Podcast Introduction and Guest Preview

So I like to do a lot of diagnostic testing. I think it's that decision, you know, data-driven information that helps us. And so when you're looking at somebody, we can look at this gut now in a lot better way than I think than traditional medical does.

Looking at the PCR, the genetic signatures of these different microbes and quantifying how many of these species are exponentially in there. And so we can start to see, are we on an undergrowth where we've been on, you know, rounds and rounds of antibiotics and we can simply sometimes just go in there and reseed and feed, or is it, We've completely changed the ecosystem and now we have this huge overgrowth of all these opportunistic or this dysbiotic or these autoimmune driving bacteria.

But a lot of this goes back again to that antibiotic usage. Welcome to the Holistic Truth podcast. I'm Jamie Dorley, CEO of Nutritional Frontiers. And I'm Christine Genovese, creator of the Soul Intelligence Method.

We're here to help you break through chronic disease and dysfunction physically, mentally, emotionally, and energetically. with real proven strategies, protocols, and tools you can use in your practice today.

Hello, everyone, and welcome back. We are live at the Holistic Truth, your number one podcast for natural health, wellness, and healing. I'm your host today, Jamie Dorley, all the way in Tampa, Florida, coming in via Zoom.

And I have my co-host, the one and only, our Chief Growth Officer, Christine Genovese. How we doing? I'm doing pretty good for a Monday, James. How are things with you?

It's great. Is it Monday? It's really a Sunday because we work Saturday, but you know, nobody really cares. So what do we do in making the world healthy?

Yeah, absolutely. Well, you know, we never, we never really take a break. you know, living the lifestyle day to day. But I'm pretty excited about today's guest.

We have someone that is a guru in a lot of different areas and I'm excited because we're going to talk about a really hot topic, the gut-brain connection.

Oh yeah, I learned in a recent seminar series in Nutritional Frontiers from Dr. Len The gut is actually the first thing that starts to grow at the spinal cord right to the brain.

So I'd love to hear the experts' opinion on that. So, you know, since 1999, he's the owner and the founder of the National Health Houston, National Health Center.

We got the privilege to actually go in and tour the facility and learn a little more about them. But I really love that he has a background in chiropractic, certified nutritionist, and similar to the co-founder of the Nutritional Frontiers, Dr.

Weiner. another chiropractor. And the cool thing is that he works with so many different types of people. He's not your typical chiropractor. The old chiropractor would be more about the spine and the neck and, you know, the back about manipulation.

He works with kids, adults, us, seniors. There's actually people older than us. He works with people that have had injuries, athletes. And really, I think his passion is the complex patient, right?

The more complex, the more he gets excited and really his true passion comes out. But that was interesting. I was doing some homework, Christine, and you're going to love number five, but his top five philosophies or his wheels,

you know, it's really cool.

One is the spine, right? That's a conventional chiropractor will always look at the spine as the foundation, but he gets an ATP. Then we just talk about that with Dr.

Coach. He did. Yeah. The new ATP molecule, what that looks like, acupuncture, which has been around longer than anybody in our team, uh, over 2000 years.

And even Joe, she said it, even Joe, Joe Massino. Yeah. Yeah. So acupuncture, you know, picked out these meridian points 2000 years ago and whatever power that they had in them proved to be accurate.

You know, then he looks at the DNA, right?

Dr. Mitchell's Background and Functional Medicine Journey

really cool topic because that's like our computer system. This is one of our DA molecules has as much capacity as computer. And number five is right down you, the wings.

I was like, oh, what does the wings mean? I looked a little deeper. It's mind, body, and soul, how somebody can spread their wings with their emotional wellness.

So Christine, do you have any insight into that? Absolutely. And when we start diving into our topic about the gut-brain connection, I'm going to talk a little bit about the solar plexus chakra and why that is such an important place for doctors to start.

But I would love to formally welcome Dr. Darren Mitchell. Welcome, Doc. How we doing? Great. Thank you so much for having me. So we're so excited to have you on today.

Thank you. So I know one of the cool things about our interactions with you have been really getting to know you and your practice and how you view supplements and what goes into them and how quality, all of those things really matter to you.

So do you want to just give our audience an overview of who you are and why we enjoy working with you so much? Sure. Thank you. Well, again, my name is Dr.

Darren Mitchell. I am a chiropractor, Houston, Texas, owner and founder of Natural Health Houston. Going on my 28th, almost 29th year of trying to figure these bodies out.

So I think at this point, we're maybe up to about that much that we know, but we're expanding our knowledge and continuing. And that's kind of been, you know, my passion throughout the years of learning is trying to figure out how to not just manage patients, but try to, you know, truly And I hate to say the cliche get to the root or the source of the problem.

Coming from a chiropractic background, we're, we're taught that the spine and the musculoskeletal system and its input on the nervous system, you know, is, is part of the root.

And I would say we're, we're partly right with that. But about 2020, probably 20 years ago or so when cholesterol drugs started giving people muscle pains and my allergies and liver issues and neuropathies and the musculoskeletal stuff wasn't working.

That's what kind of pushed me into the functional medicine model. As we know, it depletes the CoQ10 molecule. We can't make back to your ATP molecule.

And so that really opened up my interest into how many of these patients who didn't get better under the chiropractic model or alone, how many of them had nutritional deficiency caused by medications and that pushed

me into the nutrition diplomate.

I did the internal medicine chiropractic diplomate. I did the functional medicine university. I got some private coaches and mentors in the field and just kind of really dove deep into that biochemistry realm for the last 20 years or so.

As you mentioned with DNA, we mapped the human genome and now we have testing that we can get in there and start looking at things like MTHFR. I think we all learned that one a long time ago, but there's so many more and you start to see these interactions of how all the biochemistries, you know, work together and where they can have bottlenecks and they can have traffic jams and things like that.

It really kind of gives you a neat. vantage point, what we call the N of one, because every one of our patients are unique, but we've shoved them into bell curves and trying to make all of our solutions work on them.

But now we can use some individuality. Segue that into the last coach that I worked for. I really enjoyed him. He's Dr. Alan Bonebrake. He's a chiropractor by trade, but he's probably taken a million and a half.

Did you say his name's Bonebrake? Come on now. B-O-N-E-B-R-A-K-E, not B-R-E-A-K. So I think this guy was destined to be an orthopedic chiropractor or a pro wrestler.

That's the only thing I can think of that he might have been as. That's funny. That's like Bob Rock, the music producer. Come on, bone break. That is pretty funny.

So this guy, not only did he spend so much money and time on chiropractic techniques, he's a master trained certified acupuncturist on multiple different continents under multiple different systems.

I think he has three formal master's degrees and his reference library is probably north of half a million dollars of books and journals that has read cover to cover, sleeps four hours a night.

He's one of them. Well, I thought I was a pretty smart cookie until I got into his courses and some of the information that he was presenting was counter intuitive to what we traditionally thought.

And so I had my ego and pride up there and I'm like, no, that's not how it was. That's how I got, I got an A in that course. That's not the truth. And then he'd pull up something from a 1965 orthopedic journal or some type of, you know, research article.

And I'm like, okay, I can kind of see where you got that. And then we'd do some stuff in class. I'm like, wait a minute, you can't fix that. Can you? And we started to work on these things and it really just opened up my ability to see how the body, you know, is so interacted and opposite side and opposite end and front to back and nose to toe and superficial and intermediate and deep.

So I studied with him for about five years. And told myself, I wanted all the information before he retired or expired. And then the last realm that you'll kind of, we'll talk about is the emotions.

And I was probably the least biggest fan of this space, you know, in working with a lot of past patients, you know, different psychologists and psychiatrists.

It didn't just didn't seem like a lot of these patients or, you know, or, you know, got better. It seemed like they were only managed, you know, at best.

And, and some of the stuff. in my past and my history kind of surfaced up as I started hitting some of these ages of, hey, I had a, what I call a trauma drama loop.

I had some issues with losing my mom when I was 20 that I didn't realize pushed me into studying as hard as I could and working as hard as I could and making as much money as I possibly could because I was genetically half

of her.

And I thought if I'm half, if I'm her offspring, my chances of cancer are going to be higher. And I saw my dad go broke. So that really is part of my journey was studying was my distraction, not to be able to deal with that grief and through some self-awareness, through some EMDR.

I really found out that I was carrying a lot of that burden, a lot of that grief. And I was fear-based learning instead of faith-based learning. And that's been a big, big shift and a big turnaround in this.

And so what you're seeing now in my practice is basically the byproduct of, of. not only trying to save myself, but, you know, save somebody else's mom or from going through some of that same stuff that I had to.

And now that we're, I don't know, if you want to call the word awoken or present, I like to say I'm present now. There's a whole bunch of information that I learned along the way that I think is really relevant to helping other people along their healing journey.

Well, it makes complete sense, right? This is exactly why we wanted you on the podcast because we talk about holistic healing, mentally, emotionally, physically, spiritually, energetically, and always, and you bring it all together in your practice.

So thank you for giving the audience an overview of you and obviously why we want you here. So one of the things we were gonna kind of zero in on today I think is really the gut-brain connection and why so much starts in the gut and how it relates to our brain and how we think and how we feel.

So we were very fortunate to have you speak at one of our VIP dinners in Houston recently and you covered this topic for some other healthcare professionals.

What are some of the key takeaways from that presentation that we can roll into? Well, you know, you guys gave me the opportunity to thank you for letting me, you know, speak.

And it was, it was interesting when he said, you know, create whatever, whatever you want, whatever you're, you know, you're passionate about. And I would say gut is one of the big things that has been a driver in my knowledge and what I call my own me search project.

I suffered with some, a lot of gut issues and, and. lot of that may be genetic, some of that could be, you know, emotional and environmental and genetic, all of that kind of stuff together.

But what I've kind of ascertained is, I think when you look at a system of how you're going to fix or look at somebody, we, a lot of times we as providers get stuck in detox, for instance, we'll go to a seminar and everybody needs detox or we'll go to an adrenal seminar and somebody goes, Oh, everybody's got adrenal fatigue, or we'll go to know, something about mitochondria or mitochondriopathy or whatever.

But, you know, when a lot of time with functional medicine, you don't know exactly what the cause or the root of the problem was. You don't know where the fire started in the house we talk about.

Was it upstairs? Was it downstairs? Was it in the garage? And sometimes we find out and sometimes we learn, other times we don't know. And so we simply have to rebuild, you know, the body and, you know, by structure, by the framing, by the plumbing, by the electrical, by the foundation.

And so we just have to kind of systematically work up.

Gut-Brain Connection and Antibiotic Impact

So I think probably one of the first areas that you have to look at is the brain, which is the emotional standpoint. I think a lot of us who get stuck in sympathetic mode or fight or flight mode is that we're operating on a whole

different software, you know, triggering different chemicals that don't allow our brain to fully use its big brain, its analytical side, because we're running on that emotional hind brain and it's not capable of entertaining new information.

And so I say that because a lot of times as you get into, you know, gut, you may get into some food allergies, food sensitivities, and you may present, you know, a piece of information to a patient and they said, Hey, I can't get off gluten.

I'm Italian. And you're like, Hmm. So when I hear that, but I use that as a prompt to say, Hey, look, maybe their operating system isn't amenable to letting them, you know, try something new or something different.

And so some of the stuff that we're working with you guys is just trying to, to help get that brain in a position of off of emotion and feeling and get over into the analytical.

Well, the gut brain connection. So we go from the brain back to the gut. And like, like Jamie, you know, alluded to both of these systems are, you know, really neck and neck and when they're developing, if not the guts a little bit ahead of the brain.

So these two systems are just so interconnected and so interrelated that you really can't look at one without looking at the other. And so I've learned a lot about gut.

And so when I, when I came up with this stuff, it was how much stuff can you fix if you fix a gut? And there's so much stuff that happens in a GI tract.

And I feel like it's a, it's a, it's a recognized, but it's, it's a system that most people don't understand. And I think it's continually evolving and new information is coming down so fast that how we can start to rethink and how to look at this stuff.

And so I called it the antibiotic reckoning, rebuilding the gut brain connection, confronting the hidden driver of neurodegeneration. It's time to face reality.

So. What I hope to go into with this is understanding how antibiotics have been a lifesaver and a miraculous find for many, but it's been Hiroshima for other people's guts, you know, chasing after some of this stuff.

looking at the parallels between when antibiotics came in and their utilization to the correlation and the rise of new generative diseases going on. It used to be, you know, a rarity that somebody heard about Parkinson's or Alzheimer's or MS or anything like that.

And it seems like, you know, everybody is coming down with these brain diagnoses and the Science as a whole has spent billions and billions of dollars looking for a drug to try to ameliorate.

Alzheimer dementia, trying to get rid of these, these tau proteins or these beta amyloid plaques. And so far everybody's been unsuccessful because there is no magic bullet.

And so as a functional medicine practitioner, our goal is to be a preventant preventative. And so we need to find what's going on in these systems, not just as a disease state, but hopefully to prevent somebody from developing some of these disease states with the information that we can learn off of this.

So. But yeah, that's kind of what I wanted to bring up was that, that, that interesting dynamic of how one side of the coin can be somebody that absolutely needs it, but the other side is, is, can be very deleterious.

Well, isn't it like everything else, the overconsumption of antibiotics, you and me may use them. you know, a couple times in a decade, you know, where somebody else may use them two or three times in a year.

And then the fact that depending on the food they're eating, if they're eating store brand dairy products and meats

and those types of things, you know, I don't think people realize that, you know, what you eat eats or is exposed to is what you get.

So if you're buying a chicken breast that's, you know, loaded with antibiotics and hormones, You're going to adjust that not only with your two or three or four, sometimes five rounds of antibiotics per year.

Have you seen that to be the case in your practice? You know, absolutely. One of the first things I a lot of times get into with a functional medicine patient is to ask them how many rounds of antibiotics they normally consume on an annual basis.

And this is not meant to be a disrespect to the generation above us, but When these things were invented in the late 20s and kind of came to market in the 40s, it seemed like it was a lifesaver and there were some awesome things that happened with antibiotics and how they decreased infections and surgeries and things like that.

Childhood survival rates went up. quality of life and so that it was it was it was literally miraculous but now it turned into every time you get a cold or a sniffle or a you know something yellow or green you know the the patient's like i gotta go to the doctor i gotta get an antibiotic this is gonna go from my sinus down into my chest i'm gonna get pneumonia i'm probably gonna die and so if i hear somebody's been on multiple rounds of antibiotics i'm immediately going back to this gut brain connection because of of how it the system didn't get a chance to start it.

Let me give you an example. I have a nephew on my wife's side that was having constant, you know, upper respiratory infections and, and I'm like, they kept taking him to the doctor and, and I'm like, how many rounds of antibiotics has this kid been on?

eight rounds in a year. And I'm like, eight rounds in a year? The question is, why is this kid getting sick? And so back to your comment, Jamie, about dairy, I said, take him off of milk, get him off of cow's milk and see what happens.

And so just by removing that that antigen and removing that irritant to the immune system, he stopped having as many infections. But the problem is we have multiple years and multiple rounds of antibiotics on a kid who's under the age of 10. But this is common and this is normal because I said the generation before says, hey, we got to go because they're going to get sick or hey, you know, it's a virus and you know, but you're going to get a secondary infection.

And so I feel like we've just really overdone it. on a lot of this antibiotic usage and it's really done a lot of damage to people's guts. I was just going to ask you, where do you start then?

Where do we, where do we start when you have like multiple rounds, James? Where do I start? I would recommend that they would, um, you know, follow our GI restoration program, similar with Dr.

Mitchell does, right? So we want to starve them, kill them and remove them. You know, these bad bugs that are there. It's like, uh, I would say it's like a neighborhood.

You can handle one or two bad bugs. You need them, but when they start to overgrow and multiply and dominate your intestinal tract is when you need to start to remove them.

We have things like candy kale and parakeel and, um, the IgG, you know, the, you know, to help remove, remove complete. And then we want to heal and seal that gut with things like GI complete.

And then we can restore it with probiotic, which has been your approach, Dr. Mitchell. Well, I actually kind of went way back even a little bit further into how the gut is supposed to start.

And, you know, it comes down to a lot of these, the way your, your development starts depends on how you were birthed. And so there's a, there's a huge difference in the.

the gut biome of an infant that's been vaginally birthed versus one who's been C-section. And again, sometimes you have to do C-sections, but that child is going to get its first exposure from a pretty much sterile gut going, getting exposure to bacteria.

And then if they're placed on the mom's breast, so they get breast milk is where we start to start our original. prebiotics and our probiotics. And so from very inception, some of these kids aren't getting as good a start as they could.

I noticed that this is another thing that with modern medicine, you see a lot more planned pregnancies instead of, you know, 3 a.m. emergency, you know, pregnancies, we got to do more inductions and things like that.

And again, sometimes you absolutely need it for the health and the safe of the mother, but a lot of times these kids aren't getting, you know, a fair, a fair shake or a fair start.

And so some of these species development that we start, we're supposed to have over a thousand different species, you know, in our, in our gut. One round of antibiotics can knock out three to 600 of these species after one round of antibiotics.

And so we're dramatically shifting the whole environment from the very beginning. And if you have a child who happens to have ear infections and they keep going to the doctor over and over and over, second round, you know, some of these people get down to under a hundred species of gut bugs from a thousand.

And so it's, it's a, it's a huge ecosystem. And you're right about the neighborhood. I've in the, in the talk, I use the rainforest and you know, you're going in with a weed killer for one invasive species, but you're knocking out all of the key players.

And so I think we have to go back to the basic of how did God start us? How was it supposed to be? How close can we get back to it? And then can we start to rebuild from there?

And so that's where I kind of took this was from the beginning and trying to bring it up to how do we get to a good rebuild. Yeah, that research is phenomenal.

I remember looking at that the first time and, you know, you said through the vaginal canal to the natural birth is where you get your first exposure, folks, to the lactobacillus acidophilus, right?

And then if the parents are smart enough and the mom commits to the breastfeeding, that's where you get your bifidobacterium. And we've seen a correlation with that versus all these allergies, asthma, you know, ear infections, you know, doing all the tubes in the ears.

all these antibiotics for the kids. So I love how you're starting there. However, of course, once it's done, it's done, right? So, you know, these are becoming more and more common, you know, this utilization.

So, of course, changing the diet. What are some of the other steps you're going to take? So I like to, I like to do a lot of diagnostic testing. I think it's that decision, you know, data-driven information that helps us.

And so when you're looking at somebody, we can look at this gut now in a lot better way than I think than traditional medical does, looking at the PCR, the genetic signatures of these different microbes and quantifying how many of these species are exponentially in there.

And so we can start to see, are we on an undergrowth where we've been on, you know, rounds and rounds of antibiotics and we can simply sometimes just go in there and reseed and feed, or is it We've completely changed the ecosystem and now we have this huge overgrowth of all these opportunistic or this dysbiotic or these autoimmune, you know, driving bacteria.

But a lot of this goes back again to that antibiotic usage. When we knocked out a lot of those good bacteria

anaerobic, they don't want, they grow without oxygen in a certain pH.

Well, when we went out there and wrecked the whole forest and we took out a lot of these bacteria, we changed the oxygen consumption and the environment.

And so that allowed a lot of bacteria that only thrive with oxygen to grow. And they're not as helpful and not as beneficial and can actually be causative, you know, caustic force, you know, with that imbalance.

And so when you, when you do some of these diagnostic tests, you can, you can, you know, I can say we can guess or we can test. And so I like to get a lot of information, you know, from that.

And so we'll, we'll look at the bacteria. We'll look for yeast. We'll look for parasites. We'll look for leaky gut permeability. We'll look for, you know, some digestive enzyme to look at bile acids.

And so you can really get a good idea where somebody's gut is based on these diagnostics. Yeah, that sounds like a great initial step there, right? I was just sitting here thinking as you were talking, I'm like, this doesn't sound like a chiropractor to me.

Like how in depth you go and all the systems that you're checking. You know, when you're working with someone and you move on from the gut, let's talk a little bit about the gut-brain connection and where you see all of what's gone on in our gut affecting our brains and why it's increasing so many of these neurodegenerative diseases.

Perfect. Well, the correlation that got this into it with leaky gut is when you have a leaky gut, permeability, you have a leaky blood brain barrier. And so these things happen together.

And so the brain isn't supposed to be interacting with general circulation. It's supposed to what I call like a, it's like a server. It should be behind double pane wall, you know, walls, wire proof, waterproof.

It is there to guard our server and to protect our main computer.

Diagnostics, Microbiome Testing, and Gut Restoration

And keep it from, you know, damage, but when that gut opens up because of bad food choices, bacteria, parasites, yeast, lifestyle, cortisol, all of that, the brain opens up.

And now a lot of the immune system that's 70% of our immune system is in our gut. When it shifts and it starts creating. more of these, you know, M1 type macrophages and all of these pro-inflammatory cytokines.

So you're going to see a lot of things like interleukin 6, IGF 1 beta, TNF alpha. These things aren't supposed to be that high, but now they're penetrating up into our brain.

And it's starting to cause the brain to react and become inflamed. And so the immune system of the brain becomes activated, trying to put out some of these fires.

And the byproduct of this is much like cholesterol is to a plaque. These irritants are why the body creates these plaques and up in the brain to try to put out the fire.

So you have to look at these two systems as identically running on, on the same time. And the problem is we're only going to one specialist for brain and we might go to one specialist for gut, or we might go to one specialist for this, but the whole system is melted is melt together.

Yeah, I was fascinated when I saw the research going back about 15 years, I was working with the group, we'll know chemists in New York, they're a pharmacy that's been there well over a hundred years, right?

So they kind of been one of the big leaders in doing this type of approach is functional medicine. And when I was

doing the research with Dr. Len for that presentation, that's when we first learned about the amount of dopamine in the gut versus the brain and serotonin, I was Blown away by it, right, because we thought primarily the brain.

Can you comment on that a little bit and what's been your research and what has it shown? Yeah, no, that's exactly right. They say 95% of the body's serotonin is made in the gut.

And so a lot of this serotonin production comes from bacteria, certain bacteria species that are serotonergic. And when you feed them the right prebiotic, they create a postbiotic product of serotonin.

And so we also- All of you out there who don't know what that is, that's the happy hormone. That's the feel-good hormone. It is the feel-good hormone, but it's also huge for signaling, for motility issues and for how the enteric nervous system works.

Now the vagal nerve, it's a hot buzzword. Everybody's talking about vagal nerve stimulators and vagal vagal vagal vagal and polyvagal theory. And I think it's great.

I think it's all wonderful. But what I don't think most people understand is how that vagal nerve impacts the gut. And mainly what it does, it's more of a sensory signaling than it is a motor commanding, you know, of the gut.

I think it's like 80, 20, 80% of that function of that, of that vagal nerve is gut. Well, the body has to use the serotonin and the GABA and the acetylcholine to be able to communicate with the brain.

And so the, we have gut serotonin, but then we have brain serotonin. And, and you, so it kind of gives us a, you know, an issue of, do we have low brain serotonin or do we have low gut serotonin or, or both?

And so when you go to a doctor, they're going to give you maybe an antidepressant, and they're going to say, hey, this is going to work on your brain, but it's also going to affect your gut.

And so that's why some people have constipation and diarrhea with that medication, because you're not just working on the brain, you're working on both.

So like I said, the system is interchanged from communication to inflammation to neurotransmitter production. But if you can get that gut better and working better to where it can make some of these neurotransmitters and some of these other post-biotics like B12 and specifically butyric acid.

And I'm sure, Jamie, you can answer a little bit more about how important butyrate is and the impact that it has on the brain. And that became a big part of the supplement formula that we're working on is because it comes up directly and affects neurotransmitter production from the brain.

So that gut doesn't have that right fuel. The brain doesn't have the right activity as well. Yeah. That's why what's our number one formulation, Christine?

Our number one GI complete. Yeah. And why is that? Because everything, you know, according to Socrates, 2000 years ago begins, health begins and ends in the gut.

And that's what we've been talking about today. Yeah, it's so comprehensive and therapeutic. It helps heal and seal the gut. It helps with the short chain fatty acid production, which is the fuel for these, you know, cells in the intestinal tract, you know, the 70 to 80% of the immune system living inside of that mucosal malt engulfed That gut associated lymphoid tissue really being, you know, being like a living breathing entity.

It's a complex environment. I quite like the patient that comes in. It's like your lawn, you know, if it's being played on all the time and eroded. You know, where it's at, eventually you got to rope it off, right?

You got to restrict it. You got to feed it. You got to provide the fertilizer, the grass, the water. That's where the GI complete is. It's the all-in-one food to help those mucosal cells build.

And when it's a muscle, when it builds back, then that VLI, that really thick and strong hair-like filter can exist. And I've learned from the research where you, Dr.

Mitchell and Dr. Len, is that Man, the bacteria eats away at the mucosalani and the bad bugs are fed by the sugar and the alcohol and the processed things.

So GI Complete has been our number one formula 10 years in a row. And the nice thing is the only thing you got to do is add into it would be like a probiotic and enzyme like Probezyme.

So when you talk about that mucosal lining and that environment being so complex, we need a formula like GI Complete that has eight ingredients, eight products in one to help heal and seal and regrow that intestinal tract.

And I got into this many years ago because I had an autoimmune condition. And I swear by the GI complete every day, I actually use it as a pre-workout with my super-creatine.

You know, it's funny you mentioned autoimmune. That's kind of the next layer too of why gut is so important. It may not just be IBS or irritable bowel or inflammatory bowel disease or something like that.

A big chunk of our immune system comes out of our gut and some of the information that we're getting is what happened to somebody's, you know, that allowed them to develop an autoimmune disease.

And, uh, I just had a patient this morning who 30 year old ICU nurse all of a sudden comes down with acute epilepsy and, and seizures and ticks. And she was fine before and all of a sudden she comes down and now she's on disability with all the stuff and she's on a plethora of medications.

But I brought up a condition called pandas and it's basically a reaction to a strep infection or post-antibiotic strep that somebody can next day wake up OCD, you know, obsessive compulsive and having ticks.

So another huge connection in looking at how the immune system and the gut are so interplayed. When that leaky gut permeability opens up and some of these, because they're not breaking down enzymes right, or they're taking in the wrong foods, some of these protein complexes that shouldn't be getting up into our system are getting up into our system.

And when they get presented to this antigen presenting cell, the body has to say, hey, that's not a group of amino acids that I want to use for rebuilding.

that's a foreign body. I need to make an antigen antibody complex to that molecule and then the body goes through what they call molecular mimicry. This group of five amino acids kind of looks like this group of five amino acids and then the immune system shifts and goes oh my god There's a whole bunch of these people housed up in my thyroid, send in SWAT, send in the fire, send into the police department and they started shooting up the house.

And so our whole immune system can get completely shifted into a dominance, what they call either TH1 or two or 17 or 22. So we have all these different ways that our immune system should be able to shift and move, but it gets slammed and stuck over in one of these zones because of these infections.

And nobody's going in there and looking for these infections. But if you can go in there and remove these infections and you can then down regulate that nervous system to stop that drive.

You might be able to remove some of these titers and remove some of that damage. So we don't just have to simply say, here, take Synthroid or take Lavoxel for the rest of your life.

Cause there's nothing else we can, we can do for you, but yeah, autoimmune is huge. So many ways I want to go right now, but we're running out of time.

Uh, but one thing I did want to come, I mean, you get to teach, help ourselves and things like Benny got and perilla

seeds. So it's really exciting.

Emotional Trauma, Serotonin, and Whole-Body Healing

There is an ingredient in. the GI complete that actually has a US patent on an autoimmune condition called rheumatoid arthritis. That is DMG. What is DMG, Christine?

Darn mighty good. Or dimethylglycine, depending on how you look at it. So these are therapeutic. These are research-based formulations with the PRTs, the patent research.

trademarked ingredients in GI Complete, obviously our top seller. Christine, can you comment briefly here? Because I want you to tie in the emotional.

So I'm here and Dr. Mitchell sharing personal about trauma and stress and things. And that's how I got into the autoimmune phase with acute stressful situation.

So can you comment on that the last few minutes? Sure. Well, Dr. Mitchell, first of all, I know we totally vibe when it comes to the emotional wellness of our patients, right?

And we talked a little bit about, you know, how serotonin is produced in the gut and how it also feeds the brain. And when we talk about the gut in particular, the reason why I think so many people have issues related to the gut, or that's where we have to start, is that's really our, you know, our third chakra, our third energy center in the body, right?

And that's where we talk about where our self-esteem is located, how we feel, you know, how we show up, you know, in the world. And it's also where not only we The stomach, you know, holds food and processes food, but it also holds emotions or processes emotions or doesn't.

So that's literally our core, right? The core of who we are. And that is usually the first place we get hit or we feel something, like something bad goes wrong and we feel like we get a punch in the gut, right?

Or there's something really important that we have to do. Maybe I've got to make a speech or get up in front of a whole bunch of people. I get butterflies in the stomach.

It's like our central response system. And you said something earlier about how much the nervous system is involved and how often we're in fight or flight.

And this is one of the reasons why our immune systems drop, right? Because we're constantly stressed out. And so not only are people taking these medications, like the antidepressants and things like that to try and help boost their serotonin and things.

But then it's also depleting other good things in the body that we really, really need. And so it can be a vicious cycle. Actually, Dr. Len and I tag teamed on a patient recently.

who was on antidepressants. I cleared up the huge emotional trauma that he was holding in his stomach, oh, for about 50 years. I mean, it was not a reason something.

And I was able to move that energy out, because I think we forget we're energetic beings, right? We're all these protons, neutrons, electrons in the electromagnetic field.

And I think we forget that because we're physical, we're corporal. But he was holding on to a trauma from the Vietnam War, where he was holding on for his entire troop, about 80 people.

in his gut. And because he wasn't able to heal, he'd gone through the whole medical system, the VA system, traditional. He's tried functional. He just didn't find the right person, I think, for a long time.

And his wife was desperate. So she reached out to me and said, look, I know this has to be emotional, or there has to be something emotional related to it or trauma related because she was a nurse.

And she's like, none of the doctors can figure out his phantom pain. So once I removed the, you know, the old trauma that was stuck in there and we brought it from the subconscious mind to the conscious mind, I engaged Dr.

Len and he, cause you know, we call him the gut guy. So he was having, I could tell the patient was having. breathing problems and he was labored breathing.

By the end of the session with me, at least he was breathing normally and he didn't need the oxygen, which was great, right? But I said, now we got to heal.

Now that we've taken that energy out, now we got to heal and seal your gut. So certainly Dr. Len put him on GI complete and Probezyme. But after reviewing his testing and figuring out what was this phantom pain, why did he have so much pain in his stomach and his thoracic area?

It was that he was on those antidepressants and traditional medicine talks about titrating up. So more is always better, right, to try and deal with pain.

Well, what that did is it was producing too much serotonin in his gut, which was what was causing the pain. So he had to reverse that by giving him GABA, right, to change how the brain reacts and sending those pain signals to get it to calm down.

And so he used our calm day to do that. But I was like, how could you produce more serotonin, like more happiness than you need? Does that even sound humanly possible?

But it's really interesting when you notice like all of those connections. And so just, I think remembering like that is the center of who we are. Sometimes people put on weight in their middle to protect themselves, right?

That's our core. So I think it's also bringing in those, you know, energetic, and emotional components when you're looking and treating someone. I'm just going to add real quick on what you're saying and you know what what it sounds like to me is I hear software, it's a software, it's a software problem you know because we're sometimes we're stuck in hard hardware and plumbing and things like that but you mentioned that you know the solar plexus well and I didn't get this until I had you know one of my mentors you know showed this to me You that solar plexus can get stuck up right in that diaphragm and that diaphragm can get contracted.

Well, that diaphragm is right there by the esophageal sphincter and the vagal nerve. And so because of that chronic stress, it creates a contraction within that diaphragm.

That thing can also perpetuate the emotional side of it. So. I think what we all kind of agree and we all have a different place that we can start with mechanical and chemical and genetic and electrical and emotional, but it's all one, one being.

And so keeping it open if, Hey, I'm not getting an under chemistry only, maybe I can try emotional. Hey, well, if emotional is not working, maybe I got a genetic reason that I'm not making neurotransmitters.

Hey, wait a minute, my guts not producing or too much or too, and I've lost balance, you know, there. And so I think that's the best part about, you know, being a functional provider and being open that you don't get stuck in just one lane and you can, you can stick and move and you can refer in and out of people that have like-mindedness to help treat these complex beings.

But I think that's a, it's a great way to, to, to close is to not forget about that, that, that software side. Wow, what an incredible… I love it, Dr.

D. Yeah. Just like a great concert, when it goes fast, you know it was an awesome one. So thanks, Dr. Mitchell.

Thanks, Christine. Doc, are you taking on new patients?

I am, always. There's, you know, you fix one, you go get 10 more. That's what I think. Well, if you want 10 more… I love it. And if people want to work with you…

Yeah, I think Jamie and I are both like, well, how did they find you? Well, I do have a website, it's NaturalHealthHouston.com. You can reach me out on Facebook and I think I'm on, I have a YouTube channel as well, but we can probably get an email out.

But I am located in Houston, Texas. So if you just look up Natural Health Houston, you'll find us. Well, Dr. D, you've been so informative and I feel like we've only just scratched the surface.

We're going to have to have a take two, I'm sure. I have a whole list to note for the next one or two podcasts. My favorite new expression from Dr. D is going to be me search.

Did you catch that? Instead of research, it's me search. I'm like, oh, I'm going to have to steal that little nugget. You can have it. Thank you. Well, thanks, Christine.

Well, Dr. D, we will definitely have to have you back on another podcast to finish this discussion. And I hope everybody will like, comment, and share this episode.

We shared a lot of really good information. And as you can tell, Dr. D likes to go deep into the research. So we will definitely dive in deep on another podcast.

Wow, fantastic. I got chills and so proud to have you both on the show today, and I appreciate all your time. If you're looking for an incredible doctor, you know, look up Dr.

Darren Mitchell, and you'll be on your way to improving you and making your world healthy. So thanks, everyone. Thanks for all the support, and God bless.

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