Increase Your Energy Naturally With This 4-Step Process Transcript

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Introduction and Guest Welcome

Hi, I'm doctor Roger Murphy, and I am your host for the Freedom from Fibromyalgia Summit. And I welcome you today. And I want to welcome my next interview.

Doctor Evan Hurst. Doctor Evan Herz, also known as the energy MD, is a world renowned energy expert, bestselling author, and professional speaker. He is the creator of the energy M. D.

method, the science based, clinically proven four step process to increase energy naturally through his bestselling book, his podcast, and his international online help telehealth programs that can be accessed from everywhere, he has helped thousands of people around the world increase their energy and happiness.

He's been featured on TV, podcasts and summits, and he's not. When he's not in the office. Evan, can be found doing, singing musicals, dancing hip hop and playing basketball.

All this family. Evan, thanks so much for for being here. I really look forward to this interview. Thanks so much for having me on. Roger. Good to see you again.

Energy MDMA method. That sounds really interesting. So, big fan of your book Fix Your Fatigue. And, you've been on a few of my podcasts. You've been on some of the summits.

We've we've interacted before. We go way back. And I always admire your work. I always look forward to spending time with you. Well, tell me we're going to talk about energy.

Energy, trainers and fatigue and what people can do. I mean that's a that's a big one for fibro, I guess. You know, looking at the fibromyalgia community, number one, typically their complaint is pain.

Although I will tell you I have a lot of patients. I bet you do too. They will tell you, you know, Doctor Murphy, if I could just have more energy, I could deal with the pain.

Fatigue, Pain, and Energy Drain in Fibromyalgia

So sometimes, sometimes I miss the fatigue that really gives them the most issues, right? Absolutely. And, you know, there's nothing that's going to drain your energy more than being in pain.

I shouldn't say nothing. But, you know, it's a major, major cause. And a lot of that has to do with the fact that when you're in pain, it's causing, you know, the main mitigating of pain in the body are the adrenals.

Adrenals are producing cortisol, which is our main anti-inflammatory. And guess what? When that gets drained, then you have more inflammation, you have more pain, and when you have more pain, you're draining your adrenals more.

And consequently then you don't have that get up and go. In fact, it got up and went. And so then your energy is worse. And that's just contributing to the to the whole picture of of having fatigue and low energy.

Now, one of the things you mentioned in a past seminar podcast, I'm not sure I know I've heard it before and I've got it here, right here. But it says, how does someone know if you have an energy management issue?

What, what when you you've talked about that in the past, can you talk a little bit more about that today. Absolutely. So you know it really is subjective.

So a lot of people may think that they're getting older. And that's why they their energy is draining. And the reality is yes, there's part of that. But it's also this accumulation of things that happen throughout your life.

It's the accumulation of toxins that you're exposed to. It's it's mental, it's emotional. It's physical. And then consequently there are deficiencies that end up showing up.

So there are certain things that you're supposed to have in your body that you don't have as you get older due to the stress of life. And then there's things that you accumulate that are in your body that you're not supposed to have.

And so the reality is, is that, you know, if you have an energy management issue, if your energy isn't where it's supposed to be because that's the body or where you want it to be if you are, you know, surviving on caffeine, coffee, five hour energy, whatever it is, in order to get you through the day.

And that just doesn't feel right. And the reality is, is that your body is crying out for help. It's saying, hey, there's a problem here. Your energy is lower because you've got you've got a bigger issue.

And the reality is, is that if you don't deal with it now, you end up dealing with the later, because all the causes that we're going to be talking about today of fatigue are also the causes of heart attacks, heart disease, strokes, Alzheimer's, cancer, autoimmunity, you know, and so you deal with it now or you deal with a later and you might as well deal with it now.

Well, with fibro as you so well know, I mean, there's a lot of different causes to the fatigue. Poor sleep is a, you know, a big one for these folks. And then as you mentioned, pain.

I think pain is such an energy rather I mean, it's exhausting, right? I mean, you know, that from working to your patients. But the other thing we know with fibromyalgia is just genetically they don't have as many mitochondria.

Sometimes they're just born with less of those power plants. And the ones that they do have, oftentimes are dysfunctional. How when you're looking at your fibromyalgia patient, is there something that you're looking at?

Common Causes of Low Energy and Fatigue

You're thinking, you know, I bet this is one of the main triggers, or are you really kind of looking at it from a more broad perspective that, okay, whether it's fibromyalgia, but they can be anything?

Well, I would say that I always start broad, right. And then I narrow things in and I'll tell you what I feel like is like the most common things that I've seen.

But generally, you know, there's 38 different causes that we look at now. And everybody that we see who's got fibromyalgia, whether they got chronic fatigue, has a combination of 20 or more of those different causes.

Now, the main ones that we see in people who got fibromyalgia are mold and Bartonella, which is a particular infection that runs with Lyme and and can cause a lot of the same symptoms.

So generally it's, it's something that can get into the muscles that is causing the immune system to attack those muscles and cause pain and dysfunction at the site.

What are some of the other telltale signs of Bartonella? Because I know we've had this conversation before. It's something that three years ago, I was on a steep learning curve to learn about this, and you were one of the people that really helped me with that.

But what are some of the telltale signs when you're interviewing somebody or looking at their new patient paperwork that kind of clues you in? Oh, okay. And this is probably Bartonella.

So they need to have some of the following symptoms. Not all of them but some of them. And they're pretty unique. So generally there's pain on the bottom of the feet.

Now this can be burning pain. Or it can be just like a tenderness where you get out of bed in the morning and you just want to put your slippers on because your feet are sore.

Sometimes there's pain in the small joints of the hands and the feet. So, sometimes there's calf, there's cramping in some of the muscles, oftentimes in the calves and oftentimes at night.

So even if you can get rid of your calf cramps with magnesium or potassium or drinking more water, oftentimes that can also signify that Bartonella is at play.

Sometimes people have a hard time falling asleep or staying asleep. Sometimes they'll have anxiety or depression or both. And they can also have stretch marks, which are called Bartonella striae.

But it just looks like stretch marks where maybe you had some weight fluctuations, but you're like, you know, I didn't have that, or you've got it in weird spots where maybe it's in the flank or the back, or maybe it's in the back of the legs, on the breast.

Sometimes that's common as well. And then oftentimes these people are cold, and maybe even if their thyroid is optimized and at the highest, I highest dose that they can tolerate, they're still cold where they got cold hands, they got cold feet.

Sometimes they're misdiagnosed with Raynaud's syndrome or Raynaud's features. So those are generally the, the symptoms that we see now someone's watching this and there's going, yeah, check that that. Yep.

Got that cold hands. Cold feet. I picked my feet. Hurt when I get up in the morning, put my feet on the floor. I mean, it sounds like a classic fibromyalgia patient, which is so confusing both for most practitioners who are not trained as we are.

You know, we're not trained in this, but especially a conventional practitioner. What or if someone is suspicious that they have or now, obviously we want them to work with a functional, practitioner who knows what they're doing.

But what would be the tests that you would recommend that they would get? So even the CDC agrees that the that Bartonella and these Lyme type infections are actually should be clinical diagnoses.

So it really is based off the history based off the symptoms and not so much about the labs.

Bartonella Symptoms and Clinical Clues

And part of that has to do with the fact that if you're going to look at a serology, which is basically looking at the immune system's reaction to Bartonella, you're counting on the fact that your immune system, that you're going to get an accurate test and you're only going to get an accurate test if your immune system is functional, right?

You're looking at the immune system. You want to make sure it's functional. If you have heavy metals, chemicals, molds, infections, the immune system is going to be dysfunctional.

And consequently all bets are off when you're actually looking at the immune system's reaction to a particular infection. So whether it's the Western blot test or the Eliza test or any other serology test, the other potential test is a PCR test.

So this is looking at the DNA of the particular infection in this case Bartonella. It's a better test. But once again you have to make sure you have to get a good sample.

And so that means that you have to actually get a sample from the body where the infection is. So if the infection is

in the muscles, let's say, and you're checking it in the blood, you may not find anything.

If you're checking it in the urine you may not find anything. So with this test. And so I prefer if I am going to use a, test for Bartonella, which I haven't used in years, but I would use a urinary PCR test.

And people can get that through DNA connections, and that's connections with an ex. And that test is quite expensive. It's like $650 last I looked, but if you do, if you provoke it by either getting a lymph massage or exercising, which a lot of our folks can't do for, you know, 20, 30 minutes, that can actually push the infection into the bloodstream and then you can collect it in the urine.

Now, there is some crossover where maybe you're not actually collecting that bug. Maybe it's a different bug. But in reality, if you if you think that it is a particular infection based off of the history and symptoms, and then you take something for that infection that's pretty specific.

And you have you feel better or you feel worse, you know, you're on the right path because you're actually targeting, you're actually getting rid of, or you're affecting one of the infections that you're, that you're targeting.

And we do have a Bartonella quiz on our website. If anybody wants to check that out. Yeah. Go ahead, mention your website. Let's make sure we don't miss that.

I want to make sure that they they heard that I think that's important because I've kind of given up on the PCR test as well. It's expensive. And it's oftentimes you get it back, it's a false negative, and you're left thinking that that's not the case.

And then you do a challenge test, which you're talking about with some type of over-the-counter preparation that they take and they challenge and, and they have a reaction like a half timer reaction.

Then, you know, oh, okay, maybe we're on to something. So but what's your website. So they can see that survey. So it's energy MD method.com okay. And we'll mention that again okay.

So one of the questions I wrote down because I have just thinking about our conversation was why is it that it's so hard for most doctors really to track down the cause of low energy?

Now in the conventional medicine, it's really probably not even it's more treat the symptom, the symptom, the warning sign. Hey, you're tired, as you said, you're getting older.

You know, maybe you're just depressed. Or maybe we give you some Adderall or whatever to perk up. But in but in functional medicine, where we're really trained of trying to find underlying causes, I think a lot of times the intentions are good, but it kind of ends with, well, if it's not thyroid, if it's not adrenal, I'm not really sure what it is, you know.

And so why is it you think that some of our colleagues really kind of get, you know, goofed up trying to try to go to the next level and figure this thing out or the individual because it can be hard for the individual.

Right? Absolutely. So I think the challenge is there's a couple things. One is that there's a lot of different causes.

Testing for Bartonella and Other Hidden Causes

So it's exhaustive and it's a lot to do. And not everybody's trained in a number of these different things. So in order to address heavy metals, chemicals, molds, Lyme parasites, negative emotional patterns like you just need a ton of additional training.

And when you're practicing functional medicine, you can get 90% of the people better who walk through your door. Okay, I didn't want to, you know, work, help people with chronic fatigue like it chose me because I got fatigue and it lasted for five years, and I had to learn all this stuff in order to get myself out of it, because I couldn't find the help

that I needed from a bunch of functional medicine doctors.

So that's the issue. And so you've gone through that training. I've gone through additional training, like when you when you figure out all these different causes, that's actually when you can be more successful.

Because there's actually two reasons why people I find people aren't successful. They don't find all of their causes, and they don't realize that they've got like 20 or more of these causes and that everybody has a different 20 plus causes, and then they don't have a mentor with the accessibility that they need to hold their hand through that process and to help them with any bumps that pop up, because there's always bumps in the road.

I want to go back because I don't want to miss this. You mentioned mold, so you Bartonella and mold, the two ones you kind of see are classic for fibromyalgia.

It's really interesting because again, three years ago, I mean, I more was not even on the radar for me. I mean, I just didn't really think. I mean, every once in a while I would it was pretty obvious if you do a good questionnaire, good interview, you go, okay, well, I guess you had to move out of your house because you have more.

I guess maybe we'd better check you for mold. But now it seems like I'm inclined to check everybody for mold toxicity issues because it it seems like it's just across the board.

So many people are now having issues with mold. Yeah, that's a huge problem. I mean, unfortunately the numbers I keep hearing that they keep increasing.

It used to be that 50% of all buildings in first world countries have mold or water damage, and most of that is mold. And now I've heard like 60 and 75% some time.

So it's really hard to avoid living in a moldy environment. And the goal is to really do the best you can. And if your place, how bad is your place? And can it be remediated either with air filters and foggers and other things or or actual physical remediation?

Can you live in that space? And it's really a two step process where you have to clean up your environment, and then you have to clean up your body. So yeah, it's it's really pervasive and, and and a huge issue that we see as well, we check everybody for sure.

And I think that's one of the kind of interesting things I see. People have remediated their house or they've moved out. The five years later you test them, they still they still got all this toxins inside them. They've never thought, oh, I need to, I need to, you know, cleaned this out of me.

I clean my house. Hey, I want to ask you, what is the four step energy method? So let's get into that. Let's talk a little bit about that process. Yeah.

So the first step in that process is to figure out the causes that somebody has. So to assess now fortunately we found that of those 38 different causes, 75% of those can be determined by symptoms in history alone.

So when people join our program we have a workbook that work through step one just by checking off the symptoms that they have. And at the end of that, about an hour or so, they're going to know 75% of their causes.

And that's just incredibly powerful, because the rest of the time it's just matching up the treatment with the particular cause. Now there's five labs that we recommend the people get.

That's the other 25%. And then that flushes out the number of calls that they have. So that's what we need to figure out. I had also mentioned before that everybody who has fatigue and fibromyalgia has 20 plus of these causes.

So everybody's causes are going to be different. You know, Joe Schmo and Sally Sue, we're going to have very different causes. Yeah. It's kind of like peeling away the layers of the onion.

I mean, you just it seems like there's one layer of dysfunction after the next, after the next. And if you don't do that, you're left with these potential triggers that can be, aggravated in times of stress.

And then they set off, you think you've cleaned everything up, and then they get under stress and then they have a fibro flare. Do you mind sharing what those five labs are that you like to, to look at?

Yeah, absolutely. So heavy metals. Yeah. Chemicals. And so toxic metals from doctors.

The Four-Step Energy Method

Data is the heavy metals. Chemicals is GPL talks from, Great Plains labs. Yeah. Molds is GPL. The Michael talks tester also from Great Plains Labs. I like the 6 or 812.

So that's actually a serology test, but it looks for a whole bunch of different things. Oftentimes it can catch some things that haven't been tested for before.

Let's see. And a stool test to the GI map test. So looking at when you're looking at these test and they come back and they're all negative, what does that tell you there.

Because that's just that's a common thing. You see see people come back, they get all the testing. And then they're kind of made to believe that it's all in their head.

But you can have negative tests and still have a bunch of things that you just and test for. Yeah, yeah. And found them yet. Absolutely. Or it could be one of these other causes.

So it could be that your drainage pathways are clogged you know. So for all the people we see fatigue, fibromyalgia, whomever, they are going to have clogged pathways by virtue of just having an issue.

And so consequently, that's, you know, clogged lymph and liver and kidney and lymph in the brain and intestines and gallbladder. So that's what we do in step three when wherever we get back to the four step process, is that we open up those drainage pathways so we can remove these toxins.

But in the lab tests, sometimes you're not going to see stuff in the urine. If all those pathways are clogged and you can't get the stuff out of the body.

So you have to open those pathways first, and then you can repeat the lab test later. The other reason could be because they have a different cause. So maybe they have an infection, maybe they got parasites plus Lyme infection.

And then the negative emotional patterns or trauma. You know, maybe that's the trifecta for them. Do you ever use the organic acid test from Great Plains?

Use two of their tests, but you use the organic acid test? I don't anymore. And the reason why is because I found that every time I got the organic acid test, I ended up getting one of these other ones.

Because the organic acid test is an indirect look at, you know, heavy metals and chemicals and molds and mitochondria. And so it's a great test if you're just looking at, a lot of different things and you just want to get kind of like a snapshot, but I wouldn't necessarily cheat on it.

I want to use it to kind of track things. So I found, okay, I'm seeing these things, I'm going to get these tests. And then it was just like, all right, well, let's save 300 bucks and just get these.

Yeah, I think it's a good you know, gives you that overview. And then, you know, once you get over, you kind of get an idea. Here's the, you know, one mile view down where you can see everything.

Then you really have to laser in for sure. All right. Well, let's go back. Is that through your curve. Let's go back and do the four steps. So tell me tell me those four steps on that and that process.

Sure. So first step is assessing the causes. Yeah. And then once we got those then the second step is to replace the deficiencies. So I should say then when we're looking at all these different causes we want to divide them up into deficiencies.

These are things that are not in the body that are supposed to be there. And toxicities these are things that are in the body that aren't supposed to be there.

And deficiencies are things like hormones and mitochondria and, vitamins and minerals and lifestyle habits and neurotransmitters. So in step two, we're boosting those things up.

Now the reality is of this process, if you have engaged it already in the talk with the toxicities, that's those are the most important things. The heavy metals, the chemicals, the molds, the infections, the allergies, the negative emotional patterns, the electromagnetic fields.

Those will cause 80% of these deficiencies. So people will say, well, then why don't we do that in step two? And the reality is, is that step two and step three are actually setting you up for success with step four.

Because, right, how many people have we heard their stories where they're like, I tried to go after heavy metals or chemicals or molds or infections, and I felt worse.

And I went back six months and, you know, not seeing that doctor again. And so we want to set you up for success by making you as resilient as possible, by boosting your adrenals and your mitochondria and your thyroid, etc..

We call those the big three to significantly give you a little bit of a boost in energy and make you more resilient, so that when we do remove the toxins in step four, you're going to be more successful.

And then in step three, we're opening those drainage pathways like I talked about. You know, if you're trying to grab heavy metals and chemicals and molds in the tissues and put them into the bloodstream and get them out of the body or the lymph and get them out of the body, guess what?

You're not going anywhere unless you've already opened up those drainage pathways in step three. So what are the supplements that you recommend to help with the drainage?

So I'm a fan of the cell core products and the Byron White formulas. Those are really the the main lines that I like to use, at least for drainage pathways.

It's really great also for people who are more sensitive and people who've got mast cell activation and etc. with the Byron White formulas, we can use them topically and people will get an absorbed, about 25% absorption rate.

But they they're not triggered in the way that they would be because they're not putting it orally. You know, I think they're really in it. It depends on who you're working with and what what you're comfortable with doing.

Drainage Support and Detox Preparation

My protocol has some similarities with yours, but obviously has some differences. You've been incredibly successful. I've been incredibly successful over the years.

I think it's a big part of that is just being in the trenches with so many people that you know what needs to be done and how to do it, and if someone falls outside of that, then you know how to address that.

It drives me crazy to hear my fibro patients go in. Someone tell them, oh yeah, you just we just need to get you on hormone placement therapy or we just you just need tequila.

You just need to do, ozone therapy or whatever they are. You need to get all your amalgams taken out. That is the worst thing that you could do initially because you can't handle it.

It's just too much. It's too stressful. There's too much blowback. I mean, most of these individuals just are pretty brittle. By the time they you know, come to see us.

They've tried a lot of things, been sick for a while, and I really think the worst thing you can do is be overly aggressive and certainly trying to do things like, you know, detox them without prepping them to be able to handle that.

Couldn't agree more. Well, tell me, so in your practice, do you have a diet that you think is best for helping these individuals? Is there one particular diet that you like more than others?

So I think that the ketogenic diet is probably the best diet out there. However, it's really hard to do. And so and and to do it sustainably for a long period of time, I don't think is necessarily the best thing for the body.

So it really we try to get close to that, but it's more of a paleo diet that we're recommending meat and vegetables low, low to no sugars, no grains, obviously no gluten, no dairy, and low on fruit as well.

And then people who are have mass activation syndrome, we're doing low histamine. And that seems to work well for them. Yeah. Did you find a lot of your, your, patients have a problem with gluten?

Absolutely. And a lot of them don't realize that they do. And a lot of them don't notice a difference. But I tell them, okay, you got you got 20 plus different causes and it's like 20, you got 20 nails in the bottom of your foot and gluten is one of them.

You're not going to notice that gluten is an issue until we get half or more of those nails out. Unless we're until we're addressing a whole bunch of things.

But the reality is, is that you're going to get there faster when you do, in fact, remove that gluten nail. Yeah. So it's a combination of things for sure.

You know, I mean, I mean, it isn't the dent diet is, you know, I tell my patients, if I were the only way to overcome fiber marriages to get healthy. And that sounds incredibly simplistic, but it's not.

As you've already mentioned, there's 38 causes of fatigue alone. So where do you where do you start? But you can't get healthy without changing your diet to become healthy?

I mean, you're not you have to have a healthy diet eventually. You just you can't get around that. However, that's kind of a long game, right? The short game is to really use nutraceuticals things over the counter when, when it's appropriate, you know, very judicious use of prescription medications.

And I agree with you about the keto diet, I think can be a game changer for these folks, but it's very hard to stay on that dot. And so most of my patients will then transition to the paleo diet and the the, you know, the research is pretty I think it's pretty blatantly clear that those with fibromyalgia and chronic syndrome in particular, really just don't do well on carbohydrates.

A lot of carbohydrates, especially simple carbohydrates. Right. I don't know about you. They have a lot of patients who have yeast overgrowth.

Diet, Gluten, and Metabolic Support

That's kind of in the background that we kind of pick up as we're going through these all these different things. Well, here's a question I want to ask you.

I've asked this to some of the other, interview, guests. Why do you think someone's goes along through life? And I know they answer. We've talked about this before.

Why does someone go through? They're doing great. You're going to. Family aches and pains are starting to get a little run down the load, or they're in their 40s.

Then all of a sudden they just they're they're down. And and previously they never had a food allergy, never had seasonal allergies, never had problems with mold.

But it just seems like somebody open Pandora's box for this person and they've got everything. Why is that? What's what happens to these poor people? Yeah.

So people generally think like you're saying is that, oh, it was this thing or I was fine until this date. And the reality is, is that you've been building up toxins your entire life.

You know, my story was I came out of the womb, and most people do already having a whole bunch of toxins. And then I ate gluten and dairy and I was constipated where I pooped once a week for the first 25 years of my life.

Didn't know any different. Used to walk around with the plunger because I clogged so many toilets. It was not pretty. That's too much information for our audience.

But then I. I grew up in new Jersey, got bitten by ticks, got Epstein-Barr virus from kissing somebody. Lived in a place that had mold. I had mercury fillings.

I ate tuna fish tons when I was growing up. So I got even more mercury. Got formaldehyde poisoning from gross anatomy lab when I was in medical school, you know, so the hits just kept coming, and then I was, you know, I was stressed.

I went through residency, didn't sleep, you know, met my wife. We swapped bugs. She got chronic fatigue. I was okay for a couple years, but then I got chronic fatigue.

And that's super common for couples to go through that sort of experience where they get together, and then over time, they end up getting sick because they're swapping bugs sometimes. And I had a lot of international travel.

I got parasites that way. She went to Costa Rica, got a parasite. I went to India, got a parasite, you know, so it just accumulates until all of a sudden there's a stressful event where you're like, oh my gosh, that was the event.

And the reality was that was the straw that broke the camel's back. Yeah. And that's what I say about fibromyalgia. There's a stressor that comes along that's the straw that breaks the camel's back.

But it's been there. It's been building years of a toxic relationship, toxic work environment, heavy metal toxicity, environmental toxins, pollutants, poor diet, center lifestyle, too much stress.

Eventually it catches up with you. But it's there. The inflammation, the smoldering, dysfunctional, poor health is there. It just hasn't raised this ugly head yet.

But when it does, it's not as simple as. And that's what's so challenging about row is, you know, you can't just take a pill, you can't take lyric and you down with it.

I mean, it's really is it's a complicated process to figure out what are the underlying triggers of these different symptoms. And there's different triggers that are creating different symptoms.

So something like low serotonin can be having a low pain threshold. So you have more pain low norepinephrine another brain chemical could be could be causing the low energy.

So it's a multitude of things have got to really be unwound, so to speak, before we can finally get them to, you know, to resolve these things. And they're stable, but that can take quite a bit of effort to do that.

Absolutely. You know, we recently changed the length of all of our programs from six months to 12 months, because that's what we were seeing is that, yeah, we had people who, you know, felt better at six months.

But if you want, you know, complete resolution or near complete resolution, we were finding that it took longer than that. Now there are some people where they need 24, 36 months, you know, like so it really is a journey.

Why Symptoms Appear Later in Life

And people need to realize that it's a marathon. It's not a sprint. And what you're looking for is you're looking for a mentor who will walk this path with you.

Well, I think you look for a mentor, but you're looking for somebody that really has had some experience in this specialized field. I think fibromyalgia is such a unique, illness that if you're working with just a general functional practitioner who may be the greatest functional medicine practitioner out there, he or she, if they haven't really worked with a lot of fibro folks, like like you have like I have, you know, I think you're you're probably not going to be as success, probably not going to be as successful as you could be.

And that raises a bit of a challenge to you, because there's just not a lot of folks that really specialize in fibro or private syndrome, you know, energy, deficits, like like you and I do, do you feel like we're going to have an explosion of new cases of chronic fatigue and fibromyalgia based on what we're seeing with the long hauler, numbers, the percentages?

Yeah, unfortunately, yeah. The numbers are just astronomical. You know, they're upwards of 30%. For everybody who ends up getting Covid, mild Covid, right?

If you've had more than five symptoms and it's very likely you're going to get persistent symptoms, you know, and for people who went into the hospital, the numbers are more like 75% of those people end up with persistent symptoms.

So unfortunately. And then also the, you know, vaccine injuries we're seeing as well. So spike protein illness. Yeah. It's it's unfortunate but we're seeing yeah we're seeing a lot more of them.

Well, I would like to dive a lot more deeper, but we don't have time. So I want to make sure that you mentioned your website. I want them to check that that the survey you mentioned.

I think that with that little questionnaire. And then I really want to encourage everybody to get, Doctor Evan's book, Fix Your Fatigue. It's a great book.

It's, it's it's written in a way that you can understand it, but but it's a lot of meat and potatoes in there too. So I think it's well done. But what.

Tell me the website again Evan. It is energy MD method.com. And so that's MD as in as in medical D and doctor. And then they're looking for what now they're looking at.

Yeah. Scroll to the bottom and you'll see it says Bartonella quiz. Do you have these symptoms. And you can go ahead and take it. All right. Well thank you so much.

Long COVID, Spike Protein Illness, and Closing Remarks

So this we heard a little bit about what are the causes for for fatigue. We heard about why it's so hard to find them 38 different ones. You said, 75% of them.

I think you said you can kind of kind of figure it out on a questionnaire. You've been doing this for so long. And that's kind of how I feel like it's with the fibro.

I know within seconds of looking at the questionnaire, do you don't have it. And then you went into detail about the testing, which I thought was very helpful for people to hear that.

That was really great. I think people really go off on, a tangent. You know, they they get all this testing done that may or may not be useful. You know, I spent a lot of money and I think we can we can really hone in on what you what you share with us.

I think that was really very helpful. And then you shared with us a little bit about, kind of about what your practice in the diet. So I think, you know, there's a lot of clinical pearls here today.

I think, I think there's some information people can take and run with it. But I would encourage you check out, Evan's website and the questionnaire and definitely get his book.

Evan, thank you so much for being part of this summit. Thanks so much for having me on. Good to see you.