Atypical Responses To Covid: The Intersection of Mast Cell Activation Syndrome and Long Haul Transcript

(Transcripts are generated by AI and may contain errors)

Introduction to Mast Cells and Long Haul

– Welcome to this episode of the long haul chronic fatigue summit. I'm so happy to have with me today, my friend and colleague Beth O'Hara of mast cell 360 Beth welcome. I'm so happy you're here.

– It's a pleasure to be here with you. I'm so excited to do this because I think what we're going to talk about this role with mast cells has been one of the real under recognized and missing pieces. And what's hap people with long haul syndrome.

– I definitely agree with you. I think it's something that that occurs with people who have complex chronic illness in general. We see it in our patients who have post infectious illnesses and I think that covid is no uh long haul is no different. You know, In fact there's research which we were just talking about prior to this so well be diving into that as well.

But let's start by having you introduced yourself to our audience. – I'm Beth O'Hara and the founder of mast cell 360 this is the practice I wish it existed when I was really ill dealing with mast cell activation, mall toxicity and tick borne illness is chronic fatigue and I was debilitated and now we provide all of these resources online for people.

We have have self paced courses and we have a clinic all focused on mast cell activation syndrome and serving that population. And it's been interesting the uptick of people reaching out or coming into the practice or accessing resources and using our courses that have gone through long hauler and what I'm so excited about sharing today is the successes that they're getting in. Paying attention to the mass cell side of this because I think this is the big I don't know that we're dealing with viral anymore.

When we're at the tail end of the long haulers I think we're dealing with really dis regulated immune system that needs to be settled down and I can talk about what we're seeing in terms of who is developing long haulers at least just anecdotally observation who's developing long haulers? Who is not. – It's fantastic and I agree with you.

I think it is post viral. I think the virus has has has gone away but it's stirred up so much inflammation and the immune dis regulation. It's actually causing pandemonium in the immune system and cell activation is a huge part of that. Thank you for the work you're doing around this. It's wonderful wonderful work.

So I think that a lot of people watching might not know yet what mast cells are what mast cell activation syndrome is. So Beth will you start by by guiding them tell them what mast cells are. – Yes and I'll link it into why.

What Mast Cells Do in the Body

Why do we care if we're dealing with long haulers? Mast cells are one of the front line sensing defending cells of the immune system and what are they sensing and defending us from?

Well sensing they're sensing viruses, bacteria molds. Candida, parasites they're also sensing for things like toxins. Chemical toxins, mold toxins even E. M. F. They register and a myriad of other things we don't have time to fit into. There, it's quite amazing how versatile these cells are and what they do in our bodies and they're one of the most complex cells in the body. If not probably I can't say the most complex because I can't prove that right now. But I think they're probably one of the top most complex and they have over 200 receptors outside of them.

So they're sensing all kinds of even medications. They sense medications. So this is important and I want to come back to so I want people to tuck this in the back of their head.

They are sensing every neuro transmitter and they're at every ending, every nerve ending and along every nerve sheath. So literally sensing every thought that we have and what their if we just boil it down they're looking for in a nutshell, are we safe? Are we in danger?

And then based on what's happening inside our body or outside of our body, how do we respond to that and protect ourselves? They are found in every tissue in the body except the retina, even in the brain. So we think about this every tissue so in our brain, through our entire nervous system actually the interface between the nervous system, the rest of the body.

They're the interface for the the immune system and and the rest of the body in many ways the hormone system, they're one of the major interfaces. And they're in every organ. So we're talking about the thyroid, we're talking about there in the lungs, there in the heart, there in the liver, the kidneys, they're in the bladder, they are um in the whole G.

I. Tract very high numbers from the mouth down the esophagus through the intestines. So that's important to know as we're talking about what's happening for people in long hauler and there's variety of symptoms that they're getting and why these cases are showing up so differently in different people.

Then inside these mast cells they have over 1000 mediators. So these are chemicals that they can release either selectively depending on what's going on or if they're really really um dis regulated. They can release them all at once.

Total degranulation and that can trigger things like anaphylaxis. So these mass cells, the role in what we're talking about today is to monitor for viruses and pathogens one of their major roles and then to produce inflammation to protect us. So we think about when we first start to get sick, we get um you know, you get that swelling in your sinuses, you get all this post nasal drip and um we can start coughing sneezing.

It's not actually for people who are not aware of this, the virus, causing that this union system to protect us. And then in normal mass cell functioning.

They should release these inflammatory mediators and calm back down. And the most common one that people know is histamine people think about anti histamines. But then also they are a major player.

They're not the only player but a major player in sight of kinds that's become a household name or household word. They release prostaglandins, inner Lukens, all these different types of chemicals and in normal functioning.

That's very protective and helpful. What happens is if we have an onslaught of too much uh too much load from toxins, too much load from pathogens and or stressors which could include trauma. Could include just your daily.

I'm trying to get through rush hour traffic and work a stressful job, get home and get three dinner on the table for two or three kids and get their homework done and get to bed and I don't have a minute to breathe all day long.

That's a major stressor. There's all of us are living now in this environment of this toxic soup. We have so much toxin load in our environment. We have chemical toxins molds at this epidemic level. So I'm transitioning into why people are getting these mast cell issues. We were constantly bombarded by E.

M. Fs. We're eating all these packaged processed foods. So we're living in ways that we never lived in before in human history. All it takes is that straw on the camel's back to tip somebody into mass. All this regulation and that's what we call mast cell activation syndrome. – Thank you.

That is I love that that response because it encompasses everything that we're exposed to infections. It's not just SARS COv 2, it's many other viruses, most like you say parasites, environmental toxins and the stress the day to day stress.

And the thing is that people used to think and I think a lot a lot of them still do that that mast cells are about

modulating just your allergic response.

And then and then that's why you might have heard of. People might often say I don't have mast cell activation syndrome because I don't have a runny nose.

Research Linking Mast Cells to Long COVID

But as you said the mast cells are everywhere, literally all over our tissues and so then people get symptoms in all of these places and I think that they're contributing these symptoms are contributing to to long haul that in addition to all these triggers that you just discussed the onslaught of chemicals toxins, infections and it just I'm I love the way you just wrap that up. So so so neatly right for for our audience to understand cause I think a lot of people listening to the summit might not know much about this yet because their their newly sick in this pandemic.

Whereas the people who have been listening to us have been sick for a long time. And so this I think is a lot of this is news to many people. So this is an important conversation. Thank you. – When the other reason I really want people to pay attention to what we're gonna talk about today and why I think this is it can be a game changer. Is that mast cell activation syndrome already before the pandemic was one of the most under recognized conditions facing the general population. The population studies were showing up to 17% of the general population dealing with mass activation syndrome and had most of them had no idea that's what they're dealing with.

We don't have a repeat study population study, post Covid or post pandemic. Not that we're post pandemic entirely, but we don't have an updated one. But we have a lot of studies validating that this is this virus is triggering mass cells. And these studies there was in 2021 the first published Theory study I think 2020 on hyper inflammation and muscles and covid. So that was published by Larry Afrin Weinstock and others. They just re upped that and they did an updated study in 2021 Dr. Theo Harrods has linked mast cell activation with cardiovascular symptoms with cytokine storms with brain fog and with the lung conditions that are going on.

And I solidly think this is my opinion. But I do think the research is going to play out that we now have a much higher percent of people dealing with mass cell activation syndrome now that we've got this new virus that we're facing that we've not ever had to develop antibodies to before. And that's quite significant because addressing the mast cells is one of the major pieces In terms of being able to settle this down. And there was even I found a study of when preparing for this, that was just published in October of this of 2022 and um it was on path of physiology of post covid syndromes, which is another word for long hauler syndrome, talking about this dis regulated release of this inflammation from the mast cells producing this huge variety of symptoms people can have in long haulers and I just want to validate their studies showing that study came out on um showing that it just regulates hormones.

And we've seen all these women who have started menstruating again, who were in menopause, we've seen these different types of things and they've been told that they were crazy and that couldn't happen.

And I just want to let people know. Well the research keeps coming out validating what people are experiencing. – Thank you for bringing this up and um you will provide the audience with the links which I'm very happy about as well.

So thank you. It does validate everything we've been doing right because prior to this pandemic. You and I have been working with people who have complex chronic illness and and there was some research, but just not enough. And so we had hypotheses many of them and we're seeing these hypotheses actually come out in the papers about infections, post infection states. So it's it's you know, I'd say a silver lining to this pandemic is all of the research that's coming out and helping us understand complex chronic illness from an immunological point of view and and from the point of view of understanding mast cell activation syndrome even write the research was just so small and now it's it's out there and it is validating.

– So it's huge and so and people who, well I want to back up for a minute and just say that when I heard about the virus and being in Wuhan, I knew at that point we were in trouble and I know many of us were watching that even they were saying oh well it's not going to move out of China. Well I knew that we needed to keep an eye on this and as soon as it spread through china, I started seeing what can I find out about this because I knew it was

coming globally And I was reading everything I get my hands on and spending about 20 hours a weekend in my off time.

And the reason was because we work with in our clinic like your clinic such a severely ill population and I was terrified that we were going to lose half of the population. It really was terrified.

And that didn't play out fortunately, We and and we have just to give people context. We have people who come in for for our clinic, we have a consulting clinic that works remotely across the country.

And we were having people coming in that they couldn't drink water. They were in wheel, you know, wheelchair 20 seizures a day. And our job is to look at what's been missing and turn over other stones and help support them and what they're dealing with.

So they, so people understand just how sick they were. You know, we've had people with skin peeling off in sheets because of the amount of fungal load that they had.

And that's why I was so concerned for them in this hole. And I can only speak from what I'm observing. And then when it's, you know, validating a study, I'll talk about that.

But just speaking from my observations since then our whole population, we've only had two hospitalizations and we've had a lot of people who came in with long haulers after they had developed it.

The majority of our population has also had this virus. And one of the things I really wanted to track was who developed long haulers and who didn't sort of 173 people that, I tracked, we had two people develop long hauler. Just two. – So these were patients who were already your patients and then they got the virus.

– Yes. So I because we do consulting, I said clients, but um yes so they were already here, they were already working that's what I really want to share with people. And I think that this will start just like we're seeing all these days come out validating people's symptom experiences.

I think we're gonna start seeing more coming out. It just takes time to get these studies together. But in the meantime as a consultant and somebody really wants to support people have to figure out what are we doing, what are we going to do?

Clinic Observations and Patient Outcomes

And then two people total in the whole population that while they were acutely ill had been hospitalized but then I had all these people coming in that had not been doing the program who had developed long haulers.

So I got to look side by side what are the differences in these cases and a large number of them had been hospitalized when they were in the acute phases.

So what was the difference the major differences that we've seen have been the level of nervous system supports people were doing on their vehicle and limbic system and the amount of mass cell supports that they had on board and I want to talk about what some of those are people have been using and then when they caught the virus they already had that going and when we customize some of these I don't have general protocols and I don't treat any of this.

So I do support and and consulting like I said, but um that really has made a massive difference for people. And then the people who came in with severe long haulers and they were not functioning. They couldn't work anymore.

It's this severe fatigue in all of these issues. We did the same things. So let's get them going on the nervous system supports, let's really beef up on the mast cell side.

And for those people, they all came through and there's not been any residual, I've only had two clients with

residual long haulers and they were um not doing the full program that we were talking about.

They were they were mixing and I understand I fully supported them and what they wanted to do, but they were really getting into the antiviral medications and move the needle.

It has for some people, but I didn't see it move the needle for them. So now we've gone and I said, okay, we tried all that, can we please just come back and do what we know has been working And let's give it a solid shot. So we'll see where those two, But two out of 173 is a really good, really good rate there for people.

– It's fantastic. Absolutely. Absolutely. And we're seeing actually very similar to you haven't passed out in the numbers. Now, you're inspiring me. I love that you did that.

It's fantastic. But that the people who were already existing patients, they haven't really developed long hall who has long haul the new patients. You know because the patients who are our existing patients, we've been treating their other infections. Usually it's line usually it's mold parasites or maybe they've already had Epstein Barr virus that that they were treating.

Of course of course we're always supporting their mast cells because most of these patients like you're saying do have mass cell activation syndrome because they're there SSR all over their body. So we're supporting the whole system.

Then they then they get the virus but they don't get long haul because everything else is being supported. – Yes. And I think this is where again what we're missing is this role of the mast cells in Long Haul.

And there was a November 2022 study and this was on Mast cells role in cytokine release syndrome and related manifestations of covid. So there this was the way they were describing different ways that it could show up. And um then some of our post um are long haul type experiences.

And they said the role of mast cells in the SARS cov2 induced hyper inflammation. Cytokine storms have been with the hottest topics in literature and physicians should keep in mind that mast cells role in cytokine release syndrome and related manifestations of COVID-19 so I'm just reading directly mast cell targeting.

So massive targets meaning the types of protocols of supplements and and various other supports like H one and H two receptor blockers. Those are H one mean Histamines and H two means famotidine can reduce the severity and course when used after complications are suspected or seen. That just came out in November 2022.

And so that's the very beginning of what we've been talking about and practitioners like you and um and and like at our clinic and so many across the country, we're having these, you know, conversations about what's working for you and what's working for you and and cobbling this stuff together and we're starting to see it validated.

– I love it and that makes me so happy to see. – Yeah, because then people can really help and what's been happening, is you know, people when you're a traditional medicine practitioner and you've got 10 minutes per patient and then you have all these controls of standard of care um and how that's been defined and these fears of the what if you do something, the medical board doesn't approve of. It takes years for those kinds of standards to catch up and I just bring that out. So people understand what they've been up against and it's easy to blame. I hear people blame their practitioner, but I want people to realize it's much bigger than that.

It's that um there are standards and care in place for good reason and it takes a long time though for those to start to change and catch up with the research.

So this is why I'm so happy people are being proactive and really this has been like a grassroots movement. And and even, you know, people report back like this is what I noticed is what I noticed.

And we see all this stuff happening, the messaging boards and you can't just go based on that. Like you need somebody to put this together for you understands the whole context.

But it's been incredible. The amount of just proactive lay people everyday people struggling with this and then pushing us forward.

Personal Recovery and Mast Cell Support Strategies

This is what we've seen in the massive space as well as the research is catching up and it's wonderful. It's this, this is wonderful. And this is what really defines who gets well, is the people who are really proactive.

– It's true, it's true. I love that you're bringing up the peaceful medicine being being slow, right? Research being slow. And so some things have to be at the grassroots, it is talking to each other what has worked for you. It is those messaging boards, it's doctors teaching each other and the science catching up and its it is amazing to see a catching up slowly but surely.

– Yeah, it's it's calming. And the key is in the meantime that we do what we know is common sense to take care of ourselves when we're not well and to take care of ourselves all the time because the other people that I see who are developing complications or let me just say to developing the long haulers is that's the direction I want to go in.

Either had significant underlying health issues that weren't being resolved. A lot of them have had mold toxicity already. Take born layers already. But some people just weren't living healthy lifestyles, you know, working 60 hours a week, not getting enough sleep, not getting sunshine, not getting vitamin D. Eating a lot of packaged and processed foods and eating out a lot. So immune systems were already depleted.

So whether in the development of long haulers it's really like how depleted are you already either from this unhealthy lifestyle, but you still seem to be able to keep going if you don't realize they're teetering on the edge or you've already been sick for a while.

But these people have been sick for a while. They're already doing protocols. They're already supporting themselves. And what's so fascinating to me was that it wasn't that population that got hit as hard, it was everybody who was living this standard Western way of unhealthy life that we need to change and all it takes is that's what it was before the straw that breaks the camel's back.

And I don't even know that it's necessarily the virus. I think it could have been the virus, it could have been a death in the family. It could have been the it could have been a toxin load.

It could have been the flu. It's just that then they got tipped into and I'm sure you're going to have talks on cell danger response. They got tipped into that cell danger response. And we just had all these people once exposed to this Covid virus but it could have been something else.

And then on top of that I think what we also have to add is that on top of that we had this global terror, we had the stress of it and the media um intensity and frenzy of all of that and that just added to the stress load. So going back to what triggers mass cell activation is the same that triggers I think in my own opinion what triggers long covid? What triggers all of these different avenues leading us into the cell danger response.

Just too many too much pathogen load and or too much toxin load and or too much stress or trauma load. – Right. We're on the same page. There's just so much juiciness, so much meat you you brought forward.

Right. First of all I thought that our patient population would be severely affected and and being the state of long covid but they weren't, it wasn't them because they were already being treated for everything else that would cause the terrain of their body or the immune system to be more susceptible to developing long haul? They didn't, it was these new patients who had all of these stressors including the global trauma and everything else that you just mentioned right. And it's I think it's really eye opening actually because has been considered all the other factors leading to long haul might not just be the virus plays a role by protein plays a role, but there's so much else in the system leading to mass cell activation syndrome, immune dis regulation.

And yeah, – I'd love to talk about at least things people can look into for themselves. And I want to really frame it in

in the framework of do your research. I don't know if what I'm sharing is right for you and these are just the things that I'm seeing in my specific population, but I'm not saying this is the exact right thing for everybody.

And it's really helpful when these things get customized. I'd love to add to this that actually had covid in January 2020 and I didn't know what it was. We had flown to las Vegas and a lot of people were sick on the plane way more than usual.

And I just remember sitting there going, what is going on, this is not usual and the person I was, it was ended up in a middle seat, which I hate, you know, being in the middle seat, but up in the middle seat and this woman next to me was just coughing her lungs out waxy sweaty, should have been flying.

And I remember thinking, oh no. And then then in checking to make sure she's not gonna pass out because I was worried about her then coming back, the flight back was the exact same scenario and a different person next to me, the exact same symptoms and I'm really ill and I'm watching her make sure she's not gonna pass out.

And you think about how much las Vegas is a huge international hub. There the airport there. So then about two days after I got home I developed symptoms.

My husband was sick and one of our travel companions was sick, interestingly, the fourth wind didn't get anything. But um I had a pretty significant case and I was struggling to breathe. I had trouble even just walking across the room for six weeks after because I'd just be and my husband was like are you okay? Did you just go for a run and I don't run?

Like I was like no I just came from my office, I walked to the kitchen so that's what was going on. But at six weeks now here's here's the problem for me.

We moved, we had bought a house right before we went into las Vegas closed on it right after we got back. We had to move three weeks after I had gotten sick and I had only taken a week off of work for the move so that I think delayed what it took for my breathing and fatigue to recover.

But some of the things that I can share that I think really helped me pull out of the rest of that. So I had you know these longer some of the fatigue that lasted for about three months.

And one of the things that actually did with the for the breathing the fatigue was exercised with oxygen and I used an oxygen concentrator and I would breathe the oxygen.

I could only walk at a really slow pace when I started for 10 minutes. And then I built up very very slowly. But that really helped me with this long hauler side of things. And then I kept I I still didn't know what we were dealing with because at that time it was thought there was no way it could have been the U. S. And the way that I know now that that's what I had was that as soon as the antibody testing became reliable I had still had positive antibodies but I kept my mast cell supports really boosted because I knew him though. I didn't know I thought it had the flu.

Even though and then I thought I had walking pneumonia even I didn't really know what had gone on. I knew I was in this mass south flare so I was working with the H. One and histamines.

So for me Claritin but in Qatar often hydroxy seen but other people use things like Allegra or Zyrtec and then from a Dean which is PEPs is a brand name and that's an H. Two. Even though this market is an acid blocker it's an H. Two receptor blocker for the mast cells in the G. I. Tract. Then I kept my quersatan boosted, resveratrol, all olive leaf, passionflower. These things are really mass L.

Supporting and the inflammation was high and I just knew that 2000 mg a day is was typically used of curcumin. This kind of hyper inflammation. Now what I'm describing is not with something someone supersensitive would bump up to but this is what I was able to do. And so I was doing those was doing low dose naltrexone to help balance my immune system. I was taking nigella sativa which is called black cumin seed oil.

– You were already practicing a lot of the F. L. C. C. C. Stuff before. Right – Right. And I didn't know you know I was just going after the mast cells. That's what I was doing.

And then I love Chinese skullcap, baicalin which was really great for neural inflammation and we've seen neural inflammation now reports are coming out with long haul and these types of things as well as restless legs.

I want to tell people because that's such a mystifying thing has been linked to the mast cell involvement. So I was doing those and I really bumped my vitamin D.

Up. So I went up to about 20,000 I used for a few days and I kept it at 10,000 for a while. One of my favorite things for mast activation though is by carbonates, just straight baking soda if blood pressure is low and that's another thing that's really arisen for people is pots and this blood pressure dropping that contributes to fatigue. And so when blood pressure is low the baking soda the sodium stabilizes mast cells helps bring the blood pressure back up.

So you get blood to your brain and then by carbonates regulating mechanism that controls in flam assume production that then it can settle down the mast cells.

So that's such a simple one. Or people of high blood pressure always encourage them to work with there provider and they can try. potassium bicarbonate is a little trickier so people need to navigate that with somebody who's helped him to monitor especially on blood pressure meds just to be careful.

But those were some of the things the vitamin C. There were spiritual. I bumped the S. P. M. I was taking way up that activated form of omega's, omega threes and and then I did a lot of nervous system work. So limbic and vagal work and then this is the overall approach.

Nervous System, Grief, and Individualized Healing

It's evolved a little and then it has to get customized because people so many different types of sensitivities coming through us whether they've got solicited intolerance or what they're dealing with.

Or they may have such a pathogen dormant pathogen load like a tick borne load that the nigella sativa maybe way too strong for them. So this is where it can help to work with the provider to get these kinds of things customized.

And I don't do blanket protocols but I can just share what worked for me. And then a lot of people remember this one man, Nafysa. He came in, he had been hospitalized numerous times when he had acute infectious phase and then he had lost his father to Covid.

He had been in he had been hospitalized on a ventilator and didn't make it. So not only did he have long haulers when he came in, he had this heavy load of grief and so many people I wanted to share that so many people experienced losses during this. And then we couldn't go to funerals.

I lost a dear friend during the pandemic, not from Covid that cancer, I couldn't go to the funeral, you know, so that you don't get that normal closure.

So we just have had all these social oddities that have added to that stressor load for us. And he's just one example, but he couldn't work. He uh could hardly function for more than about two hours a day.

He was having trouble with this extreme brain fog, he was still having trouble breathing. And we just started working through the method that we use at our clinic that called him MC 360 method.

And really for him this emphasis on nervous system work to help him feel safe again because he'd been really close to his dad and even though he was an adult man I mean his dad had been his safety his point of safety so he had to re establish this point of safety tying it back to what we talked about in the beginning.

Mast cells are monitoring for safety. Am I safe? Am I not safe? And if I'm not safe let me produce a lot of inflammation. And I just realized I want to connect also this is why we see all these different symptom presentations because it depends on which mast cells are being dis regulated the G.

I tract ones the heart ones the ones in the brain, ones in the bladder muscles, the bones which ones are affecting people and which receptors are getting triggered in which of the 200 receptors in which of the 1000 mediators in which combination.

So you get almost an uncalculated number of permutations of presentations for mast cell issues. And that's what's made this mystifying for so long. It doesn't have to be that way.

And that's why this education is so important in this summit that you're doing so important. And I talked before about the masses lining every nerve ending being it and and lining every nerve sheath and literally sensing every single thought.

It's an illustration of that is some of my background is in the mind, body connections with the nervous system and immune system and some of the studies that I did for my masters and so in working with that, one of my initial symptoms of mast activations, my fingers swell. My knuckles will swell so I just retried cashews for the first time, which are typically pretty inflammatory and high histamine and my fingers were like, they were just blown up. So like, oh nope, no cashews, but not not. It represents that way, but it's an easy one I can track and I would do experiments of working myself into an anxious loop in my mind and within two or three minutes I'm actually starting to get some swelling now thinking about doing it.

My knuckles start to swell and then I would, I've done a lot of nervous system training so I can shift myself with my intention now into my parasympathetic nervous system state and that rest digest and heal and that states so critical for healing.

And then just literally watch over a few minutes the inflammation will drain out of my fingers, that's the mast cell nervous system interface and that's how it works and it works that quickly. This is how people can have a reaction from just smelling something.

They have a reaction from, as soon as they put food in their mouth, they could have diarrhea that quickly because it's traveling through the nervous system signals to the other mast cells in other parts of the body.

And it also means that that's such a powerful entry point into settling mast cell dis regulation through settling the nervous system, tying this back in with this man that I was describing this case.

He ended up doing a good bit of grief therapy helped process the loss and to give him closure because they didn't get to have the normal closure that you'd have with the community and your funeral and your family and people coming to visit and bringing you casseroles and all the things we do when somebody passes.

So he had to recreate some of that for himself and then he worked a lot on the limbic system and vagal nerve. He was still exposed to mold and I think that really contributed to the severity of his symptoms. So he got out of mold.

He worked on a lot of the things we just talked about on the mast cell side and it took time because he was in really rough shape when he came in. But I think it was nine or 10 months later he was back to work and then he just moved, he was strong enough to move across the country, take a new job and he's back to working at the level that he used to work the professional level and that's the kind of story we see over and over.

I just want to share that to give people hope other people, I've seen that was a really intense case other people I've seen turn around in 23 months and a lot of people are doing what they described to support themselves as soon as they suspect, they might have a little sniffle and they're having really short durations and then just coming back out and in a week or two they're back to normal, so there's so much that we can do now and I want people to know that and to know we really can take care of ourselves and protect ourselves and it's just understand the underlying mechanisms so we can target what's most effective.

– Thank you, there is absolutely so much that we can do now and it's just been on the sidelines, but now we're bringing it forward and so thank you, thank you Beth, for being somebody who brings that information forward to people.

You do it, you do it well and and you're making an impact and thank you, you know, – Thank you so much. I was really happy to see the summit coming. There's still people that come in that are still terrified, even though seem to be kind of calming down some of the global traumas coming down.

We haven't healed the global global trauma of this, we're just kind of pretending like it's all okay and and that we can go back about our days normally and I think even in addition of people hope and to give them strategies, there's so many strategies and people are gonna hear so many different possibilities and they have to see what resonates with them and what is the best approach for their case.

And all these different strategies work for the right people. And I say it's about the right things at the right time. – Right. – In the right order for who you are. And I think that in a in addition to all of that, giving these practical tools where you're also creating this healing space for people to realize that they can be okay and to start to recover just from the emotional and social and mental challenges that they've been facing for a few years here that you know, we haven't had in decades and decades.

So in my lifetime. – No, no, I don't think so.

Hope, Prevention, and Where to Find Resources

I mean it's a it's a brand new, um trauma, an epidemic epidemic the first I've seen in my lifetime to and hopefully the last, but there's it has this lasting impact. And and we're here to give people hope because we do give them personalized medicine, everything, everything you told them is so important. But also like you said, the right medicine the right time, the right person can give someone the right medicine at the wrong time and it just doesn't work. And what is gold for another person could be garbage for another person. And so that's why patients need to work with somebody like you or myself or other people on the summit because we make it personalized.

– Yeah, – That's key. – It is key. It makes a big difference. And in the meantime, people have some starting steps and um, every time I've gotten a sniffle actually, or anyone in my household has a sniffle, I've started taking care of my mast cells and doing these things I know to do. I have been exposed now three times, somebody who was actively sick and have not had another recurrence.

So far, fingers crossed. – Fantastic. – Now that may not be the same for everybody else, but I do think there's a lot of power in really keeping our diets clean and nourishing, getting a lot of sleep, getting plenty of sleep, making sure we're getting clean air and we're living in a um, as as good air quality as we can get good water quality, food qualities we can get.

And then really paying attention to, am I starting to feel run down? How do I boost myself? How do I support myself? Am I somebody else in my household starting to run down?

So I'm getting exposed to something possibly, what do I do to support myself? And there's so much, it's easier to turn around a rowboat than a cruise ship.

So get on it while you're still in the rowboat. – Yes. – And that can also make a big difference. But if you're on the cruise ship and you're trying to turn around the cruise ship, there's a lot that you can do. And many, many people are showing that this stuff is working. – It sure is.

Thank you so much for such a great interview. And Beth how can they find you tell them your website? – We have so many resources for people dealing with mast cell activation issues. So if you've had long hauler, Our studies are showing that you've got mast cell dysregulation.

If that's what's going on and we have a ton of resources for people to get started and they can go just on to the

website. It's mast, M A S T. as in tom, C E L L 360, mastcell360.com.

And we have an incredible community on Facebook. I'd love for people to join and we do free facebook lives, most Mondays. People can catch all kinds of stuff and not have to feel alone anymore. That's really what I created it for.