Opening Rant on Pediatric Psychiatry

In general, the American Pediatric Association should be brought up on criminal charges. One of my patients was having depression even after recovering from everything.

They don't measure anything. There was a 66% increase in antidepressant drug usage in children. The prescribed pills, highly addictive medications to alter chemistry and behavior without ever doing any brain imaging, any blood testing.

I want to get to the doctor, to The Dirty, I wanna clear this out and have it be gone for life. If you're overwhelmed with chronic health symptoms and still don't have answers, you are not a lung.

I'm Dr. Javan and on redefining wellness with Dr Javin, we'll be exploring root causes like Lyme disease, mold and parasites and I'll guide you with simple and practical steps towards real healing.

Hello and welcome back to another podcast episode of redefining wellness with your host, Dr. Jaben Moore. And today I get to interview Stephanie Remke and we're just sitting here and I'm getting to know her and her background is fascinating.

The statement that you made to me though, you're a pediatrician's worst nightmare because you fix the things that cause the kids to keep going back I loved that.

You were a therapist at one point, you are board certified in neurofeedback, which I love, and you're also a chiropractor. So I've been getting adjusted since I was 16, but in a moment with him adjusting me, I understood the nervous system in way I hadn't understood it before.

Podcast Introduction and Guest Background

Seeing what was going on in the psychiatric hospital, the schizophrenics, and how disgusting the story was there, the drugs that were basically just used to tranquilize them, right?

So to sedate them so they could no longer defend themselves against the staff, which is what was really going on most of the time. I understood neuropsychiatry in a very different way of how structure dictates function, but like, oh, and It's all coming from the brain and from nervous system.

So it just became a very obvious thing to me that that's what I need to put hands on schizophrenics. Like they're missing the nervous, their nervous is so distorted.

Now I was naive and I thought I could just. adjust them. I didn't understand how much I was going to end up having to learn about orthomolecular psychiatry and hormones and neurochemistry and mitochondria at the time, but that's what I do now.

And the electrical, how the neurofeedback at all, just one thing led to another. So neuro feedback, when you're working with people that have these complex neuroimmune conditions, which is basically for everybody listening, everything that we diagnose today is depression, anxiety, schizophrenia, bipolar, autism, pan pandas.

There's an immune mediated inflammatory response. How does neurofeedback help? For me, it's been the most powerful lever I've ever used. And the idea, like, I don't know how any talk therapist can do their job without doing neurofeedback.

So the vast majority of neuro feedback therapists are therapists, psychologists. It's a little bit more unusual to have somebody who's not still practicing that way do it.

The brain waves are controlling really all the molecules, growth hormone, dopamine. Every brain wave is associated with a chemical. The electrical system of the body is primary.

Electricity is creating the chemistry. That's what people seem to forget. And all of medicine is trying to use chemistry to manipulate everything else.

It's not how it works. So we go to the foundation. There's many, many different ways to Approach it, so alpha theta is deep states, we call it. Slow wave training, it is my primary specialty.

So that's the thing I love to do most. You're going deep state's hypnagogic into the unconscious to help, and the mind will never hurt you. It's going down and it's gonna explore how we always use the iceberg and tip.

Neurofeedback, Brain Waves, and Deep States

We say what you can see at the top and what's really there. That's what going on with deep States. And it goes down and says, well, what's down here that might be is the hiccup.

And they can find the unconscious scripts you were told from childhood or anything else, or in a wide variety of traumas you may have no idea are actually impeding you neurologically and psychologically.

It helps you unwind them. and very, very gently, and it brings them up and cleans them for you in such a way that it will never deal with something you aren't ready for.

So it knows the hierarchy of how to kind of purge the system. And you may have awareness of it, you might not at all. Now, that is still going into this deep neutral, like a deep, it's deeper than hypnosis.

So we're putting you in this incredible neutral healing regenerative state where you must be that many people, right? If you're over a mass cell, you have a bunch of histamine and inflammatory issues, your always fight or flight.

They're super activated. Sometimes at 30 minutes in that state, some of the most potent healing potential is actually happening. Like they finally are free.

I've had people come out the first time and say, I don't think I ever felt relaxed in my entire life. That's, this is peace. Yeah. Welcome to normal. But you don't know normal if you've been being molested since you were three, or if were in a cult.

I mean, there's some really wild things that come through the office, right? So that already just neutral, peace, restoration, everything modulates differently.

The body stops war and says, let's heal. Doing that twice a day is extraordinary. Now, typically, you're stabilizing the cortex first for a while. We're usually doing some simple stability training, but we're not going to start a child with ADHD or something like that.

That wouldn't be the way I would do it. It'd be boring training for them, and we need to get into the core text a little bit to stabilize before we do that, so there's a variety of ways.

But getting the brain to it's so holographic and how it heals. So just telling it, can you pay attention to this? All neurofeedback really is, is a mirror.

We're like, can you see what you're doing? And it's like. Oh, I didn't know my hair. Yeah, just fix it. And he just does it unconsciously because the brain is infinitely smarter than I am.

I'm not telling. Like I might tinkering with them. Letting the bring unfold and heal itself, right? Bringing stability to itself. Then it does to the whole system.

So let's just move this right into being the pediatrician's worst nightmare. Yeah. So you get all these kids coming in and I mean, I was just on stage here at the event we're at and there was a 66% increase in antidepressant drug usage from 2012 to 2000, 2016 to 2022, 66%. Increase in children.

What's going on? It is definitely different today than it was 10 years ago. It's just harder today. There is much more coming at a child. In general, the American Pediatric Association should be brought up on criminal charges for most of their policies and the way they choose to diagnose and treat children.

It is completely subjective. They have no objective testing. they do no object measures. The prescribed pills, very potent, often highly addictive medications to alter chemistry and behavior without ever doing any brain imaging, any blood testing, they don't look at zinc, They don' look it anything.

And ADHD, depression, anxiety, and here's a script. The vast majority of what I'm doing is saying, no, we're going to actually look at your brain, give you some objective pictures of What's going on, do EEGs, run labs, Run blood tests, show you what's happening and actually help you actually see, is it ADHD or is this Zinc deficiency?

Is it ADHD or mold illness? is is ADHD? Or is that oxalate poisoning? What is ADHD? So attention deficit is a real thing. And I'm going to basically, there's at least 13 subtypes.

We can see them very, very clearly on a brain map. Um, and then there are many things that look like it, that are not it. I would say this at at 50% of walks, walks into my office.

are auditory processing disorders that have been misdiagnosed. Another 40%, their anxiety that had been missed, it's over arousal. Attention deficit is under arouse of the brain in very distinct patterns, which means way too many typically theta waves, but you can have delta theta or alpha in the front of brain, in prefrontal cortex, and the partly executive function.

So the child is walking around, or the adult, Basically, with way too many, I need to go to sleep type of brain waves in the place that should be fast acting and functioning with beta speed waves.

Delta theta and alpha waves are internally focused. I'm going to be inside here. They're incredible for for imagination and creating something from nothing.

When you and I are creating content or writing books or coming up with a speech, the perfect place to be is in theta. The Taoists always say, you should go to a slow wave.

You should dream before you, should you go inside because the answer is here. It's beautiful. And memory retention, You must have a lot of theta to put something in a long-term memory.

So it's not like we don't like these waves, they're fantastic. But right now, you and I are not high in theta waves in the front of our brains, because if we were, what our body would do in its divine intelligence, It's going to make me fidgety and it's gonna be making me do things to keep myself awake.

ADHD, Misdiagnosis, and Objective Testing

Just like if we go to drive a car late at night, if they're a long flight, I gotta stay awake so I don't crash. So roll down the windows, put on some loud music, woo, somebody talk to me so that I won't fall asleep.

That's what the child is doing. So the body is trying to say, I need you to speed up to override falling asleep, because we can't fall asleep. It's third period math.

But there's too much under arousal. This is why most of those children also have a lot of bedwetting issues. The same issue, there is too many underarousals.

They can, you know, the, body can do that. All coming from the same type of issue. Right? They don't make

enough of the special type They also usually have sleep problems as well of the beta wave SMR where the sleep spindles are.

So it's all kind of related. We just say, you're just making too much of this in the wrong place. And there can be a number of reasons why. You absolutely can.

There are some genetic components. I mean, I look like my mom and dad. Mm-hmm. Physically I'm built like them. If they had a structure of something that happened, that's how their brains work, and I can have that too, let's say.

But that's why I think it's a big deal. Like I clear things out so my children don't have it, right? So it just this under arousal that can happen from a number of reasons.

Drugs do it. I mean, weed does that. So if someone's coming to my office and they like to smoke weed, marijuana, recreationally, I have to maybe have a come to Jesus conversation.

And I'm like, so if we're coming for attention deficit, you're doing a thing that keeps bringing up the wave that I am trying to push down. I might not be able to make this a permanent change in your brain if you're going to keep doing that.

Now, if they're smoking weed and it's like, you know, an anxiety problem, at first, I can train them through that, If they have anxiety and they do cocaine, i can't train him through.

So there's, like different drugs are going do different brainwave patterns that you may be beable to push against or not. That goes into the whole thing.

So it's just an under arousal of the brain. But that can come from zinc deficiency. That's coming from excessive screen use. We are causing it now. So the lifestyle has changed so dramatically.

Children are born totally fine. And then somebody hands them a digital device. I mean, now it looks like it's nine months, 10 months 12 months. People are putting iPads and iPhones.

So that is causing severe under arousal in the brain because the Brain is trying to protect itself from the way too fast imaging and the flickering lights.

It is a danger signal to the nervous system. I'll tell you, the most potent video game I've ever seen, we've tested, probably did about 25 kids and we did all these different live cues, live EEGs.

We put all the different video games they like to play. YouTube, it's one to see, well, what is this doing? Minecraft. I have never seen anything spike theta waves like that real time in a child.

And we would show parents. See, this is how the kid, look at the brainwaves. Look at all of them. They go, huh? This is him at rest. We're going to put a show on.

Slight change. Play Minecraft. And we just sat there and watched for five minutes. I go there's your ADHD. So nothing triggers ADHD that you've ever seen as good as Minecraft?

Well, as a video game, yes, nothing. It's extraordinarily effective. So I'm like, wow, because I think it's the dumbest, it doesn't look fun. I watch kids play it, I am like what are they doing?

But I was like I wonder if this was made on purpose to do this because it is really effective at it and they are super addicted to it. And it does not look like fun, and it sounds like Pac-Man, but I don't get it but yeah nothing does it as well.

You know, when it goes to neurofeedback, I've had the opportunity to try and break this down a little bit, because I have referred out for it quite a bit.

Especially to these very, very sick individuals. I kind of call it physical therapy for the brain to some degree. Because like you were saying, if your brainwaves are doing this, and you need them to go over, you've got to kind work at it.

You've gotta do something. So for me, just trying to get someone to go do neurofeedback and find someone that's good at it is the second part. Once we can find some on there.

But I know that the people have gone and done it. It is incredible. When I run into a provider like yourself, who's talking about look at the brainwave, you can actually see something going on.

I feel like that demystifies some of this dogma and like psychology and psychiatric diagnostics because it's just like, oh, you're anxious. I'm like okay, what is anxiety?

What is depression? what Is ADHD? And that's why I asked that question because You define it as a measurable brainwave pattern that you can test and then you could also work on.

You can correct it 100% every single time. And I even tell pediatricians, I'm like, listen, the drug story is stupid. I think what you do is worthless.

And you know, it's dumb. Because it doesn't take much. All it takes is a teacher to say, Timmy has ADHD to mom. Mom takes a 10-minute appointment, maybe 30 minutes of some questionnaires.

Completely subjective. anybody could sound ADHD on a bad day. I'll tell you, most of these kids… Everyone. Every child at school has the same ADHD almost.

Well, you know, it's an interesting thing. It's… I've seen many that's like, eh, I will tell another thing, they're often just sleep deprived. Yeah.

That's insane at this point. They're up till midnight doing homework in the fifth grade. What is going on? You know what I mean? Some of the parents will go, what?

They'll go that is ridiculous. They should be playing. But I'm like, if you're going to drug them, shouldn't you know if is it under arousal or over arouse?

They don't measure anything. I just don' understand how that field can get away with we don"t test, we dont look, and we can write a script for anything we want.

in very few minutes and never get in. You're going to be on it for life. I mean, it's just so they know I don't like what they do. They basically say, I said, what letters after your name?

I say I could care less. And I'm caring about how you feel what you're what we're dealing with. We start basics. So I love neurofeedback. But let me be clear.

It is I think we need to start with sleep. with food, with nutrition, and I often pause neurofeedback. There's no point pushing against a brain that is starving.

I'm not going to train an anorexic.

Lifestyle Factors, Screens, and Brain Training

It's like you're not gonna make them run a marathon. You'll kill them. So I have to make sure I had enough. It's like CrossFit for the brain. Its hard, its exhausting.

You have the bricks and mortar in there to do the work. So one I want to be sure we have all the fatty acids, essential amino acids. I found, I think I was about seven, eight years ago I stopped taking any vegans.

The brain cannot hold the charge. We can do neurofeedback, it won't stay permanent. I can stop the seizures, I stop tics, we can get them sleeping, whatever.

They go away and it doesn't stick. Their charge doesn t stay the same way because their membranes are so poor. If they don t have enough fatty acids, they have to take an inordinate amount of supplements.

and the vegan supplements don't do it. So I just, after a few years of it, I'm like, "I can't take your money." So it's not going to work, so we can just stop.

Either you will change and then I can train you because I am into getting it done and having you be well for the rest of your life. So if they're like really brain on fire, mold or lead, I will stop trying.

No, we need to start chelating this out. We need take the pressure off the system. You need bring some of that inflammation out, get some this lead out because asking the systems to push itself there, the neuroplastic make new networks is very hard and there's just no reason to drain the So there's a fine line, right?

You don't want to push on the neurofeedback too soon, because we want it to be… We want the brain to receive that information and have it not be overstraining the system as well.

So I usually… I can use it at the same time, but often I like to work on metabolic inflammation a little bit first, and then I come in. And I'll use other modalities, But neuro feedback is hard.

We need to get them ready to come there. we're training and I expect this to the work we are doing. I've experienced the same thing with several clients that I have worked with.

If I get them to someone too early before their brain is primed for success, you might see some results, but it won't stick. And that's frustrating for everyone, except for cases of mast cell where sometimes you got to, because you can't do anything oral at all.

You have to bring them into someone who can do some very gentle feedback work first. Then as their body calms down temporarily, then you can get in and do work to stabilize and then get them back to completion.

But it is definitely an art figuring out how to, and with each unique condition, get someone feeling well. I'm honestly loving having the conversation about neurofeedback because it's an interest of mine that I've I've learned and learned, but I feel like it's a never-ending just…

It kind of is. I mean, look how many… There's like 4,000 chiropractic techniques, right? So like, it is like going to an upper cervical person versus a network practitioner versus an SOT provider is a very different experience for the patient.

And I had seven different systems in my office and four different clinicians. So we do a wide variety, right? So it can look very different. It's like going to a CBT talk therapist or a DBT therapist.

They're completely different, I would never send a trauma patient to CBP therapist, they're going make them worse. But DBP is a completely difference way and they are incredible with trauma patients.

I've worked with many DBT therapists. They send every single client to us. And they basically say, with neurofeedback with you on board now, I get done in three months what used to take us two years.

Oh, wow. So we do it all together. It's a completely different experience for the patient as well, because we calm the brain and the therapist then guides the new learning.

But you can't learn anything unless you're calm. Right. That's what you've been doing with the Mass Cell. I would have thought to not do neurofeedback on that.

I don't actually bring it in that fast. And that you're telling me that it's like now I'm like, huh, I want to change what I do a little bit. Mine was a desperation accident.

That's how it always works, isn't it? Right. It was they've done everything everywhere. They cannot eat food. There on a feeding tube, they're unable to take med supplements.

Oh, well, we I didn't know what else to do. I was just like, well, this isn't putting anything inside your body. Yeah. Maybe we can calm your buddy externally.

Red light for 30 seconds reaction, right? Herxheimer reactions, what they called it. I'm like that's something. Um, maybe not a hurts, but it's. So couldn't cast oil pack.

We are so limited. And they could handle hip deep states 30 minutes. No, we did not start there. So we had like the and again, I was not doing to the spectrum that level you were doing it was.

It was a clear mind device and it was sound, light and color. So we put blue glasses on was just purely calming. And I think with this initial person that I learned it on, we did like two minutes.

Yeah. Some talking, you do this whole mapping of the brain. You do all that information you get, put the electrodes on and you're like, and go now we're done.

Okay. And then we worked our way up over the week over, the eight sessions, cause they flew in and they could only be there for the weak. So I was like, well, we'll just go out.

The patient body lets us, you just tell me how you feel and we will go. And they sure were wiped out, it was a workout for them. But at the end of that week, they can tolerate supplements.

At the of the that, week they, could eat 25 more foods. Yeah. they had the least amount of anxiety they'd had in their memory. And I was just like, what did I just stumble onto?

The company I used the device from, they went out of business through COVID and I had just kind of stumbled into it and then they're gone. I'm like well I don't have a community of neurofeedback people that I I knew because all I was doing was just that like I Was calling her and we were kind of developing the protocol and then that's kind Of where it just kind ended and the device stopped being functional.

You know you just said something that so sad and We talked about it so the two big organizations for people for you to know and anybody listening is BCIA.org and ISNR.

Org IS and R is more like neurologists and physicians from all over the world. So it's a little bit more of that left hemisphere, like nerdy engineering, that the more woo woo feeling therapists crew typically are BCIA.org.

I'm a BCN through them, but I had a diplomat from ISNR in my office as well, so I wanted to bring everything in.

Neurofeedback Protocols and Clinical Limits

He is a man and I am a woman. We just harmonize each other perfectly. And it is not a lot of money to tell you the truth. For what you are really doing, for how long it takes, Younger people don't seem real motivated to go slow, to take your time, and to study something that takes a lot of intellectual rigor to really understand and be present with people for 45 minutes to an hour, two or three times a week, over several months.

to completely reverse something naturally and have it completely go away. I just live in the world of where pediatrician psychiatrists do not. You don't have to manage ADHD, anxiety, PTSD, depression, insomnia.

you just eliminate them. That's not normal. But it's getting to the point where I'm like, oh, man. Who's talking about it? That's what I was going to say.

I think the problem is not a lack of potential patients. It's a like of providers talking about it. And it's providers. People like COVID put a lot of people out of business.

A lot. I did not do remote home training. i was not fan. it was out, you know, but COVID changed the game and I had to. We are limited in some of what we can do.

You're not going get the same, especially Alpha Theta, slow wave training, I don't know if they explain this to you. Be clear. You were impacting those results.

Your unconscious and your conscious mind directly influence when you're doing deep states with someone. So we had very strict rules on how deep state work was to be done in my office.

And typically 90% of it is me because I'm going to hold the space for what's about to happen. And I can't flip through a magazine, I cannot be on Facebook, cannot over here distracted because we are in a communal experience with each other and our unconscious, we're about to do things.

So if I sat there and I thought about roses, they're going to come up at some point. I couldn't explain it but I kept smelling roses. My fault, my bad.

Right? So it was a real thing. And so most of the interns or other people didn't have the discipline that I felt I could trust the deep states to deal with because the amount of trauma that deal within the office.

I'm like, yeah. So that became the thing I really love to do. Like, I want to get to the dark or the dirty. Oh, and I wanted to clear this out and have it be gone for life.

Right. Just be aware. You were driving that. You can't do that in a remote setting. Yeah, it's different. We added a Remote device and I definitely never felt near the impact of it.

You get great stability, but you aren't going to get as much trauma healing or it is different, there are limitations. There are great benefits because we can get access to people who would not have anything, right?

But I just want people to know that. Please don't think it the same. It is not. We could go on and on for this. I mean, with all of your experience of autism to all the diagnosis that we talked about, we'll absolutely have to do a second episode to bring this together.

I'm interested, I can just listen because I love to see tools that are effective and that tool of neurofeedback is one of the most impactful tools I've seen in the histamine MCAS chronic illness realm.

And I only got into it because happened to bump into somebody in a conference and one my patients was having depression even after recovering from everything.

There was no physiologic reason I could find to why they weren't well. and the depression category. It's very simple to me. We tell people that. You can get rid of that, but if you've been stuck, that's how it's hardwired.

So those networks are so big, right? You have a 12-lane highway on those brain waves and that pattern. Now the system is like, great, I'm not driven from the mold illness or whatever was the situation driving that that created that network.

But I've got a dirt road on joy. You know what I mean? Basically, that's not exactly it. But that is really how it works in the brain. It needs time to be told, I need you, you have to tell it to ignore that.

And it, neurofeedback teaches it learn, look the other way, Look the way. Look, the, other, way and then the brand is like, Oh my God, like efficiency.

If you're going to keep making me do this, all this build a whole new road. That's what we're doing. The brain is

super efficient and it wants to stay efficient.

Nature is efficient, it's like, well, I'm just going to do whatever is easiest because I can't waste energy. So once it was gone, but the highway is there.

It's, you know, like muscle memory. it just knows to this. That is the reflex. so it must be redirected. I must show it a different mirror and say, You know there's a left turn you could make.

Oh my God, keep forgetting. And then I go left, which is joy and happiness and presence and peace and fun stuff. You know, that's, it's always the same.

So we tell that patients, we clear things out and say, listen, when I get the zinc ratios and the histamine or methylation balance, blah blah, get rid of all this stuff.

Now we may or may not have to clean up the brain wave patterns. Let's see what it does on its own because you're a neuroplastic, you are always correcting.

It could clean itself out. And everything could be great. You just need the flexibility in the Health and healthy brain, mental health, is neuronal flexibility.

Because you and I right now, we've got some nice moderate beta going, right? We're good, neutral, not super activated. Somebody could walk in this room right now, and you and I have to have a very different physical response on how we may have respond, right?

We may to get up, there's a fire, grab people, run out of this building, do something like that. I need to be able to activate super quickly. And I also need you to come back down super-quickly.

Healing Chronic Illness and Closing Remarks

You know, a paramedic, an ER surgeon, you have be to able shift gears quickly, it's the inability to do that's your problem. So that brain was stuck, in this certain pattern, which is probably was massive amounts of alpha waves, way too much, and it was stuck there and was oscillating.

And it didn't know what else how to get out of it. So I had to stop making so much because too of a good wave is still a big problem, right? So as they push it down, oh, because it lost the flexibility.

So that's all we're doing. You can be flexible again, but some things like lead, mold, they can't be flexibility there. So you have to do both, right?

So we can clear it out and we go, we relook at it in the map and go listen, you're fine, it's gone. Or like, eh, maybe we need 20 sessions. Maybe we this.

Because I can look at a case and say, this is going to be three months of training. This is gonna be eight months a training, like we needed to aware of it.

A borderline personality disorder is a minimum eight, 10 month commitment. And we will help that. But that developmental chronic PTSD is going to take a minute.

You know what I mean? It's not a three month ordeal like ADHD, right? So anyway, it's the flexibility we're going for and the brain was just stuck in that pattern because it was there for so long.

And you just, you've got to rework the rain. Got to give it new patterns. No different than if you throw a baseball sidearm your whole life. Somebody says, you know, it's going to hurt your arm.

You got throw it overhand. It takes time to get good at throwing over hand and not to be your main response when

you pick up a ball to throw. Yep. So.

Stephanie, I so appreciate this conversation. Thank you for having it with me. How do people find you? DrRimka.com, pretty simple. I'm the only Dr. Stephanie Rimka in the entire world.

Super rare name. So I am not hard to find. Yeah, so Drrimka.com will take you to all my social media. You know, I get in trouble a lot on social medial.

And banned quite a bit right now. Like I still post, can't go live forever at this point. But if I was still there, give away a lotta free stuff because I want people as educated as possible.

you know I've been seeing patients a long time and to me, Love you, but can you leave? Like the faster I get you better, the better for me, right? And the more educated they are ahead of time, The better off we all are.

So I want them highly educated already. I do a lot of free stuff. Drmcurt.com. Amazing. And I say the same thing. Hey, I wanna get better and I see all your friends.

Yeah just send me a card you know because you probably find this a lot of patients will go through this moment of like I have it with them they almost they hit this point they don't want to get totally better because they Don't wanna stop coming and I'll have this and have to like kind of lean in and touch them and said you Know you can just stop by and come to Christmas party or send you a car or mmm Just because just tell me you're like because your having a good time not cuz you have a problem You're like, you don't need me anymore.

And that doesn't mean you can't come see me. I'm like, you can come play with the trains. You can even come hang out. They sometimes need to remember that, because this has been the safe place.

This has spent home, this is been family, right? Yeah, but I need you to get out, a lot of you come back every now and then and say hi. you don't even have to pay me to say, hi, But sometimes they need remember, that you're not going to lose me because you get better.

Well, thank you so much for having this conversation. Thank you for tuning in to redefining wellness with Dr. Javin. If this episode spoke to you, please follow and share this podcast with someone who is ready to take control of their chronic health symptoms.

Also, consider leaving a review. It helps more people find the show. See you here again.