker, you know, and and it's like, oh shoot.

You've got everything else filed in but we've Got this thing. What what what is it about? So I guess since you guys she's worked with dr Milo who's been on my podcast before, You know i'm guessing you're diving into the nervous system the subconscious mind and and the psyche behind all of this.

So, of course, a lot of people are aware that we have this programming that, we sometimes have trouble breaking up with, and it's hard to change it and whatnot.

But I think for a lotta people, when they hear like, it' all in your head, but it not really all on your, head it sometimes like wall up. Tell me a little bit about your experience in that case and how you've taken what you learned from Dr.

Melillo and made it your own in terms of your work with folks. Sure. Well, so it's interesting. Dr Melillos training that I've done with him informs a lot of my work for patients, although that's more on the developmental nervous system side.

And of course that gives rise to our psyche. These are not separate things. But what I will say is that actually when talking about on unconscious drivers and inner conflict.

I actually use another model that I've trained in called internal family systems. So, and I just, I love that. so I wanted to get definitely get back to how I'm using Dr.

Malo's work in my work, but the internal Family Systems, it's a model of psychology and For me, it's just like an accurate way of giving handles to the parts of the psyche so that you can talk about them, you work with them.

I don't really see it as a specific technique, although there are techniques that come off of it. But what I have found across the board is even before I was running a group and I doing one-to-ones, when I would speak with people, And say, look, they actually have found that we all have multiple personality parts and that they might have different developmental ages.

They might different motivators and values. And a lot of the struggle that have is when they are, when you have a different ways of trying to help us meet our needs or to keep us safe.

just people learning about that seems to be healing in and of itself. Because when you're raised in a culture, whether that's the dominant secular culture or the religious culture whatever it is, that tells you there's only one of you.

Well, if we actually have different parts, then first of all, it makes us all crazy. So we better not talk about how we have these different facets. And we also really hope that that one us is good, you know?

And so there just a lot of like tension there to hold, and so if you realize like where you know, we all do behaviors that were like, that was not good, I wish I hadn't done that.

So we understand where that's coming from. That doesn't mean that we have to be perfect, but it's really just giving us a roadmap for navigation. And I actually find it almost like a modern, and I would say more practical way of working with a lot of concepts from Buddhism.

Because in Buddhism, at least from my understanding, Different things i've read they'll talk about the different emotions and it's really mainly from this perspective of watching the flow by like clouds right but if we talk.

Compassion if you were to come across a child on the road who was crying and needed comforting would it be like Buddhist or compassionate just to watch them and like.

act like they were a cloud and just not engage, right? So with internal family systems where we see these not just as emotions, but as personality parts, and that many of the ones that cause us the most problems come from our childhood, then we can maybe work with them in a more compassionate and more effective way.

But also we can talk about things like without without judgment but just with awareness like okay so you know you you take 40 supplements and you meditate and go to the gym and drinking a bottle of wine at night so like how can we make sense of that in a way where you're in control.

Right? That we're not trying to create shame, we are not going to take the side of the part of you that's doing the healthy stuff and villainize the other side that is having the bottle of wine.

That's really not helpful to anyone, but let's try to understand our system and see if you're recognizing that you are working against yourself. Why is that?

Is there another way where you can meet your needs where your not working with yourself? Huge. Huge. And with internal family systems, I think a lot of people have probably heard about it, but a lotta people are probably still going like, okay, my own family, myself, how might I relate to myself?

Let's dive into a little bit of the internal-family systems and how someone can relate it to themselves and what kind of resources could someone go for if they're looking at it and going, and I wanna learn a bit more.

Where would you direct them on that? Just on the basics here to give a background. Sure. So the so internally internal family systems is an entire model.

There's training, there's wonderful books. The book that came out a few years ago called No Bad Parts. But there are many books, so there there. Are places that if you have this term and it sounds interesting, you can go forth and there even a.

Few years. Ago came. Out an AI like therapist, but who who you. Can do internal. Family systems with and. It's like very effective, So that was interesting to yeah there's a few of them now and so basically the overall idea is that the the internal family that it's talking about is are the personality parts inside of you and they can be influenced by your caregivers but they are not your care givers they're parts of view.

And there are a number of categories of parts so we have what are called exiles these tend to be not always but usually are childhood parts young parts that often when the system is a little bit out of balance they carry.

these burdens, these beliefs about themselves through life that like I'm, you know, shame and I, I am not no good and unlovable, et cetera. These really, and these, overwhelming emotions that can feel like death, You know?

And then as we get older and our cortex develops, then we have ways of managing that. And so there's these two other categories of parts that are both considered protectors.

They are protecting the children. One category is called managers and the other category, it's called firefighters. And I tell people not to worry about the words so much.

It's just we're using words that we can talk about something, but it is more the concepts that they're describing. So the managers, their strategy is to control the external and internal environment to basically get along in the world.

We tend to live in a culture that very much rewards managers. Being on time, overworking, being likable, being super mom and the one who's driving all of the health activities.

I'm on all the supplements. Meditate for an hour in front of my red light with this up my butt and all this stuff, and I am drinking 18 glasses of water.

That's your manager who is ticking all those boxes and controlling you and your environment into health. And then

when that doesn't work, because these are strategies, but then you get stuck in traffic.

And you're, you know, the thing happens or like your kid's sick and you have to miss the meeting like life will life you that started and then that's when the kind of type a person is a little bit too wound up freaks out and firefighters, their strategy.

is in the short term to take you out so you don't feel those overwhelming emotions of shame and unlimbability and being out of control and those types of things.

And so those will tend to be short-term things, these tend be like addictive behaviors, they tend not to have long-term great outcomes. Aside from systemic failures, almost everyone is jailed because of firefighter activity.

So, you know, it's like they're firefighters, let them down. And so these would be things like, we don't want to feel these emotions. So we might binge watch Netflix.

We might have the glass or bottle of wine, We may binge eat the cookies. But a really common one that we really need to look at more and more is we may dissociate.

A lot of what people are talking about, like I'm in my 40s and I was just diagnosed with ADHD. Well, maybe. Maybe you've been chronically ill and you have a pain condition and are dissociating because you're having this chronic thing that almost nobody understands.

Whether it's pain or fatigue or anxiety and depression, these are all outputs of the brain that are designed to change your behavior. But if it is chronic and it isn't working and so no amount of sleep or rest or holiday is taking care of fatigue, Then at some point, you're like, OK, well, I'm just going to disable that emergency light.

Why chronic illness needs a staged approach

Changing my behavior is not working. Therefore, i'm going dissociate from the fatigue. So these are the common categories of parts. And then in the center, there's a part that Internal family systems calls the self with a capital S and many different spiritual traditions describe this.

It's like the soul or it's Buddha nature. Uh, it is a part that does not seem to develop over time, that is kind of born intact. And the key idea, which is really interesting, is that it the natural leader of our system.

In a society where our limbic system, which is where her exiles are, is constantly being triggered, our managers are rewarded, and then our firefighters are medicating us through so we can handle it, what probably feels like being yourself and being a sane person, with very few people can find ways to really handle this, being led from self, then your other parts that are still there, they take on less extreme roles.

So like your manager part would probably be good at helping you organize a long-term project that you want to do rather than control like, your, fun. Cause it was probably not very good.

Absolutely. You know, that was like the best description of internal family systems I've ever heard. And we've not talked about it on the podcast. So the, this, oh my gosh, it's so good because I don't think a lot of people realize how much different personalities we have within ourselves.

And of course, it's scary because the DSM, whatever number we're at now, you know, for diagnosis, like tells us like multiple personalities is a bad thing.

But the firefighter personality, I mean, just listening to you say that, and I'm like, i can see so many different areas in my world where, yeah, I've got, you know a little bit of binge eating on certain areas to cope with things.

I can never say the word Um, you know, from things, especially when it comes to, like, finances, money, things of that nature, and then sometimes we'll end up, with a ball of stuff in that department.

Have you seen that for folks? Is money a big decision? Well, it's different for different people. It's just, where… You know, the kind of combination of nature and nurture where someone's under resourced, you know?

And it's usually a skill thing, right? So that we come out of our school system, being able to do trigonometry, but not compare our tax return and all this stuff.

We're not provided with practical skills for adulting in our education. So depending on what that looks like for you, If you're under-resourced, then you might have dissociation as a strategy to protect you when you feel like you don't have the resources to handle what's in front of you.

And I do want to speak to what you just said about the DSM, that dissociative identity disorder or multiple personality disorder, which are diagnoses.

So all of us are not as different from that as we have been led to believe. The difference there is that those personality parts have been blown out way more, usually due to trauma.

So when it becomes a diagnosable disorder, it's usually because personality parts are not aware of each other. And there is not a congruence happening, but this is a trauma thing.

From my perspective, the problem is having the personality part, because we all have those. The problem for that person will A, to be in a system that doesn't understand them, but also just that they have parts that are not speaking to each other.

And so that can be difficult to navigate life. Yeah, absolutely. Absolutely. You know, I think for a lot of people, the communication internally with within the body back to, you know talking back and forth and this personality talking to that personality.

It's almost like one forgets when we're in one we forget the other kind of a thing. Like, is that how you see it? Like we have no recollection and then can switch.

100%. I want to layer in the health aspects to this because one is that we will be ping-ponging through using our stress response to get through our day and then be fatigued and crashed.

It's an energy management issue. Then the other aspect, because I have my own complex chronic health background, that informs a lot of what I ended up having to learn to really get better.

It's like everything. When resources are abundant, there tends to be more harmony. And when resources of scarce, it tends be a more fragmentation. So when you have a complex chronic health issue that includes energy deficits, then what I see is that people tend to have more fracturing of the psyche because it's really because because again, these are different parts of your personality.

You can even call them different brain body networks if you want, because that's not wrong either. They are competing with each other to try to help you.

So one is saying, you're unwell. You need to work harder to figure this out, or you are going to die. And the other one's saying you aren't well, and you need rest and stop or are you going die?

And then, of course, people have responsibilities on top of this. They need work, they maybe have kids, whatever it is. It's not just going on retreat for six months to figure it out.

And so there is this ping-ponging back and forth. I'll just say it, because I think this is a reasonably informed perspective, and I'm welcome for people to chat with me about it.

But I see a lot of adult ADHD diagnoses. Some of them, I thinks, are accurate, some of which are this, that is not necessarily a neurodevelopmental diagnosis.

issue, it is what I'm talking about here. And not that those are mutually exclusive either, but just that we have not been taught about how our mind works.

We've not taught how to manage our energy. we've never taught the skills that need to be adults, many of us. and then we're like kind of just zooming back and forth between being hyper organized and trying to keep our emotions intact.

Yeah. Yeah. Well, and on that same line, like even us docs who've been through school have not been taught how the psyche works. And I've even found a lot of psychologists and folks unless they've taken extra training have been not taught, how things really work, you know.

Well, the field of psychology has over 400 different models, which is suggestive to me of a field that does not understand its subject. And what I would add to that is that my background is in Chinese medicine.

I did a lot of functional medicine, and then I've done a pretty deep dive into developmental and functional neurology because I realized that that was a really big missing piece.

Now, we are embodied, I don't believe that we're just kind of brains, but the brain is pretty central to your psyche. It's important. With a head injury, if you could change your personality.

So you're talking about a field that does not know how to examine or describe the organ which it's supposed to be specializing in. So if you, I mean, that's crazy.

If you look at the DSM, you can choose anything in there, but let's take ADHD, which is a really popular one. It doesn't mention the brain once. How is that possible?

Imagine being a pulmonologist and not examining the lungs. So, it's a big problem. So I would say there's, a lot of really promising stuff. I don't want to sound all critical.

That's like my soapbox, but there is a really lot promising that's more trauma informed, that is more accurate. What I see now in that field is that, and this kind of goes to a greater theme of there being tools and techniques That are promising and that are more effective than what they had before, but most people or the clinicians and the patients don't know when to use them and when not to us them.

They don' have a big enough map. So something like EMDR or something, like ketamine guided psychotherapy or whatever it is or psilocybin. It's like this is promising.

This is exciting. We have people who've been you know, just traumatized for decades that are now better. And so now they're kind of putting, I'm not gonna say everyone, but a lot of people through it, they don't have a model that would allow them to know when to do it and whom to it with.

So we're still kind in these like the early frontiers of a more trauma informed psychological practice. But what I discovered, especially when I came back to the States, like I trained in the UK, is the patients I would see had been in therapy I mean, they're coming for anything, but they've been in therapy for a decade or two decades and they are just so articulate about their problems about the dysfunctions of the family of origin about there's psyche, But they don't have any.

Much like tools or resources or way out, so they can just describe the problem really, really well, you know, and let me go back to bring back what we were just talking about in terms of childhood development.

A lot of this is. Sub cortical precortical, not the part that's talking, and not that actually can answer you, so we need to use tools that are more fit for what we're dealing with.

Now something like EMDR, which is eye movement desensitization, Something like moving the eyes to clear energetic charge of trauma, which works sometimes.

Sometimes people get re-traumatized because there's not, from what I've seen, there isn't this like, this is what we are doing. This is who this for. this when we don't use this type of understanding, but at least it has the benefit of accessing subcortical networks, usually where the trauma is living.

That brings up so many questions in my head. So let me see if I can like bring myself in here because let's face it, like even I, working with chronic ill patients, you know, I get to a point where I'm like I don't know what to do next, right?

And it does seem like in this world of social media that there's a one size, we're gonna fix it with this. Like EMDR is the answer, hypnosis is answer.

You know EFT tapping's the answers. And I think for a lot of people, people are looking at this going like, okay, you know, and especially, I'm sure you've seen this, especially in your case as well, in the chronic health industry.

I mean, we're grabbing for straws and unfortunately, a think a of marketing is targeted to pull on the heartstrings of folks in this industry and so it's going, like okay.

Clearly we need to get into the cortical parts of the brain, the subcortical part of brain but the idea For folks to think about it, they're like, okay, does that mean I need to work on my vagus nerve?

Does that means I needed a device that's a vaguss nerve stimulator? That's what I get in my office. And for me, I'm always like no, no I want to help create neural connections between things and break other ones, but I I come to a point where my training, I'm low resourced on that department.

And so this is what I am hoping you can kind of help us today on the podcast to be like, okay, if your doc gets a appointment like me and is like I know what you need kind, but I can't do it for you.

Mel, help us. Okay, so we were talking briefly before we hopped on about training this medicine, which is wonderful, right? I feel like I had a head start.

I trained in Chinese medicine. Trained in functional medicine and there were really cool things that we could do with it. With lab testing, you can be very precise.

You can really help people that were not being helped by industrial medicine But then I got to a point, partly in my own health where it wasn't working the way that was supposed to and also I did a lot of extra I didn't two master's degrees and then a lots of training.

And it, there were questions that weren't being answered satisfactorily but I mean like basic for me like foundational questions.

Immune system first and the cell danger response

Um, and also it wasn't working as reliably as I felt it should. So one of the questions that I had for many years was when someone has complex chronic illness, almost by definition, they have multiple systems that are not working well.

Like that's part of it. hormones are weird. They are inflamed, they have infections and their brains not working. Like that's normal for this group, right?

So where do we start? And so I got, you know, in one training I did, I get one set of answers and I felt like I was successful with that about 30% of the time and did not think that was okay.

These are 30% people who were not being helped by industrial medicine. So it's still like there was there. Was good there, but I was like, I don't like that batting average.

I feel like with someone if I have someone's attention and trust and focus, and need to be able to get them better more reliably than that. And so I went to, you know, different teachers looking at different things.

Around, I don't know, like kind of 2018, 2019, been struggling with my own health for long enough and I was getting just disillusioned with training and just declared intellectual bankruptcy.

And so I went back and retrained. One of the fruits of that was hooking up with some teachers, including a really great mentor of mine, Jeremy Cornish, who trained me in a particular but like reality-based biological order of operations for working with complex chronic health issues.

And what I will say is if your presentation is not that complicated, then often it does not matter where you start, which is a good thing. We want you to not be complicated.

we want to get better. So if you're kind of a little bit unwell and you clean up your diet and feel great, great. If you are a little bit unwell and you like do something with your hormones like great but for people who've been struggling for years who have these systems then it matters what order you go in and if you'd go out of order things that you feel like should work don't work and part of what you're talking about a We have these different tools and we have different approaches and different body systems.

How do we organize them? And that's the meta skill. So the order that I was trained in and now I've taken hundreds of people through and it makes all the difference is first that we start with the immune system.

There's nuances there. I'm not looking at the inflammation as one thing that is fire that just needs to be cooled and turned down. We can go into this.

The inflammatory response is a three-step process that all cells go through in order to heal. This is outlined by Bob Navia's work with the cell danger response and is basically perfectly articulating Chinese medicine's concepts of hot and cold.

I just had a really cool, this is little segue, but a real cool discussion in my group yesterday. Someone was talking about what to take for seasonal allergies and there's a popular supplement called Dehist.

And when I looked at all the ingredients, they're all cooling or cold ingredients. And it's this idea, well, histamines causing heat, inflammation, hot, redness, we must cool it.

Sometimes, but most modern people are actually cold and the symptoms are coming from cold. When I say cold, I mean like too many antibiotics, whether your diet's unhealthy or healthy, it is too cold so even the healthy people having these green smoothies all of the time or your ice cream or I don't know if we can swear on here.

Again, you're fucking iced coffees. Like, why are you having iced coffee in December? Who put out that memo? I see it everywhere and I'm like, oh, my God.

So this is actual literal cold or the air conditioning that's blowing in your neck that is leading to your, in many cases, not all cases. But the point being that we need a slightly bigger model so that we know what you need for your seasonal allergies.

So immune system, then digestive. I have plenty of people who come into the group who've already been on exclusion diets and they have almost excluded everything.

There's nothing left to exclude. And we need to help them to regain tolerance to real food. That's why we start with the immune systems. And then we work in the digestive system.

Then we worked with the neuroendocrine system, there we may touch on trauma issues, by that time people have more bandwidth. It's really hard to engage neuroplasticity in an inflamed brain, you know, it doesn't like to learn when it's full of lime.

And so with neuro endocrin, we're looking at the brain and the nervous system we are also mainly looking Hormonal regulation rather than this other thing like me also box of everyone being given hormones, you know, if they have two legs, we do not pass go.

So, and then we look at what's called tissue repair, which is like, If you have old injuries, Each step replace basically going in the order where we're less likely to make someone worse.

That's how we were deciding. Okay, so. You may have an old concussion or something and we could give you herbs that are blood moving herbs, you know, and you would probably feel amazing.

for a few months, but if you also have gunk in your system, if have chronic latent infections, and you have mold, all that, when you increase blood flow too early on, you give those toxins and those infections a free pass inside and then you crash.

And this is how a lot of people are currently practicing. But what I'm explaining now is something that I want all the individuals to learn. So this is not privileged information.

Not only do you not have to have a medical degree to know this, but we're not learning this when we get our medical degrees, right? You need to, you need learn health creation as a lifelong skill.

And what's beautiful about this. In stage 5, if there are deficiencies that still need to be boosting up, then that's where we approach them. Why? Because your pathogenic and dysbiotic gut bacteria, they love the supplements you're taking.

Like, when you take iron and you have a gut over… I mean, there's a paper that says, that iron is literally like chocolate for the methyl species. It's like your B vitamins, all of your methyl boosters.

Let me just finish that little rant. Okay, so everyone's boosting it. Methylation, it's this new tick that's, like, your problem is low methylation. We are going to boost that for you.

Here's your methylated B-vitamins and your folate and all this. So the first step of the immune system in the cell danger response We intentionally lower our methylation so that an invading virus cannot use our methylation machinery to replicate.

So maybe we should not be starting there. And again, that sounds like a specific example, but it's like speaking to a wider problem of so many people not understanding the fundamentals of the system that they're working with.

They all have a piece of The Elephant. But we need to be able to put it together where we can move people through safely and effectively and everything that someone does, every step someone uses, we could learn based on their feedback.

So even if not everything we do is a home run or a slam dunk, We've learned something really specific so we know what to do next. You have just highlighted so many things that I have definitely seen along the way because we'll do all this functional medicine testing, right?

And for a lot of docs, their theory on it is we have to correct what's deficient. And if you're not doing it in the order that you described, yeah, things can break.

I've broken lots of systems over the years. It's just what you learn. and you go, ah, crap. Um, and at the same time, one of the other things that happens, And you had even alluded to that, you'll feel good for little bit and then it doesn't work.

That is probably one the biggest hallmarks that I can nail down in someone who's had a chronic illness and going, you haven't treated the immune system because, oh, I try things and they work for like two weeks and then they don't.

And it's like, okay, immune neuro connection right there. It's boom, thank you for telling me that. You're kind of helping me support what I've noticed over the years.

Yeah, which is the whole idea. Once you see it, then it makes sense. And again, you've treated however many, like thousands of patients, but we weren't taught this in our training and there isn't even, I don't know, an obvious place to go to get it.

But once you start working with it you're like, oh, it's like the code breaking and it make sense, so for example, someone with fibromyalgia, goes for a massage, and then the next day they wake up, they feel like they're hungover, or they have a massive flare.

Well, what, our massage is bad? No, it's out of order. You're moving. When you have an infection or a mold toxin or something like that, your body's trying to reduce blood flow in order to prevent it from going deeper.

And that doesn't feel good, by the way. We feel when we have good bloodflow. So then you go for massage and now we're kind of going out order and we are spreading it all around.

And then we feel worse. And so a big aha for a lot of people I work with is realizing that because they had tried a lots of really smart things and they've tried lot a things that really should have worked and that they'd heard about on really, you know, great podcasts with a a research behind them and then realizing like, oh, it was out of order and it makes it a sense.

Yeah. I mean, the same thing as the massage, I hear a I'm guessing you probably have this exercise intolerance. So you try to work out and like each time either the histamines pop off or know, there's some kind of intolerance there.

Is this also, like, have you seen, this is also out of order? Don't do that. So I'm going to give a two-fold answer to that, yes, it's out-of-order. You can call it stage four because it is increasing circulation at a time when your body, to try to protect you, is trying to reduce circulation.

And so then you're kind- of kicking up all this dust. The other idea that I, you know, again, with each distinction, I'm surprised at how, like, recently I am coming across it, is this idea of our threat bucket, right?

And in this I give cumulative load. So, basically, let's say I don't know you had your childhood, whatever that entailed, maybe there's an old car accident, emotionally distant parents, maybe there's a Lyme infection, you had bad medical treatment, whatever.

And then you kind of get to a point, let's say you're in your 20s or your 30s, or 40s whatever, and something happens. You get an infection or an injection or a bereavement or bad night's sleep and things kind-of crash.

So with exercise intolerance, there are a few other symptoms as well. Basically, if the brain decides that it doesn't feel like you are safe to be engaging movement, it's going to cut you off from your energy.

So it creates fatigue. It creates exercise intolerance. That creates dizziness. Creates pain. Behavior modification symptoms. And that's the other thing that gets tricky when we need better frameworks, because it isn't one thing.

It isn' a cause, it is causes. Its cumulative load. And thats the reason why the five stage model works so well. Because even though people are different.

So I'm taking people through a process. We individualize that process, its not a protocol. But the reasons why its appropriate is that one person might have 80% of their issue in stage one and they feel amazing really quickly and that nice.

Someone else might have more of their issue in stage three or five, but with this accumulative load thing, we start in Stage 1 because we know we're very unlikely to make them worse, which is a really big bonus, and we've

removed some load.

Then we move on to the digestion. Each stage we are removing loads, then when we want to go into your grisly ass childhood trauma that you know needs to be resolved, you're ready for it and you have resources to do that processing.

Yeah, no, where that's coming right there is huge because I think where all of them and I've been kind of confused in the past, like, do I go back work nervous system first and not touch the immune system?

And I Think a lot of people the message right now is like I need my neural programming. I Need to go work You know, I need to work on the trauma first, then I can get healthy.

But you're blowing the doors open on a lot of theories where it's like, no, i need my immune system and your five stage process. then go to the trauma because it's okay.

And I want to make a distinction. You know, there are people out there who started with their trauma, and then they had resolution, they got better. Great.

What I wanna make the distinction for you, though, is if you if that was not you. This is why So then it becomes a case of I have a person in front of me.

Let's say they are not currently undergoing trauma treatment and they've got all the symptoms and all of the things and it's like, well, where do I start?

It's a way of simplifying things. And we're going to focus on this right now because there's, a lot of things you could be doing. There's. A lot. Of gadgets.

You could. Be buying. You know, where do we start?

Neurodevelopment, balance, and autonomic function

Okay, well, this is where we're going to start. I'm not suggesting that you start with the ketamine-induced, you know whatever. Let's start the immune system.

And I'm not here to tell anyone to stop or start anything, really. It's if you are finding that's not working as well as you'd hoped, then you might want to prioritize this first and revisit it.

If it is working well or if your happy with it or you have a great relationship with, it great. Continue with that. You know, we're not. Here to. Stop with working.

We're here. To, you know. Figure out what's. Not working and try something different. I am glad that you mentioned the twofold, because yes, healing trauma first sometimes for a lot of folks can be amazing.

Most people don't come to me at that stage anyway. But one of the things that, you know, I've had other folks on the podcast, the cell danger response, like Dr.

Navio stuff, even there's another gal. Veronique Mead talks a lot about it too. These kind of things to me have always resonated as why someone doesn't tend to get better when we've done multiple different things.

And at the same time, I'm looking at it going, wait, so immune system, first protocol, immune and neurological system are very highly connected. I think for a lotta people, that connection there isn't really forefront.

Can you explain a little bit about how, because I think for a lot of people, they're going to get like, okay, immune system first, perfect, makes sense.

How does that actually help in the long run, the nerve side? Yeah, there's a number of ways that I can explain that. So to answer the question the way you've asked it, yeah, The immune and the nervous system are highly symbiotic.

And it's kind of interesting. We're made of trillions of cells. Those cells are about three billion years old. The ones that cause us infections are really kind of similar to the ones we have.

And so we actually had to, as we got more organized and more complex and bigger and we became not just one cell, but 70 trillion cells, we need to have systems to understand who's a part of us.

Who's not, who needs to be paid attention to, you know, even the development of the gut and the immune system. That's like a more recent thing because those are commensal bacteria, bacteria living inside of us that aren't trying to kill us.

Like, this is like kind of a weird idea from evolution. So we have these really intricate systems to manage all of this. And then in our brain, it's very, very recently that industrial science discovered the brain's immune system, because before 2010, they thought it was sterile, which doesn't make all that much sense.

So we have neurons, but we also have something called glial cells, and that means glue, cause they just assumed that they were just there to stick everything else together, not realizing that it is our brain immune systems.

And so that's actually a big part of what it's structurally important. It's immunologically important, but also it is important for our learning and our experience sensing, right?

But one thing that is baked into this, because I'm using words like immune system and digestive system, and nervous system. One thing that Chinese medicine has really wonderfully that's really helpful is this three-dimensional map of how the systems work, which is when we start looking at a lot of chemistry, it's a really disembodied, right?

And so part of what's baked into this staged model is that we're working from the outside in. And that's the same thing with the very analogous to the trauma work.

We're like, you've got a wounded child in there. I'm going to go get it. And it's like wow, that scary. Maybe I don't want you to do that yet, because the protector parts.

They've been protecting that part for like decades and they've kept you alive. That's essentially what the ketamine is there for is to cause a dissociation to allow you to access that.

I'm not saying it never worked. It's helpful to have distinctions, but it's the same thing with starting with the nervous system. I would say the nervous system is the foundational system of the body.

It's foundational to or upstream causally of your hormones, of you digestion, um, your inflammation, and it does not follow that that's where we need to start.

Makes sense. Of course, my segue with this is to go into the development and neurodevelopment and all of that because that's where I see kind of integrating all this.

So give us like, how do we segue? Which we talk about next in this round because I think this a great way for folks to start to understand how this plays in from how we develop our nervous system and how things.

100% right so so we need to so if the foundational system is the nervous system then the foundation of that is its developments right and we can understand it by looking out into nature because you know if you look outside and you see a tree all of nature and life follows that same tree life pattern.

That's a universal feature and the nervous system is no different. Our nervous systems develops from bottom up

and then it has a right and left component.

The right side develops first for a few years, then switches over to the left. Then the outer bits, the crown, becomes increasingly specialized and it's meant to come together to make a functional whole.

And so I just summarized the first few years of nervous system development for you. But what is, I would say, now almost ubiquitous, and I was born in the early 80s, if I had to guess, 25% of us were a little bit weird.

And it's kind of increasing. That developmental platform is not unfolding very smoothly anymore. I feel that nowadays we could not be doing more to harm healthy neurological development.

And that can be a separate segue if we want, but if kind of keep it towards adult health and complex chronic illness, then I really want to know how your nervous system development unfolded Did everything go in an orderly fashion?

Did you hit all the steps? Were they at the right time? And then can we do any kind of doable assessments to see what's going on there? Because I mentioned that we used to be a single cell and then we became like 70 trillion souls that walk around and do math and make jokes and all this.

That we have this evolutionary and developmental platform of increasing complexity. And one thing we need to understand about chronic health issues is that we become less complex when we are ill.

That's part of the reason why there's brain fog. It's hard to stand up. We're the only animals that do that. The brain is like, you are not complex enough for that so I'm going to tell you to lie down.

Also relevant to people who are getting older who want to Age well that aging is developments in reverse. So maybe when you reach your peak, you add enough to function.

Well, but how, how quickly are you going to decline? So I find this is a really important area. And I would say issues with. how quickly or slowly left and right developed will give rise to a lot of different things.

One is like immune issues, that the left hemisphere of the brain increases the immune response, the right hemisphere calms it down. So even just through that like really blunt lens, we now can understand a little more what's possibly going on with patients that if you have someone who's more left hemispher dominant, they could be more prone to inflammation, but also they may be low in interoception, the ability to sense what their body is doing.

So these are patients, I mean, it's been wild discovering these people because they tell you that they're fine and you run their labs and they are like crazy, like inflamed and infected and like the leakiest guts I've ever seen.

And they were like, yeah, no, fine. Then you had one patient like that. His first symptom of any health issue was a heart attack. Because there's no interoception, they can't feel that they're inflamed.

Then on the other hand, the really sensitive people tend to be more right hemisphere dominant. They have trouble separating from their environment, you know, and they will tend have more suppressed immune systems.

So they get stuck with these like lingering infections. And again, that you can take stuff to get out of that pattern, there are roles for taking stuff.

But we need to, if you have one arm that's strong and one that that weak, You need do push-ups on a weak side and there is no pill I can achieve that.

So important, so important. Especially, yeah, neural stuff. And I kind of think that where I'm at in my practice these days, I feel like everybody needs some kind neural training.

I like to do balance things and basic stuff, but I think you can design protocols for folks when you find certain deficits as a whole. Yeah, 100%. And also, I just think it's the most overlooked area.

For example, at least from where I'm sitting, one of the more explosive problems people are having are dysautonomias. So they're standing up in their hearts, they are racing, or they stand up and their blood pressure is crashing like mine was.

And that's a brainstem issue. I mean, there's different parts, you know, brain stem, cerebellum, insula, vestibular. not, I don't know, not those things, you know?

And so we need to know how to do a proper bedside assessment. You know this is something that people should be getting, but are not getting either at a primary care or even at an neurologist, just like a basic bed side assessments.

Like let's do like our brain scan on you. And if you don' have a brain tumor, we're not sure what to with you, and yet these are things of looking at how someone's eyes moving, or what their balance, like you said balance is like one of the Best biomarkers that you can be doing and what's beautiful about it is that, you know, can help people get more of an understanding of what is going on in their body, but it's also a really important biomaker of like brain function, and it a good skill to have, like you're probably going to A better life.

If your balance is good, your energy is going to be better. All these things. So, um, yeah, so just understanding things like that, that we can help give people high leverage, uh, inroads into their system and how they can improve them when they could be focusing on anything, helping them focus on these.

Things so huge. I mean, I love fitness right I Love you know strength those kind of things, but when we have it where there's so much out of balance to begin with the the neurological system is just always been my jam to play with little things like the bounce and whatnot so.

I loved that that's part of it i'm guessing that probably one of the foundations that you've got along with immune system working through. You know with folks and you know, I think right now a lot of folks might be thinking all of us and going like, oh my gosh, there's a there is a.

Why that I may not have discovered how long is the first office visit like first visit with you like I'm just curious. So these days, the vast majority of my practice is online in a group where I have pre-recorded materials and that you can learn this stuff.

You know, most people coming in have brain fog, you know. They're intelligent, they're motivated, and they have a brainfog. I actually had brain fog when I started developing it myself, so I get that.

That's a real thing. And that was why I really needed to move to this Platform because I would have these conversations with people that were really interesting and then they leave, you know, and you can't expect people to remember.

Anyways, so this is the way the practices now it's a year long program. So people get meaningful results usually much quicker. It actually allows you to like.

Get through some of your initial issues and then get like new better problems and solve those, you know, so that we can have a few rounds the brain area really is like it's like a whole.

Another program that I just placed within it and included in it just because I saw that the need was there that. I first learned this order of operations in this.

process to guide people through, but it didn't include assessments for retained primitive reflexes, which is like these developmental issues. And it did not include these balance assessments or anything like that.

But this is a whole other program that people have as a standalone. I'm like, these are like essential life skills. So if people are here, you know, people ask me questions that need to be answered.

We are doing whole new modules and whole-new programs, and that's cool.

Who the program helps and where to find Mel

Membership is the year, so it gives you plenty of time to move through at your own pace. People come in with You know preponderance of issues in different stages like I alluded to before and so it allows you to go at your own pace and to really learn these things so that when you are presented with new information, you have a framework for filtering it, which is like this meta skill that you.

Are kind of like now impossible to market to or to sell random stuff or when your using something you know exactly why and you knew how to tell if it's helping you or not.

That's the most important thing. I love teaching that to folks. Let's show you how to use it. Assessment. Because at the end of the day, putting health back into someone's hands and their control Is is what I'm all about now in terms of you know, I have multiple coaches trainers folks that listen this podcast They might be thinking like how to how like what's a good referral for you in?

Terms of chronic illness because that's big bucket of things who are like the your best clients for You like who would be like a best? Yeah, I can answer that in a couple of ways.

The five-stage model that I learned, the kind of avatar, or the archetype for that was probably a woman in her mid-30s to mid 50s, overweight, fibromyalgia, brain fog, depression.

That is like a slam dunk, rheumatoid arthritis. no problem. But it's very easy to expand out to other people. I have men in the group, I women in group.

The youngest member is 18, the oldest was in her 80s, but now I've started to allow members to add their children to the membership as well. So we can do the neurodevelopment stuff.

We can learn for them how to use botanicals at home and to really map things so that you're choosing the right things to help things like issues with immune problems.

And so the clinical areas that I work with have expanded. So it'll be chronic fatigue, fibromyalgia, autoimmune, increasingly ADHD and like adult autism, but that always goes with physical issues, with digestive issues with inflammation with infection.

It's really more about the individual's awareness of their own issue and how they've framed that. They may be someone with fibromyalgia who's discovered that they have mold where someone else might be someone who is a mold illness person who also, you know, has body pains, so it's really, it is different in how they frame it, but it needs to be the most important aspect is really the psychology.

It needs be to someone is brave enough to want to take responsibility for their own health and to learn how to do it. Which is not everyone, which is fine, right?

But for the person, the persons listening to all the podcasts and trying all this stuff out and needs a guide to teach them, then in a way it doesn't really matter what the diagnosis is.

I had one person whose main motivation was that her mom had Parkinson's, and she was seeing how devastating that was to watch, And she, was healthy, but she noticed that she's getting these little niggly symptoms that were not that big of a deal, But they were exactly what her Mom had had 30 years ago.

And that was her motivation. And, that's like my favorite, you know, like help someone before they're actually sick. So, as long as the motivation is high and that you're, happy to go and do the things and learn the skills of working the process, then I'm really happy and to help different people.

And I also saw like it, correct me if I'm wrong, that there's also a part for practitioners to there. There is. Yeah. So, um, there are, yeah, I, also train practitioners in a separate group.

I have a lot of practitioners. In the health group, but a lotta people wanted to learn how to do this in their own practice. And so that's available as well.

Like it most when the practitioners are up for going through the process themselves. Most practitioners need it to be honest. A lot of practitioners are, you know, have health issues and that's what brought them into medicine.

Others may be okay, maybe you talk about burnout a lot or just maybe areas, but there's really and this was something that was so important for me and actually I'm so grateful to my group for is that like where I had my own.

psychological blind spots. I'm like, I have to figure this out so I can help other people figure it out. Like, none of us are above these human things, you know, where we're self-sabotaging or where were struggling with motivation or balance or whatever it is.

It's like well, i need to figured this so i can teach people to find it. So if you are a practitioner, it's really good. You know people, they've come in and said uh, practitioners have come and you I didn't follow your advice where you said to only add one thing at a time so I could try feedback.

I added like three things and now I don't know what happened. So now, I understand why patients do that. And it's like, that's more important for you to learn than for me to teach you like a thing.

You know? So I like that and I'd like the practitioners themselves will be hopefully kind of healthier and more robust at the end of the process too. Well, you know, it's all a learning process, right?

And like you said, in the beginning, I mean, we're working on health creation and there's no one thing. There's not one magic bullet. They're just finding what works for you and rolling with it.

And I think this is what my goal is to put out with the podcast, but also to have folks on like that are educating folks. I'm like, Hey, You know, put the health back in your hands.

Let's help you. See what you can do. So let's talk about SynthesisHealth.co. That's where folks find you, is there anywhere else folks can find other than your website?

Yeah, so that website is where you'd go if you want to apply to be a free guest in the group and take a peek. You're in. The group with the actual members.

So you see how I work with them and solve problems in real time. People have setbacks because this is real life and things come up. And so, and then you can ask me about your health and you get access to a lot of.

lessons that hopefully expand your paradigm and help you think about things different ways. I retrained in Chinese medicine with a really wonderful human named Dr.

Ed Neil over at the Apricot Grove. He was a medical doctor who then trained in chinese medicine and then he translated the Nei Jing and realized that it said all kinds of things that nobody realized it had said.

So I study with him and I do a podcast with them over at the Apricot Grove. We talk, I guess we talk about a lot of different things, but a of it is philosophical, also health related.

Really great, just grounded philosophy for modern times. If you're feeling overwhelmed or confused or stressed, it's a nice alternative to watching the news.

And then, you know, on various social media, although I find that I am spending a little less time there. which is good. Oh yeah, and I have a website called essays.synthesyself.co where once in a while I will go on a rant about

something and write an essay, so you can see some of my writing there.

I love it. It's all good stuff. I've definitely checked out quite a few things. Even the naijing, I think I might have to pick it back up and look at it again.

You know, it's part of the training to read it and like, i think i've tried to I don't want to pretend that this one person has a monopoly on all the valid perspectives of the Nei Jing, but when you listen to him, what he's saying makes a lot of sense, and you're welcome to challenge it.

It's not a church or cult, practical insights that when you put them into practice you get better clinical results so I'm all for that. And also it makes sense and also the way he puts things has more rigor to them than other things I had been taught where it was just sort of a vagary that was left unreferenced and it's like I heard one place that this is a thing.

Versus this is the line where they say this. This is what I think it means. What do you think? You know, I'm like a much more grounded discussion So if you do have any interest in picking up the nejing again, i can definitely recommend training with dr neil I definitely want to take a look because yeah for those of you guys who are like what the heck is a neijing?

It's kind of like A chinese medicine bible of sorts. Like i'm not gonna say bible. Let's say it's like, a manual um, many of them have been passed down.

I don't know how to You know what it is? It's about 2200 years old and it's actually a book on how the universe works, but it also has quite a few chapters on health and a lot of acupunctures don't realize that.

So it explains the patterns of the Universe in ways that are highly consistent with modern physics. And then it goes into how these universal patterns are a little bit different here on planet Earth.

And it then goes in to how the patterns of nature appear inside of our systems. This is also stuff that I teach in the group. When you hear these descriptions of things moving in your body, like river flow or these are the directions, it's interesting because it taps in on a certain level.

It's like your feels like it can relax. It feels the truth of it. As I say, it's not a religion. it is not like a take my word for it type of thing, or even I'm an expert type thing.

I am going to explain this terrain to you based on this map. And it feels your body feels it makes sense. Yeah. In the times I've tried to read it, It's been just fascinating.

Now that I have been in practice for Almost 20 years. I think for now, it'll give me a little better perspective than a newbie. For sure. One, I guess one bit of advice I can give as well.

There's a kind of large and well-known translation and a really big step forward, really great work that was done by a synologist who does not have medical background.

And I find that to be somewhat unreadable and also very unpleasant to read. It really is divorced from the understanding that I get with Dr. Neil. So now Dr Neil has a lot of translations.

He's done it in a way that's much more readable. But what we've all found is that if you actually put the Nei Jing into AI, it does a really decent job.

It's not perfect, but you get like 80% of the way there and it's more than Unchaled. And so you might find that it is more relevant for you and less like torture if have a better translation.

Huh. You know, I'm learning new uses for AI every single day. I am like, okay, this is my morning practice. My morning scripture practice is using AI to translate a chapter of the nation.

Huh? I like that. All right. Noted. Well, now you guys know how Mel and I are prone to geek out on things. So, Mel, thank you so much for coming on the Health Fix Podcast.

I have learned so to it and have no doubt that everyone else has as well. And we'll make sure we get all of your details in the podcast notes at drjcrossnd.com.

Thanks again, it's been a pleasure. Thank you, so, much. Hey fellow health junkie, thanks for listening to the health fix podcast. If you enjoyed tuning in, please help support me to get the word out about the podcast, subscribe, rate and review and just get that word.

Thanks again for