Healing from Lyme Disease Summit Live Q&A - Day 2 Transcript

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Welcome and Mother's Day Greetings

Hello and welcome everyone. Great to see everyone today. And, we're just getting rolling here. So we'll just give everybody a moment to get in. As we just got started.

So, when you're, rolling in, if you don't mind just saying hi in the chat, let us know where you're, calling in from. And then also, that gives us a great opportunity to make sure that the, the chat is actually working because, as you know, sometimes there's some little tech difficulties, but.

So, Doctor Darren, how are you today? Good. I actually, have a gaggle of people here in my house who are celebrating Mother's Day for my fiance's mother, who's local, and my mother's in Arizona, so I've got about 30 people milling in the background.

But so far, it's a beautiful day in California. How's everything in Utah today? It's pretty good, man. Same thing here. We're, you know, celebrating Mother's Day.

Just got back in and had, it was raining like, mad all day and then as soon as we had sat down for dinner or lunch, I should say I'm came back. It's like bright and sunny again.

So it's a gorgeous day and, you know, Happy Mother's Day to all those who are attending in mothers and moms and happy Mother's Day to all of our moms, because we all got them.

And, you know, anybody watching on the recording, you know, happy Mother's Day to you as well, because what a what a great thing. You know, it's interesting there.

And I don't know if you see this, but a lot in my practice, I see moms are the ones who are advocating for both themselves, their kids, their dad, you know, dads and everybody.

So it's like, what a great day. And it's funny where we scheduled this, you know, summit. I don't think we, we're thinking it was Mother's Day weekend, and it's like, so, everybody who's joining us, thank you so much.

And just, big shout out to all the moms who make all this happen for us, because they're the ones advocating on behalf of all of us to get, you know, make sure we're in, groovy shape and, getting our kids better. So.

Yeah. As Leslie saying in the chat, please feel free to, ask all your questions. That's what we're here for. As a reminder, we're here every day, 5 p.m.

eastern, 2 p.m. Pacific for about an hour, where we're doing about half, live Q&A with me and Doctor Darren, and we're doing some, live healing sessions, just to give you a sense of what Doctor Darren and I and, some of our special guests, because we'll have another special guest tomorrow actually find really helpful in our lives and personally for healing and maintaining optimal health, but also when we were sick with Lyme for healing.

And a lot of these practices are things we use with our private patients and clients to really, like, move the needle. And like I've said over and over, it's not just about like the breathwork or the meditation or, you know, whatever practice of calming your nervous system, retraining your limbic system, calming that vagus nerve down and optimizing that function, that's not all it.

Which is why the summit is not just a breathwork summit or a meditation summit. It's a comprehensive Lyme look where we're looking at the latest protocols that double those tap sounds and stuff and, you know, how to treat mold because it's a common sort of cold toxin flash co-infection and, you know, a day five is wrapping up right now there.

And and we talked a lot about, insulin resistance and optimizing immune function through optimizing our insulin intermittent fasting and promoting autophagy.

And one of the things I think it's so important is being able to have different tools to stimulate our natural healing mechanism. And this thing about autophagy, which I love so much, it's really about, you know, getting our cells to clean themselves up and sort of the holy grail, I think, in Lyme disease is getting to these intracellular pathogens that are deep in the cells, that our immune system even has a hard time of getting into.

But one of the things we know is that intermittent fasting, like we talked with Cynthia Thurlow about, is one way to trigger it.

Why Healing Requires More Than One Approach

Another way to trigger it is you talked about hot and cold exposure in the past couple of days, but one of the other big ways is just a little bit of a stressor, a hermetic stress with even just a little bit of breath retention.

So you're going to stimulate your might have conduit to create more energy, clean out cells. But also part of that clean out is stimulating that process that we're all calling autophagy.

It's intracellular recycling and taking the trash out. So that's why I'm so, you know passionate I know you are as well there. And to to do both. You know it's not just one or the other. It's a complete package.

So people actually can, you know, fully heal. Yeah. You know, you mentioned hermetic stress. There's a couple of old naturopathic treatments I'd like to share with everybody because I think it's, again, we like the low hanging fruit, the easy things that anybody can do at home.

So there's two very simple things you can do at home to stress yourself, not stress in a negative way, but again, to get your body to become more resilient.

And one is if you're in the shower, you know, most of us take a hot shower at the end of that hot shower. Just flip it over to cold. As cold as you can tolerate it for about 30s.

And at first it's kind of painful. And then as you get used to it, it's not so bad. But that that 20 to 30s of cold, there's a reflex action through your nervous system that then opens up all your blood vessels, dilate, some, gets more blood moving, gets more lymph moving, and again, anybody can do this.

Now you have to be careful if you have pots because we don't want your blood pressure to drop and you pass out. So start by just turning it a little cold and you can kind of get colder and colder as you feel like you tolerate it.

But what you'll find is that when you're in the hot shower and you heat up that cold isn't as shocking as you think it's going to be. And again, that's just one easy way.

The other thing is called contrast hydrotherapy. And in clinic we do this with patients and we do it a little bit more technical because there's a device we use with it.

But basically you just get a regular towel, you put it in warm water, get another towel and put it in cold water and you wring it out. You put that warm towel over the top of your chest and then cover yourself in like a nice warm blanket.

You sit there for three minutes, then you get the cold towel, wring it out, throw it on your chest, cover yourself up, leave it there for about a minute, and you repeat that three times.

So it's three minutes hot. One minute cold, three minutes hot. One minute cold, three minutes hot. One minute cold. You always end on cold. The concept is the same is that it's about increasing the blood flow.

And of course in your chest you've got a lot of lymph nodes, you've got a lot of, you know, that's where your heart is of course. So by focusing it centrally, you're helping improve circulation and your lymph throughout your whole body.

And again, if you've got a towel and access to cold and hot water, this is really, really simple. And if you have someone that can help you do it, you can flip over on your stomach and have that person do it on your back.

As well. So you do, you know, 12 minutes on the front, 12 minutes on the back. And again, this is just a simple, easy way to help improve, you know, blood flow, help improve your lymphatics.

And again, it kind of feeds into that whole idea of, you know, cleaning up the junk, dude. I mean, so high quality stuff. I mean, this is, like you said, low hanging fruit, simple and easy.

And to me, all these things really relate. Like it's part of your treatment protocol, right? If it is, I mean, obviously we're not you know, we're giving you these things that you can add and always, you know, we're not giving direct medical advice, but options and things to think about.

What Darren just said is pretty much, you know, safe for just about everybody. And if you're if it's not, you're going to know it is. Right. But I think about it, just like taking my supplements are going to sleep.

You know, all these things are really important. So today, well, actually, I should say tomorrow we have our good friend Alana Villanueva coming to do a little special healing session called The Pain Paradigm.

And I just want to let everybody know now because, she has this, pain paradigm approach that very commonly live during the session, people go from a 7 or 8 out of ten pain down to a 1 or 2.

So it's not going to fix broken leg pain, except it's going to take down the pain that's got that mental emotional component to it. So just think about that.

I mean, you're literally decreasing like your pain level by 6,070% because of your mindset. So we're going to teach you that tool because that's something that's free and that you can use in your home all the time.

And then today's session actually is going to be super cool. Before we dive into some of these questions, Darren, because Doctor Darren and I were talking yesterday because I had that little snafu by my, my music player playing the wrong track for us.

And I realized it like, after it didn't do what I thought it was going to do. Three minutes in and I was like, you guys are all in the zone. So we're going to we've got it for today.

But I switched the order from what we were going to do on, Tuesday to today at special request of Doctor Darren. So we're going to do some we're going to really get in that place where we're crystal clear on our healing intention, become more and more familiar with that state of radiant health that you're moving towards.

And we're going to do some breathing that is going to very specifically help your limbic system, your vagus nerve and your whole body move from that fight, flight or even that freeze state over to the parasympathetic, and then we're really going to just bathe in that and really then give ourselves, like Darren would just say, in a little bit of hermetic stress that a little bit of that positive stress response to promote healing and even reverse anxiety and optimize energy with just a slight breath hold.

And then we're going to go into another, breath rhythm that's going to actually energize you while allowing you to feel energized and be parasympathetic at the same time.

So you're getting the best of both worlds, which is, really great. So hang around for that one. Darren, we've got a couple questions. You know, one of them was and, you know, I love all these questions.

And I see people like Danny have been here a couple times. And Suzanne. So thank you guys for, you know, coming back and hanging out with us. And welcome to everybody who's new to this one and everybody watching the recording.

But one of the things that we see a lot of Darren is people have got issues. You know, they get diagnosed with Sibo and CFO, gastritis, IBS, leaky gut.

And it's like then they dive into the gut rebuilding protocols and specifically focusing on Sibo, but they just seem to not get better. You know, and what's interesting to me is I would actually, and I love Danny's question and I want to make sure we focus on the gut here, but I would insert like, this is not just a gut issue.

Right. We see this with whatever diagnosis somebody gets people, you know, often times they're chasing one diagnosis. And because of the complexity, we have multiple things we have to look at.

And so when we do something like we'll focus on the gut here. But I just want everyone to know, it's like if you've been treating Lyme for a long time and stuff still, you know, stuck.

This is this conversation is going to apply to because in the CBO gut question is I've done all this treatment right, gotten all these different labels.

But then we also have the joint pain, the insomnia, the anxiety, the chronic fatigue, the brain fog, the doctor and I love the etc. in the question because this is what people have it.

The list seems to get longer. So when you feel like there's something else contributing to your symptoms because you've done the work that you've been asked to do in one area, how do you start go about sort of, you know, what might be preventing someone from getting better?

And how do you make a decision if you say like you've seen five, 10 or 30 different practitioners, including maybe ten experts in whatever that field is, be it Lyme or Sibo, and you're still sick, wait, what are you starting to think about at this point? Darren?

Well, you know what I should say I'm not a fan of is reinventing the wheel. You know, if you've seen multiple practitioners, there's a high likelihood they've also probably tried the same things with you that left you with the same results.

I see this, I mean, Sibo is an example. I can't tell me people. I see the gazebo over and over and over and over again and the question has to be asked, you know, why do you keep getting Sibo over and over?

Clearly, the CBO is not the problem. I mean, this is my opinion. It's been my experience. I don't ever cc bo as the core problem. Sibo is the result of something else going on in the gut.

Now, more often than not, it's something neurologic. It's the way that things are moving through your gut, and it's that neurological input from the brain that tells things how to move through your gut appropriately.

A lot of people I work with have, you know, some element of constipation, and they've got bowel tone problems. And that can be secondary to Lyme. It can be secondary to mold, you know, secondary to other toxicity.

But if you're not addressing all those other underlying issues, your nervous system isn't going to function the way it's supposed to.

Calming the Nervous System for Gut and Lyme Recovery

And of course, if you think about digestion as a whole, it's a parasympathetic event. That means it happens when you're in your most relaxed state. Well, you know, gosh, I don't about you, Tom, but most people I work with, they're not relaxed, they're very stressed and they're sick and they're nervous systems on high, you know, guard all

the time.

So that capacity to get your nervous system, how it ties in with your gut and your lungs and your heart. And this is why people have pods. And this is why people have Sibo and all these other secondary things.

Again, if the nervous system isn't firing the way we want it to and turn off appropriately, that's going to lead to the slew of downstream effects. So, you know, I think it's always stepping back and looking a little bit deeper beyond what we we've tested for.

And asking that question, why do you keep getting the same thing over and over? You know, I see the advantage of sometimes working with multiple practitioners, and you've had a lot of things that haven't worked.

You know, Thomas Edison said, I found 10,000 ways not to make a light bulb. You found a lot of ways that don't work for you, and that's information. But it's also prudent to not keep doing the same thing over and over, expecting a different result.

So I think, you know, if that's been your your case. And again, we Tom and I see this a lot. It's really again stepping back and looking at what hasn't been evaluated, what hasn't been, you know properly treated.

And I think the nervous system is one of the biggest obstacles I see in people not getting well because they take all the antibiotics, they take all the supplements, they take all the pills.

And honestly, most of that doesn't really properly address your nervous system in a way that's really going to help ramp it down. So this is where Doctor Tom's talking about, you know, healing mindset meditation, exercise, good sleep.

You know, these are the kind of things that can really help reset your nervous system so that everything downstream functions the way it's supposed to.

Yeah. It's so I mean, it's like all of these pieces together. And, you know, one of the things like, you know, the whole Edison thing about, you know, the definition of insanity, doing the same thing over and over and over, it is it's like one of the I mean, the first thing I think about and granite, this is my, my Sunday afternoon blinders is like, oh, mold toxins.

Right. So immediately when I hear CEO, I think of I know one other thing. And then I'm like, well, I found Lyme of the BSE and Bartonella and even in the gut wall.

So I've seen leaky gut and Sibo symptoms go away. Treating Lyme disease, if that's the primary. And like you said, I mean and I can we can make these I you know, I could just say the same thing you just said over and over, which would also be insanity, I guess, by the quote I just shared.

But the other point of it is on the flip side of this there, and it's like, I think it's so important to highlight it is about getting that nervous system to be common.

I'm going to go a little out of order here, but, there's a question about, which symptoms help us differentiate between a summer day off and a mast cell flare and, you know, it's really interesting when I think about, And I just want to I was sending, Robin a little message here to let let everyone know I should just say it out loud.

And, any question that has anything remotely to do with what's going on in the summit is fair game here. I mean, if for some reason it's to individual or to personalize, you know, we'll give you a general response.

But yeah, don't feel anybody came in a little later. Yeah. We're here to answer your questions, you know. And oh, and just a quick reminder, if we don't get to it all today because this is a bonus Q&A, usually they only do one hour for the end, which will be this, Wednesday the 17th, I think.

No no, no, the 17th. No, 17th. Yeah, 17th. Thank you. And I think we're doing, 830. Oh, hold on, this is the wrong one. 330 Pacific time. Thank you. The masterclass we're doing together afterwards is later.

Anyway, thanks for Doctor Darren and Leslie for, actually, like, being here to be my, keep me on track here. Otherwise, everybody be confused. But, so if we're looking at and, you know, we look at a Hertz versus a marcel flat rate, the first thing I think of is Beth O'Hara.

Right. And Beth is not the be all end of Marcel. Just like I'm not the be all, end all of lineman mode because we're we're all out there treating all of these things together and in unique individuals.

But one of the things that Beth is so good at, and it addresses several of the questions, or at least starts to that people have is she's super sensitive, like super duper duper like micro like little open up the pill, put a couple grains in your salad.

And she's like, used to flare. Now she's gotten to the point where she could do more and more and more, you know, but she starts with this, this calming of the limbic system, the calming of the nervous system and getting you into that parasympathetic state.

And part of the reason is that's our rest. Digest rejuvenation and healing. State your body if you're in a fight or flight mode. But like think about it this way. I'm in.

I'm at the Darren and I are hanging out with our families for Mother's Day. We're out in the woods because we're nomadic people. We're around the campfire at night, and all of a sudden there's a saber toothed tiger right up over here.

So the thing about the saber toothed tiger is I can either fight the saber tooth tiger, or I can fight from the saber tooth tiger. But in either event, I'm pretty sure I can win.

So if I turn around and fight, I know I have a pretty good chance. And the other one is on the opposite side where I'm like, I got to get out of here.

I don't I'm not strong enough to win, but I know if I run, I have a half a chance. And then there's that other state, though, which is freeze where we're in this state where we don't think we can win anymore.

So we shut down and we essentially our reptilian nervous system, our ancient keep yourself alive part of your body is going to play dead. And so when we look at this, I just think it's important to have that as a background knowledge that your body is doing all that on your behalf, but with mast cells and flares, like, you know, the mast cells are kind of like looking around and they're on they're on guard.

They're like sentinel, right? They're protecting your body. And when they get hyper reactive, you start to react to all kinds of things. And someone is mentioning in a question about, hey, you know, there's foods that bother me.

And but then, oh, then it might be sense and then it might even be like chemicals on my clothing, like, but it's like you have an exposure and you respond.

So a lot of the mast cell flare stuff has to is close to food or another exposure, whereas like a Horkheimer or a true Horkheimer actually doesn't even occur in Lyme disease, which is kind of interesting, but a Hertz timer we mostly call a die off reaction, meaning I gave you, I took something, I took a cycle, and I took an herbal concoction or whatever, you know, or I, you know, and then something is dying and it's letting off a toxin.

Right? So technically, most of the stuff you and I are treating, Darren don't even do that. But but the colloquial way we use it is that it's like, you know, I do something I have a reaction to because I think a lot of people, even if they talk about detoxification, oh, I increase my foster total calling as we talked yesterday, or I took a bunch of binders even, or I went in a sauna.

A lot of people call that a I'm a reaction when it's more of a detoxification reaction. But how do you separate those two out? Yeah, I mean, I see her it's related directly to active treatment for Lyme or any kind of infection because we see it with yeast infections and other types of microbes, and it tends to be, again, more flu like symptoms.

It can be body aches, it can be brain fog, fatigue or just an exacerbation of your existing symptoms where what's mast cell activation. It's the reactions are different.

And of course with mast cell activation it can be different tissues. You're going to get in the gut the skin, the brain. So I see even mast cell issues sometimes being more like a systemic than a regular Hertz reaction.

But I think it, like you said, has more to do with is it directly related to you feeling worse after you started an active Lyme treatment, or does it seem to be triggered by, again, something you've eaten, chemical exposure or mold exposure?

Because often people with mass activation, they can tie it in to I was in a certain situation, a certain environment. Then my symptoms got worse. That would lead more to mast cell activation than like a die off reaction.

Yeah. Nice. And then for people who are like, you know, because like if you're having, some chemical sensitivity, you know, got exposed to some other thing, maybe like mold or even a fire, you know, like, you know, these things actually, in the regular world do happen that are, you know, like most people don't like, come in my office, go.

There's a fire next door. But sometimes those kind of, you know, regular life happens around you. But then they start to. And I and we have a great question here, but I also have people in my practice where it's like they're sensitive to so many things and even like different plastics and clothing with the, the detergents, and they even just put it on their skin and get hives right away.

I mean, that kind of point you in any particular direction or do you have any, you know, thoughts about that? And, and, and I guess the last part of that question is like, hey, like a sauna, something that might be good in that kind of situation.

Well, I think when people get to that level of hypersensitive, often I find like chemical sensitivity tends to be the pinnacle of other underlying sensitivities.

So often I see it starts out as food sensitivity. Then we see people develop environmental sensitivities to mold. Pollen does get together. Then they become chemically sensitive to detergents and perfume and other chemicals and then kind of the pinnacle of that is people come electromagnetically sci fi and cell phones and electronic devices bother them.

So ultimately, again, into how do we lower the load on the body. And some of that you can do by what you choose to put in and around your home, the kind of cleaning materials you use.

You can turn the Wi-Fi off at night, you can do those kind of things. And again, in our practice, we do a lot of immunotherapy to start desensitizing people to these different things once they've been identified.

But ultimately it's, you know, what is it that's caused your immune system to become that hypersensitive in the first place? And again, we find it's almost never Lyme by itself, whether it's Lyme plus mold, Lyme plus something else.

So again, it's doing the different types of testing to help identify what those triggers are. Cool. I'm just, we I am working on a response to a question about what the dates of the masterclass will be, so I'll put them in the chat.

So one of the other things to Darren is like, hey, somebody was mentioning, John said, hey, I've been bitten by a tick a few years ago, tested positive on arm and for Borrelia, and the one thing I don't know, maybe you can throw this in the regular chat.

John is just like Harmon has T-cell testing as well as antibody testing, you know, so they're kind of you know, we

have that sort of that multiple different possibilities of arm.

And but if you're positive you, you know for Borrelia, you're positive. Right. And you know, mainly joint pains and swelling, especially in the morning.

Sometimes some insomnia, a little nervous system being hyper stimulated, which due to the vibration and the stimulation in my body when I had Lyme, the B0 was like off the hook.

So I know I feel you, but you know, right now doing a month of doxy, wondering if they have Nora or, you know, Lyme or arthritis from Lyme. And, you know, what do you do?

Like, do you do more doxy, more antibiotics, more herbs.

Mast Cell Flares, Chemical Sensitivity, and Detox Reactions

And I mean, I think from my and I just want to throw another piece in here is like, neurologic Lyme is, I think, a very overdiagnosed, or overused concern.

And I think it really impedes people getting better. You can have symptoms that are neurologic in nature, but not necessarily mean lyme's in your brain or your nervous system.

Right now it may be, but that also doesn't mean Lyme doesn't like eat your brain like a cancer would. Yeah. But, you know, and the big deal is going to be, understanding that you're having neurologic symptoms.

Right? So symptoms that impact neurologic system, they're not lyme's in your nervous system is something that you need to, you know, work with a professional who is skilled in this to know.

And a lot of times I think, Darren, the reason I say this before I give the floor to you is I think a lot of people then just go to this, oh, I need an antibiotic or an herb that penetrates the blood brain barrier.

I need an IV. And to me IV is super dangerous. And there are times and places like, you know, second and third degree heart block, acute Bell's palsy, stuff like that.

But I mean, in a chronic state, I just find that like people are one most of my people don't come in with an intact blood brain barrier anyway because they're gut's a disaster.

And unless you're eating like a pristine diet and you have no gut symptoms, don't expect your blood brain barrier to be functioning by the textbook. And then if you look at the textbook two I read an article.

And within the last 18 months, I, where the what we think about the blood brain barrier is actually not true. It's nowhere near as non permeable. So most of the stuff that we're worried about, if you have neurologic symptoms and we're treating you and your null logic symptoms are going away, don't assume that they're not working on what needs to be worked on.

Right. Because I think a lot of people like, well, I didn't get the right drug. I didn't get the thing. I'm like, are you better? Well, yeah. But even though I'm better, but, but but I didn't get what I need.

And I'm like, well, you're not qualified to tell me what you need to be totally honest with you, right? For two reasons. Because even if, if like for me, I am not qualified to tell me what I need, I would need personally, I think that it would be better to have an objective third party.

So if I were sick again, I would call Doctor Darren. I'd go fly out to California and see him and let him tell me what he thinks. I would tell my story.

I'd tell him what I thought, but just remember, it's really hard to be objective to ourselves, even if we're a physician

who's got a decade and a half or 2 or 3 decades of experience, I.

And that's why we try not to treat our own kids so or our spouses, because it's hard to be objective. So anyhow, that's a lot. Just a public service announcement. Neurologic Lyme.

As long as your symptoms are changing and maybe a little flare, then getting better or just getting better, you're probably on a decent treatment, you know?

But what do you do, Darren? I mean, now that I've totally sidetracked our whole conversation here, if you know these symptoms. Yeah, I think it's important for people.

Understand again, when you look at the research, we know that Lyme specifically can cause antibodies against both the gray and white matter of your brain and your peripheral nerves.

So a lot of the neural logical symptoms that people experience, like I said, it's not true Lyme disease in the brain. It's the autoimmune effect of having Lyme elsewhere in your body that just happens across react with your nervous tissue.

And I would argue that's probably the majority of neurological symptoms that people truly experience. So again, as we lower the load on the body again, we can help correct a lot of those neurological symptoms.

Whether you again, you've got a specific anti-microbial therapy that crosses the blood brain barrier. That may not necessarily be as important as just, you know, dealing with the infection as a whole.

And again, so many of the therapies that we do, you know, do that effectively without necessarily having to get into IV antibiotics, like you said, come with a lot of risk or even getting into Doctor Horowitz's DAB zone therapy.

Again, I think there's a lot of things we can do that are a lot safer and are equally effective. But it's important understand that that capacity of Lyme.

And we're seeing research again with Bartonella and BBC and other infectious agents that caused this cross reaction with our nervous tissue. Again, it's really about down regulating that autoimmune response.

Yeah. Totally agree. And we have a question. And this is great because Darren, before becoming, a, natural Catholic physician, was a microbiologist who did Lyme testing.

So we had a question about positive IgG results for Borelli and Baeza. Does this necessarily indicate chronic infections, or could it mean past infections that have basically resolved?

And is it different? For example, positive results. So understand what these antibody levels mean. You know, AGM is typically the thing that we think of as being exams.

Your acute antibody IgG is your long term antibody. The problem is where you get tested relative to your exposure matters. And some of the people that we work with, you know, their exposure of likely happened months to years.

You know, before they actually get seen by a doctor and get tested. So I think in our world, IgG, if it's IgG specific antibodies to Lyme is relevant.

You know, the CDC criteria understand for any Lyme test was never designed to be diagnostic. It was designed to monitor people that had known Lyme disease.

So you have to have two out of three IgG antibodies on a western blot or five out of ten IgG antibodies. And again, a conventional infectious disease doctor would say, well, if you're IGN's negative, even if you're CDC positive IgG, that's an old infection, don't worry about it.

But what we're really trying to determine with testing is have you had exposure because ultimately the diagnosis of Lyme disease is clinical. It's based on your signs and symptoms.

The piece of paper just helps us validate that, yes, you've had that exposure to the organism. And then we put two and two together. You've got the clinical symptoms.

You've got tests showing you've got these antibodies to Lyme. So I think IgG at least for Lyme is relevant as it is for Bartonella and Berbizier. Because you can you should not have antibodies to these organisms at all.

They are not part of your normal flora. Now Mycoplasma you know, low levels of IgG because it's such a common organism. And most people have been exposed to this organism over the course of their life, probably when they were a child or a teenager.

So having low levels of IgG to mycoplasma doesn't usually manifest anything clinically. But when we see it for Lyme, Bartonella. Boucher really, any of these other infectious agents that aren't really part of your normal flora, and it's not something you get regular exposure to just throughout your life if you've got clinical symptoms.

I think, you know, we would probably both treat right. And, you know, one of the things about some of this, like, I don't know, I made this up, I think it's cool, but I don't really know if it is.

But you can't have chronic Lyme if you've never had Lyme. Right. So if your exam is negative, and then you have an IgG, but you have symptoms consistent.

Hey, you've been exposed at some point. So at least the possibility is on the table. And then the other thing, and I was answering a few questions. So Darren cut me off if you already answered this one, but I don't recall hearing you.

I was trying to multitask. Bartonella Hensleigh by the book. Now, this is not a galaxy or an I gen titer because, they use different ranges. The same concept applies.

But if you go to Quest or Mayo or a group or anywhere like that, and if you have a titer that's 1 to 256 or greater, that is that in an IgG that is consistent with a recent or an active infection, because the in particularly in Bartonella as well as brucellosis IgG that are fleeting and almost never helpful because we don't see them where IgG is more related to that sort of a current infection, you know.

So if you look at like galaxies saying that's why they're only doing it. That's why I'm presuming they only do an IgG. And now, as most of you know, I love the, you know, the I immuno blot for Bartonella because we're looking for a lot more than just Hensleigh.

But if you go by the book and there's a physician, I've had two even neurologists tell me, oh, no, no, this is an old Bartonella. I'm like, well, they've got splinter hemorrhages under their fingernails and they've got weird heart stuff.

And they have a totally, you know, like a one the, you know, 1028, you know, titer. And I'm like, holy crap. That's like way, way too high and like, oh, it's old.

And I'm like, no, no, no. Go to up to date, which is an online physician resource. It's like the number one one out there. And you can find Bartonella, Hensleigh IgG like exactly what I just said.

And I think it's important because a lot of doctors just look at em is new Jersey is old, but m isn't new unless you also have a G. So that's kind of a pain in the rear end.

But I just want to throw that out there. So Bartonella is like that. And then least thanks for saying I'm you know they are. You've had a conversation with Doctor Monisha.

You know, I think what's interesting is how do we apply that. Are you V is that it's it's really interesting. It's like all

this stuff I want to eat. They say I shouldn't eat and I don't mean like, like take out gluten and dairy and soda and stuff, like.

I mean, just like the stuff that I go to when I kind of need comfort, even if it's in the healthy category. They may say, hey, you're overdoing that move to another direction.

So they're looking at those three primary dosages and then how you present your symptoms. And it's more of that unique individuality. And they do use more grains and legumes in some aspects of it.

But that's why it's important to work with that particular provider. Because, you know, for as many times as I like to eat a primarily paleo diet, I mean, you know, I don't know, Darren, I break a lot of rules.

I'm like, unless gluten, dairy, Sawyer, corn are really kick in your ass. I'm not. I don't worry about it that much. I do go generally, you know, go grab Darren's book.

We'll get the lime solution and generally apply that. Now, the caveat with that is the sicker you are, the more likely you need to be really stricter with your diet and the less sick you are.

As you improve, you develop more metabolic flexibility and resilience. But, you know, it's interesting, like, if I were going to do an are you Vedic approach, I'd work with someone who knew the are you Vedic approach, and that would be all I did right?

I wouldn't do, I wouldn't go, are you Veda plus? Oh, I'm going to look at Cynthia Thurlow. Intermittent fasting. No, Terry Walls approach. No, I would do one.

And the reason is, unless your provider is the one, you know, like if Monisha and Doctor Walz and, Cynthia Thurlow all got together and came out with a book on.

Are you Vedic intermittent fasting with the super tons of veggies and organ meat? I might do it, but it needs to be put together by someone. Don't freestyle and grab bits and pieces of different protocols, you know, and and beat yourself up with that.

And there's like we also have a question and Darren, love for you to chime in on, if you're trying intermittent fasting because there's potentially a lot of benefits, you know, would you do that.

Just issues who often, can't keep weight on so they lose weight easily?

Lyme, Bartonella, and Interpreting Lab Results

Difficult time digesting a lot of food at once. So they tend to eat smaller meals frequently and usually can't even get to a 12 hour window because of the way they need to eat.

I mean, would you suggest intermittent fasting? Would there be a step up process or would you do something differently? Yeah, I mean, for people that have different issues around, how your body responds to food.

And again, it has to be very individualized. So there's no one, right answer to that. I think, again, if you find that you can't do 12 hours of intermittent fasting, then don't do that.

If it makes you feel worse in whatever way or you can, you find you lose weight easily. But again, you know, we try and find things that help the most people, but there's no one thing that helps everybody and you're metabolically unique.

So if it doesn't work for your metabolism, your body, that's okay. You know, it's really, again, about what works well for you. So I know I have people that need an intermittent fasting or a time restricted feeding.

Can mean a lot of different things. I have some people that do 20 hours of fasting, four hours of feeding. I people do 16 hours of fasting, eight hours of feeding.

And, you know, some people just do 12 hours. So again, I think for those who can do it, there's a lot of benefits, like you mentioned, with autophagy.

And, and there's another way of kind of reset your immune system. But again, if for whatever reason, again, without knowing enough about your history, it's hard to answer.

But if it isn't metabolically fitting you and it's causing more issues than it's helping, then that's not the right approach for you. Yeah. Yeah. I think it's like figuring out, like, there's a lot of ways to promote autophagy.

There's peptides you can get, those are the ones that stimulate autophagy. Only through a practitioner there. And the injectable there's not a capsule version.

There's exercise, there's restricted eating, there's cold and hot exposure, especially cold exposure or the, you know, kind of the constitutional hydrotherapy style that you're talking about earlier.

I think, and then, you know, breath retention, which we'll get into in a little bit and just in and if you're too sick to hold your breath, it's just getting breathing in that rhythm where we're slowing your breath down so that carbon dioxide gets a little higher than it was before.

And it puts that little bit of that hermetic stress. So and in fact, if you go back to day one and you listen to my conversation with Ari, when I mean literally a time, a reaction is a type of for medic stress, if it's a true Horkheimer.

So you have a I have a small dose of a stressor on the body for an appropriate amount of time that then goes away. That actually helps you get better.

That also in a true hurts or even a mass cell reaction that's not prolonged. And that's the problem like Horkheimer is that or 2 or 3 weeks longer, not her time.

Or is there other things? Right. I think you and I talk about this all the time, but the bottom line is these things that we call die off reactions. I live in osteopathy.

A lot of my, colleagues and especially heard it from one of my mentors, like got 18, 19 years ago. He calls it all a vital reaction. And I was like, so if you if man, when I have patients call me up and say, I'm having a vital reaction, is it okay to let it ride or do I need to detox more, or should I back off because that vitality is your body working?

And then it's also stimulating additional hormones, which is actually part of the healing process. And if you ever if you guys ever have heard of like platelet rich plasma treatment or PRP, essentially what we're doing is we're like, if you took my knee that's got been beat up for years and stuff, and I have definitely done stuff on it and it's like 85% better.

So but I mean, when you have like physical damage, you can still do a lot. But the problem isn't inflammation, right? It's chronic inflammation that doesn't get turned off.

So acute inflammation helps healing. But if it gets prolonged then we have the problem where it breaks down the body. And so what we're one of the things we're looking at with PRP just as a total weird, example is you can, shoot this platelet rich plasma into someone's joint or other places.

And with the goal of causing acute inflammation to turn off the chronic inflammation. Now, this doesn't work like you just don't do platelet rich plasma all over your body if you have Lyme.

Or there's another cause, like in the knee example, it was just an old injury and that wasn't fully healed. But the point being is a little extra acute stress can turn off the chronic stress.

And that's really a lot of what we talk about. And so yeah, and I know that Joyce, Leslie is going to get back to you on your question. And so, Darren, real quick, before we jump into our healing session so we can actually experiences, I've mentioned, you know, we have that, masterclass that, if you haven't purchased the summit already and you want to these two masterclass series that some people have mentioned in the chat where we're going to do the live Q&A, and some training with Doctor Dan and I afterwards.

You can if you purchase, they'll give you when you're in the purchasing process, you'll have the option to upgrade if you've already purchased, you know, Ding Leslie and or ping Leslie and, she can help you.

And so Darren, do you do you just want to give a little kind of like, foreshadowing of what we're going to be talking about? Yeah. You know, doctor Tom and I had a little chat about this yesterday after the session, and I think, you know, we want to bring the most value to you.

And I think the things that we get asked most by our patients to and the community is large. I think one of those sessions, we want to talk about specific protocols that we use with the understanding that everyone's uniquely different.

But I've certainly used things and Doctor Tom's use things that have helped a lot of people. So we'll share some of the protocols that we use with our patients.

And one of the sessions, and I think the second session we want to address where people get hung up with, like, why do people not get better? So we want to kind of walk through some of the things that we see in our clinical practices with our patients of why people get stuck.

And and we'll share some of those tidbits during that session. Awesome. And a couple quick questions before we dive into our session here. Yeah. So when do we anticipate that amazing offer from Trina Felber?

She's doing like a 60% off type of gig or something that I just heard about. She told me she'll be sending me the information to share with you. You know, I'm hoping, by tomorrow, the next day.

So we'll make sure we get that mailed out. But also, I will, buzz her when we're done here to wish her a happy Mother's Day. And I will ask her, or I sure will remind her that everyone's asking.

And, we'll share that with you, maybe as early as tomorrow. So, thank you, at least for reminding me. And then Robin was talking about, Alex's awesome tick protection talk with Doctor Darren Angles.

And, you know, just wanted to add that a lot of us are spraying our clothes when outdoors and dog fur with, like, an orange guard, an orange essential oil, just make sure there's no cats around.

You know, that's the thing that's so interesting. Some of these things that are great for cats and or I should say dogs and and and people not so great.

For cats, just like dark chocolate in the right, dosage is really great for us and not so great for our dogs. And permethrin, I love I don't, you know, one of the things I love about permethrin is if you spray it in your socks and your shoes, then you let it dry, and then you take it out.

It's nontoxic and it decreases the, you know, the amount of ticks on your body. Statistically by over 70%. But if you were to put a few drops of that in the creek around the corner from you, that's in a liquid form, it would kill off like most of the quality aquatic wildlife and vegetation.

But when it's dry, you can walk through the riverbed with your sneakers and you're fine. So we just, you know, keep those things in mind. So, Oh, yeah.

So is just a quick clarification. I said, about IgG and IgG. A lot of times what they say is like, if you have a lime IgG western blot, that's you have the Eliza positive, then you have the I am positive some doctors even want you to

also have an IgG positive, which is partly problematic because Johns Hopkins researchers found and this is in Doctor John's lab, who I would say is way more aligned with treatment of chronic Lyme than, say, doctor, all codes group.

But doctor all codes group is like, we just want to know what's going on, right. They're kind of in the middle of this, these warring factions on either side.

And they found that IgG conversion is actually infrequent, whereas the predominant wisdom, dogma is that it's common, that you'll have an IG. So I was just kind of poking Jesuit like some people, just like if you're Mycoplasma or your Lyme or your bébés, you know, if if you're using an antibody test, they just want your exam and IgG to be positive.

So even if you're exam positive and you have a rash and you have an Elisa positives here at CDC positive, they still want more. So it's almost like so yeah.

Kathryn, just to clarify you, you're not. The problem is like no one's automatically positive on anything like what Darren was saying earlier. It's like it's exposure, right?

You've seen the organism. None of those tests IgG am an IgG. Do not say that. You're you're sick from the organism. Just means you saw it. And we're trying to figure out, which of the ones you know what your turn is on labs plus your symptoms tells us kind of like where you're at in the whole process.

So. But, yes, the Bartonella IgG is positive. Positive. Right. And then, you know, the last one here, just a comment. I think it is Darren is like, hey, like after 25 years, I had positive testing.

You know, I had positive testing eight years after the initial tick bite and showing acute stuff. But the biggest problem was like, you know, these, you know, sometimes our immune system, like you were saying, the timing, how is our immune system doing and how do they react?

So, yeah, and we know we know from the research too, that you can have antibodies to Lyme 20 years after you've been treated. So again, this is why I never base treatment on antibody tests.

In fact, in my practice, at least for Lyme, I never retest Lyme after we've identified exposure because in my world, it doesn't matter if you're symptomatic, we're going to treat you as such.

So I've seen people make themselves crazy of chasing antibody levels. And if you're feeling well, you know, if you're exams positive, it doesn't matter.

Because again, we're really based on how you're responding clinically. That antibody again you know we get into this deeper question of do we ever completely eradicate Lyme.

And I don't think any of us really know the answer to that. I think the consensus is probably not. You get to a point where it lives with you, you live with it, you don't bother each other.

So same thing. I think if you get Epstein-Barr virus, you're going to have IgG antibodies your entire life. It's just a sign again that you it's there.

Your immune system manages that, but it's not necessarily the problem. So don't don't base your treatment just around antibody levels. Ultimately the way that you feel is going to be your best marker on how you're doing.

Yeah. And like if someone's not getting better and they're stuck after a prolonged course of treatment, I certainly re lab people to help monitor what we're doing.

But if that you know, it's not the be all end all. But the biggest challenge I run into is a person who's completely fine. They're back to 100%. They might even be better than when they first came to see me.

And better than before they got sick. And then they want to get a test and like, oh, man, I'm sick. This is a problem. Like the CD 57 like, is a useless test.

And Doctor Staveley, who uses a lot of it, studied it and finally with someone who took it out and they said, hey, look, if I do three times a day, five days in a row with a group of people, they found that there's more than 120 point swing within the normal range.

So if they were to draw your labs 15 times in one week, you could have 120 point different. But if you're below 100, you're about to die and you have chronic Lyme, you're never going to get better.

And if you're above 200, you're fine. But I know people with a 300 who feel like crap and they're like, oh my God, I can't believe I'm at something else.

What's wrong with me? Like, no, you're putting value. You know, you're asking a test to tell you something and you're giving it like this value that it doesn't actually have.

That's not what that test is for. And so that's why it's really important to understand these tests or help us. And that's about where we can go with it.

So there I think it's really a good ad. It's a great place. Like one of the reasons we like to close these sessions with these, you know, brief, you know, today we'll do, we'll do about 16, 17 minutes of this healing session, is because whether you're sick from before, you're sick now or you haven't been sick, and you want to have your immune system be at its highest level, this is part of that healing that keeps the EBV.

And if it is like for me, like, I don't know if Lyme is still in me or not because I hadn't had a symptom in over 12 years, and I don't really care if it's in me or not because I'm just like, hey, if you're not bothering me, I'm not going to bother you either, but I'm going to do the things that allow my immune system to keep it chill.

So and by special request, this is a doctor. They're in the session today, so I'm really excited to do this. I think we've got the sound share on. Yep. Looks perfect.

So we will get started. So as we get started, take a moment to go to the music stop for you. Darren. Yeah. It did. Oh, cool. Well, give me just a moment, guys.

That's really strange. You hear it? Now I hear it. All right. Cool. Let's start over. So as we begin. Take a moment to become aware of your breath. As you inhale.

And exhale. And in this moment of awareness. Allow yourself to be seated comfortably. Or lying down with your arms and legs by your side. Allowing your eyes to close.

Intermittent Fasting, Autophagy, and Hormetic Stress

And in this session, we'll be inhaling through our nose. And exhaling through our mouth. Nose. Allowing ourselves to have a sigh of good feelings with each exhalation.

And we have some special breathing rhythms today. And our first session will be breathing in for for the nice slow eight breaths on the way out. And then our second session of breathing start with four in or out, transitioning to two in and two out.

Nothing to remember as our guide to you all the way. Through this practice that will take you to the gamma brainwave state. Allowing you to get in touch with your true self.

Reigniting and invigorating that healing flame. That healing light deep within. And with each breath in and out. Allow that healing light. To grow. Cleansing and revitalizing every cell in your body.

And brings to mind that state of health that you cherish so much. That you're welcoming into your life in this moment. As you allow this vision to come into your body, it's a vision of health nourishing all of your cells.

It's natural for negative thoughts, negative emotions, and your old patterns of thinking to come up. Take a moment and smile at them, allowing them to effortlessly release.

Releasing any of those thought patterns. That have kept you stuck. Kept you sick. Effortlessly releasing these with each exhalation. As we get ready to breathe in a rhythm.

Breathing and be aligning with our souls true healing potential. And on a count of three, let's get ready to breathe together in a three, two one. Exhale. Inhale.

2344123456782. How to three four. Breathing and Love and Gratitude seven eight. In tune three four. Placing all Negative Thoughts and feelings 5678 and two.

Down to 35678. As you go deeper and deeper and deeper with each one. Elation and exhalation five, 678. Breathe in a rhythm to breathing in the deeper and deeper still.

With each breaths, seven comes infinitely easier to. Release all those old patterns four, six, seven, eight. Allowing yourself to stop as little patterns of thinking up to patterns that are doing that is aligned its purpose right up to more health. To.

Four. Six. Seven. Eight. Take a deep ready for any breath in. Hold. Squeeze. And let go the toe. Will. Allowing your breath and hold your breath. To come to a natural.

Stop. As you go deep. Deeper into that calm stillness. When your mind becomes clear. Allowing yourself to install new patterns of thinking. New patterns of doing.

Was aligned with your highest purpose and optimal health. When you have an urge to breathe, push past that just a little bit. Move in to that and welcome that positive stress response.

The one that heals. And then you can take if you need a little step in. The breath out. As you go deeper into the state of this. Up opening your heart up and receiving the healing up.

And when you can't hold your breath any longer. Take a breath in all the way up. Hold it, hold and exhale. With a sigh of good feelings. Allowing yourself to simply rest.

Allow your breath to be free. However it would like to be.

Guided Breathing and Healing Session

Relaxing in this moment. As you open your heart and receive those healing codes that are perfect just for you. You are receiving those codes from your Higher self as you connect with source.

Allowing these healing codes to be fully installed. As you reboot your operating system. And begin running your healing program. Now. Open your heart.

And now, in the count of three, let's get ready to breathe together. That's why the endless three. Two, one. Exhale. Then inhale tight. To. Staying in a slightly faster rhythm. To.

Come to in two. Now, as you go deeper, you end deeper. Two. Two. Revitalizing and invigorating that healing force within two. To. Two and two. How to.

Because you are amazing. How? You are a miracle. How can you have everything you need to see how. You just open your heart and allow that love that for and.

To need to breathing in a rhythm. Breathing in. Be alignment. You that healing the frequency of all your sounds to. 232 down to you to. Two. Two. In a moment.

To an. Increase our rate and supercharge your healing. You, And, leaving us in, supercharge. Receiving all those healing codes in, sharing them with every cell of your body.

Us in how you are truly amazing. A miracle of life. In us. Now, take a deep breath. Fully in. Hold, squeeze and release the tone. And hold your breath.

Allowing your mind and the nervous system to rest. Rest and receive. As you go deeper and deeper. Into this healing moment. Opening our hearts. And receiving that healing from our higher selves.

And when you get that first urge to breathe. Override it just a little bit. Pushing past your comfort zone. Into that place of intense growth and healing.

And when you need take a small sip in. And out. Holding your breath once again. And when you get that urge to breathe. Override it just a little more.

And then, pulling the energy up. Up. Take a deep breath in. Hold. Squeeze just a bit. Hold up and release, for the sigh of good feeling up. And join this moment.

Of bliss and joy. Allowing your breath. To be free. And you can play around, holding your breath on an inhale. Or an exhale. Or somewhere in between. Allowing your breath to be free.

Opening your heart up and receiving. The healing. As you allow this future moment. To come into your life and become reality. Now, As we close our practice.

I feel the aliveness in every cell of our bodies. And be grateful for this time you dedicated to your own healing. And how these simple practices. Can balance our nervous system and provide us with energy.

Reduce our stress. And release any of those old patterns of illness. Simply with an inhale and an exhale. So much love and positive energy to all of you.

Thank you for joining us today. We've got, day six ready for you already. And, thanks for joining. Doctor Darren. And I. And thanks for making this so special and for all the moms out there.

Happy Mother's Day and we will see you same time, same bat channel tomorrow. Be well everyone. Lots of love.