Introduction to Hidden Infections

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This is again, this idea of, you know, these vocal infections, these silent infections that are in key targeted areas in tissues that have a profound effect on the body.

I would say nine out of ten of my patients have a tonsil interference field. This is doctor talks. Welcome back to the conversation today. I have Doctor Christine Schaffner.

So happy to have you back. Oh, thank you so much, Lawrence. Always so fun to be in conversation. And you're a dear friend. And I'm glad we're doing this today. Me, too.

I think you've been on every one of my last six events. So thank you again for your, So let me introduce you for our audience who might not know you yet.

You're a board certified naturopathic doctor. You've helped thousands of people recover from chronic and complex illnesses. You host the Spectrum of Health podcast, you have online programs, and you have a clinic in Seattle where patients can see you in person.

And today we're going to talk about one of my very favorite topics, chronic hidden infections. And you're the perfect person to do this because we're going to be talking about the places where you don't expect hidden infections to be.

So we're going beyond the gut. We're going beyond the lungs. I mean, people think about you get in, you get respiratory infections in the lungs and you get, you know, gut infections and parasites and bacteria.

And, you know, people think of think of infections kind of being isolated to these places. But what they really go everywhere. Right? Christina. Yeah, yeah.

Those are just two of many, many places that are, you know, hotspots for the body. And, you know, as you mentioned, this is silent and hidden, you know, infections.

And so it's not so obvious. Yeah. So what we're going to do today is we're going to go over where they are. We're going to talk about signs that, you know, you have them.

We're going to go way beyond using prescriptions and supplements to remove infections. We're going to explore some other ways to help solve this. And before we get into, you know, where are these, infections are hidden, I think we need to explain and define one, really important concept.

And that's paleo morphism. So let's start there. Yeah, I love to and you know, I'm a natural Catholic doctor, but I've had the opportunity to also study what we're calling now in the US bio regulatory medicine that was also known as biological medicine that has these roots.

And in Germany, Switzerland, Austria. And, you know, they took ancient philosophies and principles and kind of a modern day lens.

Paleomorphism and Terrain Theory

And then they, you know, really have these kind of, I would say two really main, topics that allow me to help so many people because the, the premise of this system and again, any system that really helps people is that, the body is very intelligent and it has this self-regulating capacity and it knows how to heal.

And, you know, when we're in a role as a practitioner or a doctor, our job is to identify those hidden or obvious roadblocks as obstacles to allow the body to have the energy to do what we don't even know what the beginning of how you know what they do it.

And so, so again, but, by regulatory medicine, we'll talk a little bit, I think in this conversation probably about interference fields. You already have Doctor Moldovan about the mouth and, you know, also there are other focal infections, the tonsils, the sinuses, how scars interact in the body.

And then this idea of paleo morphism. So these are I or this rather is this idea that, you know we're talking more terrain theory and we're not talking germ theory.

So this kind of get us up to speed there because my job is not to kill every bug. And you know, the person's, body that is, you know, coming to see me.

And my job is to make them, adaptable, resilient that they can encounter stressor. And it doesn't become a long term stressor, chronic illness. And they can adapt and move on.

And so when we think about the terrain rather than germ theory, it's our job. It's more of an empowering version of kind of how to look at the body that we can strengthen and we can genetically optimize ourselves.

We can train toxicity, we can balance our immune system. There's many things we can do. And then when we encounter that stress, that toxicant, we don't have to have the same response as, you know, the standard American, you know, diet people would, you know, and so there's a lot more, that we we can modulate in that rather we get, you know, we get a virus or a bacteria, you know, we encounter it, we get the same textbook symptoms and everybody's doomed to it.

And you only need a vaccine to clear it and, you know, move on. That's germ theory. So polymorphism is this idea that that the actually the, you know, we have microbiomes within us and then we have, you know, these different and stealth pathogens that we can encounter and we can actually change the virulence, of either commensal flora or stealth pathogens based on environmental conditions.

So, this is maybe, the obvious kind of, like example I use. So there's a clear religious relationship with mercury toxicity in Canada. This is pretty well known.

A lot of it's known a lot in functional medicine. Now that, you know, when people have, really persistent candida overgrowth, you think, okay, they gotta change their diet, they gotta be on, like, no sugar forever.

They got to be on antifungals. And why is that person not getting better or even getting worse? So Candida is known to sequester mercury in its cell wall.

And so it might even have an adaptive, you know, kind of quality to be allowed to thrive in the body when there is a high load of mercury and people have had amalgam fillings of people been in a occupation with mercury exposure.

And if your dis on planet Earth or live on the west coast, you're inhaling mercury. You know in some way, you know, from coal burning. And so if you don't tend to the environmental burden of mercury in the body, you'll just be whack a mole with candida.

But if you have this kind of idea of like, okay, if I drain the mercury out of people off, I use key lation when appropriate. That I can be more successful with my Candida protocols.

There's also the caveat there. When people get worse with Candida treatment, there can be a neurotoxin, basically exposure with the release of mercury, you know, when you're going through that.

So so it's you know, we know this mousetrap as well. There's a mercury in strep connection in the throat especially. And so it's there's this dance this kind of dynamic conversation and dynamic aspect of how, you know, our body maintain maintains homeostasis, maintains the health of the ecosystem.

And so we look at relationships. And I would say for the purposes of our conversation, think of a morphism as this like relationship between, you know, toxicity and how that impacts your immune system and how that impacts your, ability to modulate your immune system, either clear or something and move on, or let something kind of be resonant and stay.

And parasites are polluting things as well. They'll sequester toxicity as well. So if you have a persistent, you know, parasitic infection, the same kind of idea holds.

So I hope that makes sense. Yeah. I want to unpack with some polymorphism just a little bit. Can you talk about it in the context of H. Pylori? I think that will help people wrap their minds around it.

Yeah, sure. It's really clear. Yeah H pylori I would say the same. You know H pylori is commensal flora, right. We know that we have bacteria in our, GI that reside, I think of H.

Pylori. You know, when you think about the environment or the terrain, why is it so persistent? I think it's multifactorial. I think the, you know, what I know to be true is when people actually have low stomach acid, so they're chronically stressed.

You know, they, you know, are rushing when they're eating. There's many things that have like slowed their digestive fire for a time.

Why Hidden Infections Matter

That lower esophageal sphincter doesn't get the signaling to close as tightly as it does between the stomach and the esophagus. So then there's a ligament laxity in that lower esophageal sphincter.

And then people can feel, you know, basically heartburn, which is related to age pylori or the conditions of the acidity of iron. And it's like making people think they have high acid.

But in the end, in fact, there's a lower acid environment allowing that commensal for it to then, you know, basically not have the brakes on it and to thrive and populate.

So that's kind of one example. I also really I love that you have tried to Moldovan on, the summit. And you know, just think of the oral microbiome is so interrelated to our GI tract.

So if you have upstream toxicity in your mouth, if you have periodontal disease or, you know, toxic mercury amalgam billions or cavitation have root canals, you're basically swallowing, toxicity and swallowing.

You know, this biotic flora that can also basically affect the, you know, not only the stomach and the upper GI, but also the, you know, the GI tract to, you know, the intestines and everything as well.

So that that would be my first my first thought. There. Okay. Thank you so much. So now that we've kind of laid the the foundation of where we're going to go and talk here, you know, looking for hidden infections or finding hidden infections in the body are such an important piece of the the discovery process when we're looking for root causes of chronic inflammation, health conditions, diagnoses, you know, even something we were talking before we jumped on the camera together is mast cell, for example.

You have to look for the underlying root causes of this. It's just not a matter of, you know, just treating mast cell.

There's other things that need to happen.

So can you explain why it's so important for us to do this piece that we look for hidden infections. Yeah. And absolutely. And you know, you're doing a great job in the summit educating like when people come to see me, I have this idea again.

I remove interference scales and understanding about play a morphism, you know, but I also kind of look at buckets of why people are sick. And it's again, exactly what your assessments about toxicants, you know, pathogens and trauma.

And when we go into that pathogen, you know, kind of bucket, this is also there's a relationship, as I mentioned, between toxicity and the immune system.

And also trauma and the immune system. And that, again, you know, is this play a morphic idea? And there is this ecosystem. So where, you know, we're made of microbiomes, microbiomes.

We have a virus, and we have 370 trillion viruses that, you know, AP genetically, dance with us and are part of our milieu, right. So we're not meant to be sterile like that's never been, you know, how nature intended that we have microbiomes in our brain, we have microbiomes in our lung and our sinuses and our, you know, in our tonsils and our skin and our, obviously, our God and our pelvic floor and our bladder.

You know, there are all these places where those microbiomes can become imbalance. So, again, great people are going to be talking about toxicity and trauma.

So within those microbiomes and in the stands for the immune system, why do we allow things like Lyme and co-infections to thrive or viruses and retroviruses or, parasitic infections or fungi and mold?

So what I have found is that there can be the, you know, usually, you know, when people come to us, it's not like they get sick overnight, right? They're, you know, but from preconception to how they were delivered to their family strains, the breastfeeding and vaccination to the stresses that they encounter to.

Okay, then you live in a house, you get a divorce and then you're sick. You know what I mean? It's kind of like this, you know, again, this, it happens over time.

And so, you know, what I, you know, want to share about that is that, oh, there is a slow weakening, like, with all of this stress. I mean, it's very, you know, stressful to be a human and, you know, on Mother Earth, you know, these days, there's so many things coming at us right?

Yeah. You know, they they're they subtly weaken us. You know, I, I was talking to a patient like, we have to spend a lot of money not to be poisoned in America these days, right.

And so that kind of slow poisoning also affects our immune system. So let's say, you know, somebody had, you know, strep throat like a ton, you know, and, you know, like grew up, had a bunch of strep throat.

And you know, over time their, you know, their buckets are filling in the other, you know, departments toxic in some trauma. Over time, the body becomes, you know, kind of almost can't even amount of response anymore in that tissue.

That tissue has been kind of overcome. And you know, and it becomes this kind of silent reservoir of these microbes that kind of hide out. This is again, this idea of, you know, these vocal infections, these silent infections that are in key targeted areas in tissues that have a profound effect on the body.

I would say nine out of ten of my patients have a tonsil interference field. And when you think about the tonsils within the spend them and in other tonsils. Yeah.

Please do. Yes. Yeah. So it just think about it. So you know chronic strep. You know if you've had chronic strapped if you've had a mono or EBV, if you had amalgams that are draining into the tonsils, you know, or any root canals or oral microbiome, you know, the the tonsils sit at the base of the diplomatic system and then at the top at top of the that associated lymphoid tissue.

So they're they're actually I kind of think the connection between the gut in the brain is in the tonsils. And so if you have this kind of, you know, unhealthy reservoir of tissue that's silent again, your body's not, you know, telling you have a sore throat anymore.

You're not getting, you know, all those acute inflammatory signals anymore. It's just kind of it's there, there is, an entry point into the brain, you know, from the tonsils.

The tonsils, can have there can be these kind of, you know, high ways for microbes to find themselves, you know, into the brain, through, the nerve highways and through the, you know, the perform plate.

So in the olfactory system. And that can enter into the, the brain that can actually, you know, be a source of microglia activation and all sorts of neurological symptoms.

Again, the tonsils can also be at the base of the lymphatic drainage. So, there are a couple routes for the lymphatic system to drain. So it's in the front of the neck around the jugular veins alongside that.

And then if you did a cross section of your head through the crimp, a foreign plate is shared and then the drainage around the tonsils. It's also, you know, when you think about the chances, think about there's five lymphatic tissues.

The wall layers ring, there's the adenoids, the palatine tonsils, the two tonsils, the lingual tonsils. And that whole ring can become, you know, really a reservoir.

Other Reservoirs: Sinuses, Vagus Nerve, Brain, Appendix, Bladder

So all of a sudden you have, you know, poor drainage, you know, through that route, and also migration, upstream as well, that can keep things inflamed.

And then when you think about, you know, swallowing and kind of, the tonsils become weaker and don't defend you as well, like, you know, the things you're encountering through your, food and through breathing, and then more and more things, travel down in the lymphatic networks in the gut and that can also perpetuate and keep your GI symptoms, you know, in a chronic state, because you have this, I think about interference fields as not only have these infections, but you have the bio toxin, bio toxins that they release that can kind of chronically poison the nerves.

The length and the, you know, circulatory system as well. So the tonsils are kind of like a big deal for us because, you know, who doesn't have a problem with, you know, all of those things when they come to, you know, somebody like ourselves, you know, to treat us.

And so that would be, you know, a really, you know, a big hit. And, I would say a vocal infection, a big hidden source of infection. And that, you know, we can treat, you know, there's different herbs that we can use, ozone, different tools, to regain the support there.

You know, the best kind of idea, like the clinical presentation around what I'm saying is the whole world of pandas and pandas like, that is kind of a technical name for, like, upregulated gut and brain inflammation when there is a reservoir of infection, in the tassler ring.

Okay. So one more, you know, as we're doing this first part of our interview here, I'd love to touch on some of those other places that could be reservoirs for infection.

So there's a few other hidden places. So let's unpack that before we go into you know, big solutions for this. So

what are the other places? Yeah. So just, since we're, you know, talking about, you know, the tonsils, we'll just go right to the sinuses.

I know in the world of mold, there is a lot of conversation around sinus dysbiosis. We have a whole microbiota and our, nasal passages. And, if that becomes out of balance, just like if it was in our gut, that can, be a source of, bio toxin activity as well.

And the sinuses, are very close to the brain, not only through the entry, right through the, critical foreign plate, but the sphenoid sinus is right near the pituitary.

And so, you know, when we think about chronic inflammatory response syndrome, that is a, a kind of like a pattern that we see, like with mold illness and Lyme and bio toxin illness.

And why I just mention that here is because, they kind of came, Doctor Shoemaker came up with an I idea that the bio toxins from sinus dysbiosis really affect the pituitary.

And that's why we see a lot of, antidiuretic hormone that is dysregulated. And so people who have this can be chronically thirsty or they get up to pee.

I know these patients because they come at my office every so often to go, you know, go try to, you know, our two hour visit. So there's a direct connection to the brain.

And when I'm, you know, I'm the big, you know, people come to help me, you know, on a lot of levels. But, you know, we talk about really helping the, lymphatics and the drainage and improving cognitive health.

And so if we have infection in the sinuses, in the tonsils, that's going to be, again, an area of stagnation and a source of, bio toxins that can keep the brain inflamed.

You know, you've already covered cavitation, but cavitation is a really big, that can also, poison the vagus nerve. So I think about, you know, vagus nerve toxicity and infection.

We know a lot of Lyme co-infections hang out in the vagus nerve. So people are talking about this side of anatomy. And they're just talking about, like, gargling and singing and all that stuff, which is awesome.

But, you know, why is the vagus nerve disrupted in the beginning with. And so I always look upstream and make sure my Pots patients and in the southern Army patients don't have a cavitation because think about you know, so we do have a talk here with doctor Mold often talking about cavitation, which are, little pockets in the jawbones just in case somebody is wondering what that is.

It's a little infected pocket in the jaw bone. Yeah. So if you, you know, you really should catch that interview with Doctor Moldovan. Because we talk about what to do about that.

So go ahead. Keep going. Christine. Yeah, I can totally. It's just this area of necrotic tissue that never heals when you get your tooth extracted. And that can be to the proximity.

It can, you know, some of these microbes can settle into the vagus nerve. Again. The thing is also the, circulatory system. And so then, you know, when you think about like, okay, what is vagus nerve toxicity and infection mean?

So if we have, you know, basically these toxicants and these pathogens starting to, accumulate in these, neurons that are, you know, make up this long, you know, nerve that has all these beautiful functions about, you know, engage in our parasympathetic activity and our heart and our lungs and our guy.

And if that communication highway between the gut in the brain and the brain of the gut is starting to be full of, you know, microbes, toxicants, there can be a slowing down of communication or even, you know, changes can even lead to, cell death over time.

And so that can, you know, be, a big area, I think of hidden infection, you know, especially if people have any autonomic issues, which most, most people with a chronic illness, do.

So, you know, we covered tonsils, we covered sinuses, we covered the vagus nerve. I'll just kind of. It goes without saying, but the brain has a microbiome.

And we know that a lot of the pathogens that you're talking about can get to the central nervous system, and they can affect, you know, electrical activity and signaling and neurotransmitter, release and affect people not only from, like, insomnia to brain fog to, depression, anxiety and the list goes on.

So, you know, a big part of our work is to try to clean up the entry. Now flow to the brain so that we can get some deeper treatments to the brain, to heal it.

And then I'll say, you know, I would say the next place, I mean, the appendix, you know, the cycle valve. We talked about Sibo all the time. And Sibo is obviously something that needs to be addressed and treated.

But when you think about why what's happening is the the bacteria from the large intestine are entering into the small intestine, from the large intestine into, the ilium, through this, valve, whenever there's kind of a, juncture, you know, where 1 in 1 part of the intestines and during the different part, there is a valve that kind of, is, entry way or can or it can close off an entry way.

And sometimes that valve can get stuck open. It can get stuck open or closed. And so that is right at the, same area as the appendix. And the appendix isn't the but is vestigial tissue that it really never matter.

We just evolved out of our use, and there are lots of thoughts that it can be a reservoir for probiotics. So when the body's gone through, you know, different periods of stress or antibiotic use that, that reservoir can be, you know, released, but also it can be a pocket of where, if that area is not like, again, that environment that becomes pretty, you know, the waters get muddy, right?

The Sibo is happening in the valves set up. And, you know, parasites can migrate there, fungi can migrate there. And there could be this low grade chronic appendicitis.

That's not acute, but is kind of like weakening and poisoning that area. So that's another one. And then I guess I, I have to say really quick. Yeah, I'm going to say this moment right now is my most delightful moment of this entire project.

Is that it is. I have such delight right now that the appendix could be a reservoir for probiotics. That just makes my heart so happy. I've never heard that before.

So it's like, this is what I'm going to think of every time I think of the appendix now, and I'm so that I still have my my samples. I don't have any more that at 21, but I have my little reservoir.

Okay, I, I know, I, I know well since the body is lies right. Yes, yes. So give us a couple more spots. Yeah, yeah. Chronic infection I would say. Let's talk about the bladder.

Right. So, there microbiomes in the bladder. I see a lot of patients with chronic UTIs and interstitial cystitis. And, you know, the interstitial societies can be like a mast cell issue.

But again, why are the mast cells so irritated? We always have to ask a question. And then chronic, UTIs can be when there are you know, some, you know, bacteria to make a home.

When you treat Lyme and co-infections, it's often known that skyrockets like the bladder. And so they can create biofilm communities. And biofilm is a big, you know, I would say a source of an infection because, you know, these microbes are intelligent and they can find ways to thrive within us.

And biofilm in the creation of biofilm can be a way for these, stealth pathogens to block the entryway of the white blood cells, getting, you know, through to help clear that.

So, the chronic UTI, you know, idea is, you know, there could be, like, a home base and, you know, not only bacteria, but, you know, I've seen parasites in the bladder.

And then there's a, there's a cool test called micro gen, and it, for people have chronic UTIs or interstitial cystitis. You can take a, a capture of your urine and do a PCR test and then Ruth's Chris, who's a wonderful nurse practitioner who did a lot of work for this community, she's retired, but she consults with Micro Jen, and she will talk to you about your patient and help you to do targeted antibiotic therapy again when it's appropriate.

Or herbal therapy to help resolve, chronic UTI, issues. So just a plug for that because that's helped a lot of my patients. And I, I could keep going.

Yeah, I know, I know, it's not for you. Okay. So we are coming to the end of the first part of this talk, but we're going to keep going. So, Doctor Schaffner, thank you so much for joining us today.

This has been extraordinary already, what we've learned about chronic infections in the body, where they're hiding in this next part of the talk, we're really going to get into when is it proper or when is it appropriate to kill.

When do we start a killing process? Do we really want to kill everything?

When to Treat and How to Prioritize

And and ways to do this beyond, you know, beyond the pills, beyond the supplements, what are some of the strategies? So to our audience, I hope you found our conversation thus far insightful and helpful.

I know I certainly have if you're a summit purchaser, stay right here. Because we're about to dive even deeper into this discussion with Doctor Schaffner.

If you're not, just click the button on this page to get access to a continuation of this conversation and all the others, and get the tools you need to reclaim your health.

If you're watching a continuation of my talk with Doctor Schaffner, thank you for being a valuable member of our community. And we're going to dive right back in.

Okay, doctor, doctor, what we we ended with, you know, this whole talk about all the places hidden infections are at. And then you said, well, do you want me to keep going?

So do you have a few more that, that we should unpack before we get into the kind of what do we do about this? Do we do we kill them straight off? Is there some stuff that needs to happen first?

What are the modalities to kill? Yeah, yeah. Yeah, totally. So I I'll maybe say two more things. Maybe. I mean, I don't know, I could go on. I'll, I'll love them together.

I'll, I'll do two more. The joint, you know, the, joint capsule can be, area where lining co-infections, thrive. Inspire kids and other co-infections have the ability to degrade collagen and also to upregulate our own MMP nine to go deeper into tissues and so they can traverse, you know, into joints, you know, throughout the fascia, into cerebrospinal fluid, other, you know, really collagen rich tissues like the heart and the eyes and so forth.

So the joints are a, you know, big one if you have are osteoarthritis or any type of arthritis, I'd highly encourage you to look into ozone therapy, and to consider getting your joints also needed and maybe following that up with regenerative medicine from exosomes to stem cells to save your joints.

So that could be an area. The other area, I guess would go hand in hand, I would say. So when we think about the

blood vessels, there's the and that they look like okay, legs.

And then there's the endothelium. So in the, in the blood vessels, it's well known that some infections like chlamydia, pneumonia or other, even Bartonella I believe, can live in the endothelium.

So they create biofilm communities within the lining of our blood vessels and live and thrive in this nutrient oxygen rich environment. So if you have any circulatory issues or cardiovascular issues, this could be the hidden infection.

The circulatory system has very much tied into the system. I'll kind of leave here. You know, the, you know, the a lot of the action that's happening in the body is kind of the space between the cells.

Right. And the space between the cells is the beginning of our lymphatics. And a lot of that fluid can strain into the lumbar. And then the lymphatics job is to, you know, drain and detoxify that lymph.

And what's getting removed in the waste. And also all the things that the bodies encounter and return it to the circulatory system on the way there, it's encountering lymph nodes and lymph organs to mount and, and, proper immune response to hidden invaders.

So when we think about, you know, chronically swollen lymph nodes, you know, or, or the spleen or the thymus, you know, actually the tonsils, are part of that lymphatic tissue as well.

So I would say, you know, your lymph nodes, your lymphatics are definitely an area where chronic infections can thrive. This is such a good talk so far.

Okay. So, so many questions and I only have you for so much time, so. Okay, I send is now everyone. Everyone's thinking right now. I mean, I want to kill these things.

I want these out of my body, like and so and so a lot of functional medicine just go straight for killing. And that creates a problem. So let's talk first.

Let's talk about when it's appropriate to kill when we start a killing plan. What needs to happen first before we can actually, safely help your immune system?

When I say, you know, we're killing stuff, we're also boosting the immune system to solve this, right? And then we can get into after that, some of the modalities that you can use beyond just pills and supplements and, and antibiotics.

Yeah. Yeah, absolutely. So, you know, when I kind of a patient comes to me and we approach, you know, like, okay, where do we begin? I just want to say, you know, you want to work with a provider that can help you prioritize, right?

Because there's so many things to think about. And you we can't solve them all at once. Right. So how do we, you know, really prioritize treatment? I employ not only my regular diagnostics and specialty labs.

Right. And then big believer by a resonance and bioenergetics and muscle testing that guides me a lot with my patients, but their principles and there is a quite a, you know, I would say roadmap.

So I, you know, want to identify first, you know, these areas of hidden infection. So I do that with these tools that I'm sharing. There's also like a clinical picture that you can often learn.

And you it's really a clinical diagnosis where these infections might be. So it's hidden infections. If there's a dental problem or if there's scars in the body that's actually.

Yeah I want to know that. Do I go after all that at once? Maybe not. But I definitely will inject scars with prochain. That's a neural therapy technique to open up the social network.

The lymphatics support the, you know, energy meridians and the nervous system so the body can regulate and heal. I often won't really do much with the patient if they still had mercury amalgams.

If they still had mercury amalgams, that will be the first thing I will try to get their body in a way, to work with a great biological dentist to get their amalgams out.

I find that when people have amalgams, they're very hard to treat. They can be quite reactive. You know, your hands are tied with detox agents and it just, I, I, I have a, I have a kind of a tenant there that I like to buy because I know I've tried to, you know, patients have taught me if I ignore that, I will just run into problems.

So kind of knowing where we are there. And then, I'm a big believer in draining the lymphatics and, you know, having lymphatic drainage on board. I think, that's a huge piece of the if the swamp isn't moving, it's going to be really hard to add anything to that system to work.

We're just going to get into, you know, more stagnation, more congestion, more flaring. So I think about that, I'm a big proponent of binders. We use a lot of software binaries and chlorella, you know, truffles at times and zeolites and modified citrus pectin and all that kind of stuff.

And binders are, very foundational because they're there to lay in the intestines when the bile releases not only, bile that helps to digest your food, but also where, you know, bails are out of elimination.

This is where a lot of our, you know, endogenous metabolic waste intoxicants are coming out of, but also a lot of these mycotoxins, bio toxins, they're toxicity.

And so we need the, you know, binders on board. I'm also a big proponent of supporting the organs of elimination. You kind of want to support everybody.

You know, most patients have kind of a weak link. So we're thinking about liver, gallbladder, colon, kidney, skin, lungs. In this day and age, you know, patients are becoming more and more sensitive.

And, we mentioned already the Marcellus. So the Marcellus, there's some underlying causes, but some people are so sensitive that you want to stabilize your Marcellus and get a good Marcellus stabilizer protocol so you can actually get and reach these root causes, and that your patient is and having rashes and reactions and, you know, you can't go deeper.

I'm a big believer, you know, also restoring blood flow and, you know, getting above that endothelium and, also the endothelial, like, okay, like a lot of people have very thick blood.

So they're it's full of, you know, spike protein and fiber and then, you know, all sorts of things. So I use enzymes and I like Baluchi and Sarah peptides and unchain our Tara cell and, you know, keep the the blood moving.

And then we also have to have a good sleeping environment. Right. So sleep is really important. It's kind of the chicken or the egg, but sleep is, you know, really critical for healing and repair in that lymphatic activity.

Beyond Pills: Drainage, Light, Sound, and Frequency

So I just kind of, you know, really try to create a safe sleeping location. That's, low in electro smog. So turn off your Wi-Fi. Don't bring in your, you know, electronics.

Try to minimize blue light. And then kind of like, you know, like, that's, like, foundational, like, those are, like the foundations. And then, you know, this can happen, you know, it's not a linear, it's dynamic.

You know, those are really important parts of my protocol. And then, you know, I use, you know, clinical signs and then, you know, symptoms and muscle testing to help prioritize.

You know, what what is the infection that we need to go after first? And, you know, often, you know, I know everybody wants, like, a cookie cutter way, but, you know, there is an inner relationship.

And so, and let's say parasites are coming up, you know, I'll use my parasite remedies. But within parasites are often Lyme and viruses, and they can be released through parasite treatment.

So we want to make sure, you know, we have, you know, support for the downfall of, you know, the after fall or after fall out. Yeah. Fall out of that.

And so, you know that or, you know, like, if we're going to be going after Candida, like I mentioned, we want to make sure we have some, you know, neurotoxicity mopping up so people don't get mercury, you know, toxic.

So I often layer, you know, I'm, I, I do have, you know, protocols that are pretty balanced. But I also layer, you know, okay. Is it parasite mode? Where are we going to after.

And then some type of herbal strategy to support the body with, you know, viral and Lyme and co-infections at the same time? That's very typical in my protocols.

So that's kind of how I think about things. And then again, we're not going to kill every bug, but can we get the body down the threshold, the microbial burden down, so the the immune system can take over.

And sometimes that's easier than others for individuals depending on, you know, what's going on with them. So that's good information. Okay. So, I know I'm just like, shooting questions at you.

I want to yeah, I want to squeeze as much out of me. I was like, yeah, what I love most is that like five minutes where we came on here, I'm like, so Christine, I have this idea of how I'd like this to go, are you game? And.

Yeah, this is Christine. Just you just follow and so. Okay, you're just pouring your brain out with no preparation whatsoever. Whatever you want to ask me, Laura, I love it.

So here's what I want to know. I want to go beyond the pill. I want to go beyond the supplements, beyond the, prescriptions, beyond this. There are many modalities that can help support your immune system and your body to clear.

Yes, infections. So, yes, the supplements are important. Yes. Sometimes prescriptions are important, but there's a lot left on the table by Western medicine for sure.

And also I'm going to say it most are functional medicine. So what are the extra things you can do. Right. Right. Yeah absolutely. So I'll kind of just start with some foundations.

So you know, I, I know you probably have people talking about this, but I'm a big proponent of, you know, clean filtered water. I love structured water.

I know there is a time for distilled water, but I'm a structured water person. Just makes a lot of sense with how we're wired to generate electricity and energy in the body.

So, filtered, structured, highly mineralized water, is really foundational. And then I would say, you know, that kind of circadian biology. So making sure that you don't have Elliot, you're not surrounded by LEDs in your, home environment that you're using, you know, more full spectrum lighting.

There is a light, you know, Incandescents are going away. And so there's a light called Chroma Lux, which is a health light that combines, incandescent and halogen, which is like a soft, warm glow.

My friend Julie Conway told me about this. She's a glass blower. And, you know, we're like, what are we going to do with that without incandescence? And so we I found those lights through.

We're going to go back to burning candles. Christine, I know I do now. We're going to do and we're going to go to bed when the sun goes down and we're going to get it up with the sun coming.

Yeah I know. Yeah. So and you're on to something. You know, because, you know, especially after sunset, you know, if we over pollute our bodies with blue light, that can be, you know, very confusing for our melatonin production and circadian rhythm.

So, you know, blue blockers at night, or you can get those kind of red amber lights at night that can help you kind of, support your body in that way.

You know, what you mentioned with the circadian biology, too? You know, the circadian biology, people like to go out in the morning and get that sunlight on your eyes and see the sun in your eyes at night.

And that is that is meaningful. So I would say like those are going to be foundational. I mean, I'm a big proponent of, you know, teaching people to have like a meditation or gratitude practice.

I think that's really important. You know, that the heart is the strongest electromagnetic field generator in the body. And if your heart's not aligned, your brain is not aligned in your field as an aligned.

You know, that's a whole other conversation. But I play the seed for you there. And then I, you know, I have a clinic here and we do a lots of exciting things, but I encourage people to have, like, their own home healing circuit.

And there's way more affordable, you know, than when I started ways to do this. So having some type of how are you going to eliminate on a regular basis because this is a marathon, not a sprint.

Is it that do you tolerate the sauna? It's going to be the sauna as it could be. The ionic foot, that facility to be coffee enemas. Is it going to be all three?

You know, those are great tools to have. Like how are you going to move your leg and for you going to have a power play it or a vibration plate, or you're going to have a stone body wash or the flow vibrate, you know, drain your lymph on a regular basis.

And then, you know, I love ozone. You know, I, they use a ton of ozone, when it's done at the right time, with the right support. Ozone is really great.

I use it, through UVB. Masato, heme ten pass and IBU. My clinic. However, you can get a home ozone generator and you can ozone your sinuses. You can put in in your ears, you can open it in water, you can do rectal or vaginal or even bladder ozone.

And ozone is three oxygens strung together. And it creates an oxidative burst to, not only kill pathogens, but also create a harmonic effect to upregulate your antioxidant pathway.

So it's this very longevity, you know, kind of, tool. And then, you know, you know, me, I love the sound and the light and the frequency in stuff. So, you know, sound, you can interact with that in lots of different ways, from mantras to humming to toning to listening to sound that's on YouTube now, to using tuning forks, you know, all of that.

I like the Weber technology for, sort of any, I can filter by rotation. I also like red light and infrared light. I like the solid state spot on. So those are cool things.

And then frequency. I'm, you know, I love hearing masses. Nice. And, the air scan. I'm a user of that, and, you know, there's just so many, you know, emerging tools in that space.

And you know what we're learning? I'll just kind of end on this. Is that, you know, your functional medicine will work, will work better if you combine, you know, all of what we're saying, you know, with those tools in the realm of, you know, sound, light, frequency, meditation, gratitude, intention.

That is really kind of the, beautiful blending of the worlds that, you know, really goes to the root causes that are even deeper than, you know, what we've shared. And it's it's amazing.

You know, we learn so much about the body. I'm always evolving my thought process. And my patients teach me every day. So I hope I hope this was helpful.

It was so good. I can't even wait to go back and listen to the good notes. I mean, I've got pages of notes I love. It's like Professor Christine is. Yeah, I love.

Where to Find Doctor Schaffner

Okay, so tell our audience where they can find you because they can come to see you, but you better get your amalgams out before you go. I'll help you with it if you need help.

So I'm in, Seattle, Washington, and my clinic is called Eminence Health. Dot com. Eminence means the divine within. So that it was an, a name that came to me.

And then, we did telemedicine. So depending on where you live, we have lots of ways to interact with you over zoom. And then I have a podcast, and, you know, I do all sorts of things.

So I, I really appreciate you having me on. You also have, your apothecary and your formulated some really beautiful. Thank you. Panicle supplements and creams and, you know, topicals that you can use to support lymph flow.

And I want to shout that out too. How do they find those products? Thank you, thank you. Yeah. We, I created a line for Galen that existed more or less.

And so that has been a passion of mine. And I have a website called, I apothecary like apothecary with an eye. Storycorp. And you can find out more information.

Yeah. What you've created is so lovely. So, Doctor Schaffner, thank you so much for pouring your love and light into this talk into this community. I know they can feel it, even though they weren't here with us in person.

They can feel how much you love humanity and what big work and heartfelt work that you're doing in the world. You're a mentor of mine, and I really appreciate you always being open and pouring your knowledge into me.

I've learned so much over the years, so thank you. That was very kind. Thank you very much. And thank you for the delightful comment about the appendix.

I'm like, I'll save you a paper on it. I'll go find one. I would love that. I would love that. And, for everyone watching, I hope you've loved this as much as I have.

And until next time, everyone take good care. Bye now. Thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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