## Introduction to Functional Edge and Brain Harmony

And what we quickly found was that the brain does not know how old it is. It does not know what diagnoses it has or has not been assigned. It only knows how to change based upon the input and experiences that it's given.

So we feed the brain and nervous system the most powerful, beautiful, gentle, input, frequently relying on sound frequencies, bone conduction, alpha waves, vibration.

We pull in primitive retained reflexes. We establish balance and vestibular strengthening. We can even do the fine-tuning of the functional movements of the eyes for attention and academic learning.

And we can do this with all ages. We can start at two years of age, and then our oldest client that we treated is 102. Welcome to the Functional Edge.

I'm Dr. Julia Ward, and this is where science meets real world strategies for living healthier, sharper, and stronger. From uncovering hidden environmental toxins to unlocking peak performance and mental clarity, we cover it all.

Ready to take control of your health and thrive? Let's dive in. Hello, and welcome to the Functional Edge podcast. I'm your host, Dr. Julia Ward, medical director and founder of Balanced Body Functional Medicine.

Today, we're honored to welcome Carol Garner-Houston, founder of BrainHarmony.com, to the show. In this episode, Carol will be sharing her insights on brain-based healing, nervous system regulation, and neuroplasticity, and how personalized non-pharmaceutical options can help both children and adults improve brain function, resilience, well-being.

So stay tuned for an engaging conversation that promises to empower and inspire your path to wellness. So hi and thank you for joining us, Carol. Thank you so much, Dr.

Ward. I'm so glad to share this great information with your listeners. Great. So can you share a little bit about your background and what inspired you to create Brain Harmony and focus on healing the nervous system without pharmaceuticals?

## Carol Garner-Houstonu2019s Origin Story and Pediatric Breakthroughs

Yes, so I am an occupational therapist for 28 years, and that was my career path. And then my husband and I were blessed with two young children, but both of them turned into insulin dependent type one diabetics.

My daughter at age three and my son at 16 months. So our children and our family experience that part of the childhood epidemics that are now a lot more information is now being discussed these days, which is great.

But we were the old school of families who were tumbled into this and we really didn't have a genetic predisposition to this. But all of a sudden we found ourselves providing 24-hour medical care, 365 days of the week.

This was finger sticks and we were still just doing the little injections. This was before continuous glucose monitors. When my children, it was time for them to go to school, we couldn't just drop them off at a school and say, okay, see you later, I'm going to work.

So what I chose to do, they were going to a little Montessori school. So instead I chose to volunteer at the school so I could be there and the kids could get their socialization and get their regular academic, you know, young learning aspects filled.

And while I was there, I was noticing there were children who couldn't read. There were children who couldn't write. There were children who were so hyperactive.

They were literally like climbing the walls. We had children who were screaming bloody murder just to get them out of the car and come to school. And I was like, what is happening?

And that's in addition to the endocrine issues and autoimmune issues that my children had, right? So I began to work in pediatrics. We did beautiful work.

Everything though was manual interventions. So handwriting, we did regulation, we did do a lot of wonderful things to help them in those environments.

Then I opened up my own practice and I had the large clinic model and I brought in my first neuroplastic tool. I took a continuing education course, and it was on a listening program called the ILS Focus System.

And I thought, well, wow, if this tool can do half of what it says it does, I'm like, I am in. So I brought it into my clinic. I put it on that first child's head.

And after 60 minutes, that child walked out a completely different child. And I looked down at my hands and I knew what I had. I had never seen anything like it in my career.

And then from that point on, I've been putting it on everybody's head that came in after that. And we've have just had amazing outcomes with the application of just one neuroplastic tool.

So then I started to look into all kinds of different modalities and interventions that were not pharmaceutical-based, that were not so invasive, but instead providing these brain-changing as well as nervous system-changing protocols that changed the system for optimal function and abilities, and by building literally the neuron connections, those changes were sticking and staying.

What used to take years in the clinic model with experiences and repetition was now shortened to several months time frame. And so you can accelerate the development of working with a child with delays, all kinds of different issues.

Of course, we jumped into rewiring the brain for kids with learning disabilities. We can do that with our eyes closed, actually. It's very surprising to hear it that way.

But we rewire out of dyslexia, out of private schooling, needing accommodations at school. We also speech and language development, developmental delays.

We can move that needle on the autism spectrum significantly. Some friends we have walked out of that diagnosis as well. So we started using these neuroplastic tools to make these changes in the pediatric population.

But then we started treating older children and then somebody had a cousin in another state and then poor mom who was coming to us, you know, she was just as disorganized as her children, as her child was.

So we began to offer it to the adults. And what we quickly found was that the brain does not know how old it is. It does not know what diagnoses it has or has not been assigned.

It only knows how to change based upon the input and experiences that it's given. So we feed the brain and nervous system the most powerful, beautiful, gentle, Input, frequently relying on sound frequencies, bone conduction, alpha waves, vibration.

We pull in primitive retained reflexes. We establish balance and vestibular strengthening. We can even do the fine-tuning of the functional movements of the eyes for attention and academic learning.

And we can do this with all ages. We can start at two years of age, and then our oldest client that we've treated is 102. Wow. Yeah. That's awesome. So from two to 102. That's amazing.

Yeah, so brain harmony emphasizes neuroplasticity and a personalized multi-sensory approach to brain organization. Can you explain what that means and why it's so powerful?

Yes. I'll refer again to the ILS focus system because that is the best known tool for multi-sensory processing. And by multi, there's first the listening programs themselves.

There's therapeutic value in the music. Most of it is classical music based. But then they have taken specific sound frequencies and embedded them inside of the classical music because Certain parts of the brain and the anatomical structures of the autonomic nervous system respond to certain sound frequencies.

## How Multi-Sensory Neuroplastic Tools Work

It's amazing that we know that at all, but then what's more amazing in taking those frequencies, embedded them into the music, so if the user is putting it on their head on a regular basis and following in the sequence, the tool provides and delivers the listening program through the auditory canal where it's going to exercise the muscles of the inner ear and stretch and do gymnastics, allowing for the therapeutic features to pass through the tamponic membrane and then can have a shortcut to the brain and the vagus nerve that goes through the body.

So that is one type of sensory input auditory with frequencies enhanced and suppressed to accentuate those frequencies that is then received by the brain.

And depending upon what frequencies, depends on which part of the brain, we're building those connections. But it also sends the same music and therapeutic frequencies through vibration, through a bone conduction piece that sits on the top of the head.

We need it at the top of the head because it gives very strong input to the cerebellum. So you have balance. You know where you are. You are grounded.

You are present. And it will send those sound frequencies through subtle vibration, through the skull, through the brain, to a brain stem level. It can also tap into the anatomical structures of the vagus nerve, which has super powerful features.

And that's how we can get multi-sensory input, auditory, enhanced frequencies, bone conduction. And when you deliver it through this process, it is actually providing accelerated maturation, or cooking is what we call it, for the sensory system.

I have not seen anything else on the planet be able to do what this one does. In a large clinic model, if you're bringing someone to a clinic, they're trying to set up experiences, multi-sensory experiences.

They'll be vestibular swings. They might have sensory bins. They might do the Wilbarger protocol with brushing and joint compression. They might give proprioceptive input with real deep pressure.

They're trying to expose the nervous system through manual experiences to multi-sensory input, which does help, but not as quickly as doing it with this accelerant modality.

So that's what we mean by multi-sensory. We also like to tap into that vagus nerve as well, and we can use other tools to do that, which provides other type of input to the sensory system that provides accelerated organization shifts and changes.

The manual protocols, the best from the clinic model, we still use. We do bring those into our telehealth platform, which is still feeding these other sensory aspects of the nervous system, like vestibular, like primitive retained reflex integration, like functional vision training.

Okay, wow, that's amazing. So what are some of the common misconceptions about neurological disorganization and who can benefit from this type of brain-based work?

So lots of people think that once you have some sort of illness or an insult, an injury, a stroke, a TBI, even trauma, you have these experiences Maybe you go through the medical industrial complex for a little bit, but then you're discharged and you're essentially not really getting anywhere.

Nothing's moving for you. And people just think that that's the ceiling of their development. Like, this is it. I've been giving this diagnosis. I've had a stroke.

I've lost function on my right side. That's it. We're just going to compensate for the rest of our lives and depreciate on our couches. And that's definitely not true.

I take it as a personal dare to go into a person's brain 10 years after a stroke or after a TBI, and they have lost function in the dead brain matter, right, following that issue.

And then we go in, and this was just so exciting. The first time we did it, we're not really sure a long time ago exactly what was gonna happen, but we knew it wouldn't be detrimental but we didn't know how far we'd get.

So we were working with this gentleman with a stroke and we went in and in several months time frame we literally built the neuron connections around the insult in his brain and function returns.

And what does that look like? All of a sudden we're calling his wife on a weekly basis. How's he doing? He's no longer sitting on the couch. He's self-initiated, starting his own load of laundry.

That is absolutely groundbreaking, not only for him, his independence, his ability to care for himself, which is such a personal thing, especially when you get older, but for his caregiver, right?

Then she said she tries to bring him outside to go for a walk, but she couldn't bring him outside because of the incontinence. And it was just too complicated to do.

But now we could tighten up his bowel and bladder. They could go for a walk in the park. And then if he has to go to the restroom, she just stands outside and he can follow through and execute everything he needs to do and comes back out and they can continue on this walk.

So that is, you know, very exciting. There's just really not a ceiling to us. And hopefully what you hear from this conversation is hope that even though you've been given a diagnostic code and a number, and maybe you've gone through a series of different interventions, there is no ceiling.

And I take it as a personal dare to blow the roof off of any limitations. What else is super fun is we started working with a lot of individuals with cerebral palsy.

And again there, I'm not really sure exactly what I was going to be able to accomplish, but what we were able to accomplish was absolutely fantastic. So, especially with this one little girl and there was one side of her body that was more severely affected than the other.

Well, once she starts doing this work, all of it, everything that I've shared with you, all of the pieces, because if we just did one or two, you're not going to get this full type of response.

But she's doing all of it and she was taking some swimming lessons. And the mom just sends me a video of the swimming lessons and she's working hard, right?

There's lots of wiggling and one side's going, but there's that other side. You could just really see there was a lot of struggle. until she started to do this work and then all of a sudden you see both arms coming out of the water you can see both legs kicking you can see her be able to pick up her head and take a breath put it back down and use

all four extremities and so those kinds of things people are just not used to seeing or realizing or being exposed to or even know it's even possible.

Some people might get limited even with like another good example is speech and language. Something that is no longer, you know, in our wheelhouse is you need to develop speech before the age of eight because after that, well, the window closes and you're just stuck.

Well, that's what was taught to me in school, but that's not what we found when we started doing this work. Because the brain doesn't know how old it is, it doesn't know what diagnoses it has or does not have, but it can change.

And by providing this multi-sensory input on a regular basis with customization and guidance from these therapists, we're able to make changes that they're still, right?

They're still learning that this is even possible. So super exciting. That is really exciting. And what a complete, almost a miracle to give people that kind of function back.

Truly a game changer for everyone involved, the whole family involved, really. Yes. And we do treat the family. That's what's also great about what you brought up, which is it's good for the whole family.

And so there's usually one family member, which is the reason why people reach out to us. Once we get this program in your home, once we start getting changes for this individual, we found, well, why not share it with the caregiver?

Why not share it with the sibling who may not have a lot of issues, but there's a lot of trauma and stress in the home?

## Who Benefits from Brain-Based Healing

So we extend these same protocols and personalize and individualize a program for each family member up to four as long as they live under the same roof and can share the equipment and the weekly calls.

But what happens then is each individual gets their own neurological gains. But when multiple family members are using it, what happens is, is that the family, it's like a big reset for the entire family.

It changes how everybody's communicating with each other. It affects then how they're able to make plans for the future, the rhythm in their home. They start to be able to create the rhythm and the life of their family unit the way they were kind of hoping it would be, but they just couldn't get there because of the layers of illness, deficit, and all kinds of different neurological conditions that's just been chaotic for everybody.

But now everybody's feeling and functioning better, and that is also one of the most beautiful parts of doing the Brain Harmony program in the home. because that's not available in a clinic model.

Who goes into a clinic and treats all four family members and has these amazing outcomes in all these different areas? It just doesn't exist unless it's in this program.

Yeah, absolutely. And then just a quick reference for our listeners, if anyone heard the term TBI, that stands for traumatic brain injury. So just to throw that in there.

So can you walk us through how the brain harmony process begins, like from the initial assessment to creating an individualized plan? Yes. So we try to make it very easy for you.

So when you go to brainharmony.com, you should get a pop-up that says, take our quiz. And it's a neurological questionnaire, about 35 questions. If you want therapy for yourself, then complete it for yourself.

If you need to complete it for another family member, fill it out for them. If that person is a child, then choose the child quiz and complete it. Then once you finish it, it will prompt you with my schedule.

And you find a day and time that works for you, I will call you then. We will review the neurological indicators on the quiz and I will lay out the treatment plan for that family member.

On that call, if you have other family members, you give me the highlights and that way I make sure that the tools that we get in your home are for the entire family.

But then I send you a summary email with everything, especially a lot of these super fun testimonies. case studies and research. I put graphics in your email so you can see the neurological pyramid of the order in which we're going to go, but I also put a lot of information about those frequencies in there too.

People are very interested, so as much fun as it is to get to the outcomes for our clients, we love to teach you about the how and the why. to empower you with this is where we're going and this is why.

And now you're seeing these shifts. Well, this is why. And because you've done this, we're now going to start working on this level now. So that's just such an important, beautiful aspect of this program is teaching you and guiding you through the how and the why of the program as well.

And so one tool at a time is very powerful and we found that. But then what we found is that we started to layer in different tools and they were complementing each other.

So yes, not only do we have the sound and listening programs like the ILS, but we're also certified in the Safe and Sound Protocol. We also have training with the Tomatis method.

We're working on gaining some more with the Maestro with that company. We want to pull in the best of these. And also we use things like AlphaSTEM, the AlphaSTEM-AID, the AlphaSTEM-M.

We love to layer in all of these together, and it really gives us this strong, robust input. And it's not just the modalities that are allowing us and multiple modalities that we layer in that allow for us to make these changes.

It's also the order that we go in to achieve this. So this is very important. So the very first place that we go to, whether it's for anxiety, depression, sensory processing, speech and language conditions, dysautonomia, brain fog, chronic fatigue, poor sleep, trauma recovery.

The very first place that we go for all of our friends, regardless of age, is to restore safety to the body. on a neurological level, not with words, not trying to convince someone thereof, also not cognitive therapy, where you're verbally processing the past and trying to figure out how you can get on top of it right now.

This is not that. This goes in with these multi-sensory pieces, and we're able to restore safety on a neurological level. Once we can pull the nervous system out of fight, flight, freeze, or shut down or fawn, once we do that, the whole nervous system takes a big deep breath.

The defenses are now down, which now opens up access. Now we have a shortcut to the brain. Now this individual is sleeping better. This individual is communicating better with those in their relationships.

at home, at work. It awakens social engagement because we've pulled us out of survival mode, enhancing parasympathetic states, rest, digestion, healing.

If you can get good restorative sleep at nighttime, you can decrease inflammation globally. You can get a refresh for the immune system, which is allowing lots of people to benefit from therapies that they haven't been able to benefit from before.

For example, if you have a comorbidity of Lyme disease, mold, Epstein-Barr, long COVID, sometimes people are

just calling about these strange weird viruses, but they have all of this neurological fallout.

You can go into these systems and just by enhancing parasympathetic states, pulling them out of the survival mode that keeps them on hyper alert. They've got all these neurological issues.

Their titers aren't coming down from the pharma. They can't even benefit from that and they're just so distraught. You enhance parasympathetic states and then the individual is now responding from the pharmaceuticals that they've been prescribed.

They're able to detox from these different viruses. Their titers for different tick-borne illnesses are coming down. That is significant, and it's such an important thing to empower the listeners with, is that when you address the autonomic nervous system in your recovery, whatever that recovery is, if you address the autonomic nervous system and can get it into good restorative states, then you're going to benefit so much more quickly from the other therapies that you're doing.

You're going to be able to grow and benefit on a level that you quite possibly had thought it wasn't possible. But now we know that it is. We've served over 10,000 individuals just since 2014. So I have a volume of data and templates that we have used to make these changes for others.

So now we're not in the place of, what do we do? We're in the place of, okay, how do we give them access? Okay, let's put them in their home. All right, who's going to start with the input first?

We've got to pull them into parasympathetic states. And that's how this process starts. After that consult call, we'll ship this equipment, whichever one is going to be the best for your family member and or members.

We ship this to your home. We assign to you a licensed therapist. We are all occupational therapists and certified CODIS. And they are going to coach you through the application from your home.

They're going to call you on a weekly basis. Now, we are not doing therapy through the screen to someone if you're trying to think of like a large clinic model.

It's just not that therapeutically beneficial. Instead, we're going to connect if there's multi-people in the family, we're going to connect with one primary caregiver.

We're connecting with that individual and we're training you like we would train a therapist in our clinic. There's nobody who's going to be more motivated to learn the tools, apply them than a caregiver.

Or we train the individual themselves, right? We teach you all about this. We put this in your home. The therapist helps you get your modalities going.

She gives you your treatment plan for the week. And that's what you're doing in between the weekly calls. You're getting the input in and then you're observing your nervous system's response.

## The Brain Harmony Assessment and Home Program

You share it on the next call with your therapist. And then she's going to say, okay, great. Given how your nervous system's responding and your goals, I want you to use it in this way over the next week.

And that's how this works. You work in tandem with that therapist. We teach you how to move forward when your nervous system is ready. We teach you to modify and adjust if you're a little bit of a live wired nervous system in the beginning.

It's okay. It's part of the process. We teach you how to modify and adjust. And then you stay in the program until you have resolved your issues or you get to maximum medical.

But you are not intended to be here forever. We are going in to do very specific things. We're going in, we're going to fix it, and then we're out. But we do need a couple of months to get these neurons connected.

But most of our clients are in our program between four and ten months. It depends upon medical complexity, how many layers we have. It doesn't worry us if you have, like I have a friend, I did a consult with a new friend yesterday and it was like she had like almost all of the indicators that we even have possible on the list.

and she was just so worried. But we don't worry because we're treating the entire brain, the entire nervous system, which houses all of those conditions.

And the common denominator is the autonomic nervous system in the brain. So. Yeah, that's really amazing. I love that it's non-pharmaceutical. I especially love that you treat the whole family because there's ripple effects when one person is in distress.

So how does your approach differ from traditional therapy models that tend to focus more on symptoms rather than root causes? We use these multi-sensory accelerant modalities in a certain sequence in a home program.

That's why. So when we did the large clinic model, we did manual interventions. That's what most of the therapies are out there doing. Sometimes you get into like physical therapy and they're starting to bring in more modalities in there too, which are really beneficial.

Also your chiropractors, sometimes they bring in some really cool stuff as well. But using this in the environment that we use it with in your home really allows for us to get input more on a regular basis.

You won't have to go out and travel to get it. It's in your home. So then there's also not a lot of pressure. You know, if you're doing five minutes and you're sensitive, You can take it off.

You can take a deep breath. You can maybe try it later on that evening. We can modify and give you access to the best protocols across the globe. I know because I serve the globe and I do not manufacture any piece or any modality, right?

If you call a surgeon, the surgeon's going to say, okay, I can help you by doing a surgery. If you call one of these modalities, they're going to say, we can fix all of your things with this one modality.

I know that that's not true, and I can use whatever I want, multiple modalities, and the only thing I'm bound to is to get you to the outcomes. I manufacture the outcomes, I use whatever we need, and that's also what's allowing us to really make these changes.

That sequence, pulling people out of fight, flight, freeze, or fold, returning safety on a neurological level is another key to our success and could be a key to sharing that so that it can be a key to other people's success with their healing journey.

Yeah. So the vagus nerve and the autonomic nervous system play a central role in your work. Why is feeling neurologically safe and regulated so foundational to healing?

Well, because when you get stuck in sympathetic states for whatever reason, then it is a protective, defensive state. It shuts off some of the first things to go, communication, motivation, creativity, social engagement.

and the person is just going further into themselves. They get stuck in repetitive thought patterns and loops, OCD, and even some of the ODD defiant stuff too.

It's just very restrictive. It is a draining state. People can be on hyper alert, which is exhausting, and then they don't have any energy, and then they don't have access to their cognitive processes that they're hoping for or had in the past.

by looking at the nervous system in this way, and in particular, if you look at the polyvagal theory. So that is the vagus nerve and the poly part is the multi branches of the vagus nerve.

So Dr. Porges, who created one of the listening programs, this is what he's known for. And what we've learned is that The vagus nerve is the longest nerve in the body.

It's the 10th cranial nerve. And what's so beautiful about it is that they have a superior branch that innervates all the muscles of the face, the social muscles.

and the vocal production cords, even the sensory aspect, beneficial not only for speech and language, but for picky eaters. The branch goes down and innervates the vocal production cord.

Then it goes down and it innervates the heart and the lungs, the things that are supposed to be happening automatically. You can really address and bring that person out of that hyper alert just by regulating the nervous system, showing it, feeding it safety on a neurological level.

not trying to convince yourself that you have to slow down, you know, the panic, you're okay, you're safe. That's a process that is usually not very effective for people with really strong concerns.

But then the vagus nerve goes even further down. and innervates the bowel and bladder elimination organs. And so you can actually impact the entire autonomic nervous system just by regulating and tapping into the anatomical structures responsible for these skills that, as mammals, we're supposed to have.

But for whatever reason, They're blunted. It doesn't develop as intended. There's an insult. There's all kinds of different things that may impact that.

But we can go in and regulate it. Sound, vibration, movement patterns, regular input. And that is a reason why we are able to be so powerful, is using all of these different things, but in a certain sequence and on a consistent basis.

All right. What patterns do you commonly see in people with chronic nervous system dysregulation, whether that shows up as anxiety, brain fog, fatigue, or developmental challenges?

Absolutely. We see it's the same need. Neurological low-hanging fruit is to go into those systems, train and enhance parasympathetic states, and then once they are in their body, We really, really focus on brain-body connection.

We can awaken function, and then we can sparkle the brain and build the neuron connections that allow for all kinds of different skills to develop. So the sequence of what we're doing is how we're able to make such an impact for those different types of conditions.

because the common denominator is the brain and autonomic nervous system, and you can enhance that. And doing it first also allows for us to make these wonderful gains.

So an example is developmental delays in speech and language. We get a lot of phone calls from people who have a child who is three, four, five, and they are not speaking yet.

and I make sure that we say yet because that person hasn't given me an opportunity to bring it about and we're very good at bringing around speech and language.

But what we found is that just by going straight in and sitting across from someone and you're trying to pull out speech and language from these little bitties, much less older individuals, it's really the slowest way to accomplish something like that.

And a lot of times it's not powerful enough. So what we do, especially for all of our clients with speech and language, is first we get them out of fight, flight, freeze, or fold.

It's very stressful to not be able to verbalize. It's very stressful when you can't get your body to move in what you want it to do. It's very stressful that some sounds can like send you off.

All of these things are very stressful and it cuts off access to other parts of the brain and function. So when we do this for our friends, it opens up social engagement.

They can connect not even with language yet, but they can read nonverbal cues. they can express their own nonverbal cues as a form of basic communication.

And then we can get to build the neuron connections in the speech and language parts of the brain, and then we're rolling. But we definitely, if you try to go just into speech without addressing the holes lower in the nervous system's foundation, then you're going to get maybe a little bit of a bump, but you're not going to get very far because it's not intended to.

Those individuals are not intended to fill these holes. So the holes are still there. And if you can fill them in the right order, then you have access to all kinds of development, not only speech and language, but all of the other skills that we have addressed as well.

Got it. Can you talk about how stress, trauma, or early developmental disruptions can affect brain organization later in life? Yes. So we've done a lot of work with trauma.

That's a good one to discuss. And a lot of individuals come to us from across the world. They're looking to have deeper healing from their trauma. And maybe adults and sharing with us their trauma from childhood.

We've served lots of people with complex trauma. Some of those worst case scenarios that you could think of in your mind. These people come to us and they are very dysregulated adults.

And because if this happens when you're younger or whenever it happens, the trauma happens, the individual can just get stuck in their survival state.

And then over years and years and years, the system just thinks this is how we function. And it can definitely delays all kinds of things from, you know, academic to emotional regulation, even the ability to heal from everyday types of illnesses.

The nervous system over time is just in such a drained state that they just really can't get that. They just can't get over the hump. They can't get over those issues.

So we do not focus, this is not cognitive therapy, and a lot of people are really happy that it's not. They feel like they got maximum medical from that type of way to heal from trauma.

## Why Nervous System Safety Comes First

Instead, we don't need the details. I do not want to bring an individual to restate and re-imprint the trauma for the brain and nervous system just by talking about it.

That person's probably done that quite a lot. Or if you go into a child, a three-year-old child with trauma, a seven-year-old child with trauma, they're not going to have access to the words to be able to benefit on a level.

So we use Sound, vibration, we speak to their nervous system not with words but with therapeutic input on a regular basis which pulls them out of those defensive states and then it gives us access to all the other things that need to be there.

A good example, too, is I was treating a lovely mom and her son. And she was a recovering addict. And she was just very distraught because she was with her.

She didn't leave her child, which is good. She got clean. She brought him to me at age 10. And he had all of his pieces and parts. But when he spoke, It was definitely, you could hear, it was like the easiest way to explain it would be like a Swiss cheese conversation.

So there's parts that you can understand and then there's big holes and then there's like some substantial stuff and then big holes. completely not functional at all, not only for academics, but social.

And there were huge holes in his brain. And so I just remember thinking, you know, I have no idea if I'm able to help this child. But all I did was do the same thing.

As I said, I'm going to use these tools to fill the holes in his brain. We're literally not figuratively going to rebuild those connections. We're going to literally build them.

And that's what we did. We filled the holes in his brain, and then he's able to talk on an age-appropriate level. He's able to organize and learn from academics on an age-appropriate level.

So that's what's so important about the answer to your question is that regardless of what's happened and how, there's always an opportunity to go in on this very primitive neurological level and really move that person forward in their development by filling any of these holes that are there with our accelerants and our sequence.

Got it. Got it. So what are some of the earliest signs that a child might be struggling with nervous system or sensory integration challenges? So we get those phone calls a lot.

I'm looking at my list here, my consults, because when you book a consult, you're going to get me. I am the person, I set up all the treatment plans. So they call and we review the indicators.

We're getting a lot of three and four-year-olds, and now we're in 2026. So there's also a group of children who were born during the global lockdowns, 2020, 2021. They didn't have access to different things.

A lot of people did not even have access to their therapies. And these children, a lot of them, they were in environments where everybody was masked, right?

Where they couldn't see the person using their words, their mouth to make sound, that make words that are communicating. very specific things. So we're seeing a lot of these families call up and they'll say, hey, we're not really seeing a lot of words.

We're not seeing any words yet. That person may be a really picky eater, very limited diet. They don't like change. If you walk in and they're playing and you're ready to go take them to something else awesome that they totally love, they just throw a fit and they have a melt apart.

because they can't even process the ability to be able to transition smoothly. Speech delays, sensory processing delays, learning delays. Absolutely. You can get some data coming back whether you're in homeschooling or you're in a brick and mortar.

You start seeing some of those things that things aren't really moving. Sometimes you get that feedback from a teacher. Something's not moving as expected.

That's a perfect time to reach out to us. And you don't have to go this long route of, okay, there are issues with my child. Let me go to the neuropsychologist and we're going to do a full cognitive assessment.

It's going to take three days. We're going to put them through all these testing and then they're going to give me based upon all of this. Then they'll stamp some diagnostic codes and then we'll know what to do.

We don't need all of that. All I need are the symptoms and I can go into the brain and get it to the highest level possible so the person doesn't even further present with the characteristics that would even make up the diagnostic

code in the first place.

So doing this in a certain order, for sure, a lot of those are different reasons why people reach out to us, especially when they're younger. Poor sleep, picky eaters, poor attention and regulation.

Definitely, goodness gracious, we're seeing a lot of very young children being prescribed attention deficit stimulants in an attempt to compensate for the poor attention.

But the pharmaceutical is not going to treat the root cause of those issues. All it's going to do is try to speed up some things, try to keep more chemicals in the brain.

But they frequently come with very severe side effects, including severe mental health deterioration. especially with some of the SSRIs. So I'm the person that people call because a lot of the physicians, they don't know what to do.

So they just prescribe the pharmaceutical. They don't see the fallout like we do. So we will stay up to date on, okay, these are the meds you're taking.

Are you familiar with these side effects? Are you feeling any of them now? Then we go in and we will get such strong neurological change for the brain and nervous system, that the individual themselves begins to say, wow, huh, and talk to that prescribing MD.

Hey, do you think that we need three of these? I think we could probably start shaving off one or two. You can't shave it off when you just start with brain harmony if you're taking them, because if you take out the pharma before you make any of the changes, you're still just going to be spinning around not understanding what's happening.

Instead, stay on what you are because that's out of my scope of practice to take you off of a med, but let's start with our input and we'll get such strong change for you that then you will know your nervous system and brain will show you and you'll start talking to that prescribing physician to start shaving things down.

So yeah, hopefully that helps you. Yeah. And so for parents listening right now, what are a few practical steps they can start with at home to support their child's nervous system?

The number one thing that we are seeing is decreased screen time, right? So I've done a lot of research in the effects of screens and software on the brain and nervous system.

And it's pretty terrifying. It's not mild. It's very strong. It's not just what's happening to their brain and nervous system while staring at a screen or a television, but usually the television is on a wall.

The screens these days are in their hand on an iPad and our friends are in, I'm going to turn sideways, they're in fetal position, right? And they're just on these little tiny screens.

It's not just what happens when you're in that for hours and hours and hours, but it's also what you're not doing because you are on a screen.

## Signs of Dysregulation in Children and Practical Home Support

And so they're missing going outside. They're missing even just throwing and catching a ball, which sounds so easy and primitive. But if your child is spending hours and hours and sometimes academics people you know parents don't realize so much of academics these days is computer based even if you go to college they're still sending the kids like you know you want them to go into a classroom and speak with humans and learn that way but they're still sending them to you're going to take this class online and then you're going to do this one in person so these screens are seeping into everything and the families just don't know that the software is intentionally created to produce the agitation chemicals in the brain, as well as to produce the addiction chemical of dopamine.

So we're naturally supposed to have these chemicals because it's supposed to help you prioritize the right things to

survive as a human in this world.

Dopamine is produced for when you're eating good food, for procreation, when you're with your best friend and you're really sparkling together, those are all these beautiful chemicals that should tell you, get more of that, this is good for you.

But all of the screens and the software protocols, whether it's social media, this is even outside of video games, which is like, I think the term they call it is digital heroine.

Yeah, like it's terrifying, but I use those words to make sure that people are understanding what is possible. So that's definitely something that if you can get on top of just with the screens, the outside, getting morning light, getting afternoon light.

And then when you come in the home, you can decrease your light so that you're feeding the brain and nervous system. Hey, this day is over or getting to be over.

It's time to start slowing down for restorative sleep and finding ways to feed your brain and nervous system in your home to be organizing and soothing.

That is something that all of us can do. We actually have a wonderful little pamphlet on like how to create four steps to creating calm in the home. And it's all about looking at your routine, fitting in the things that you need to, splicing in opportunities for movement, for deep input change, for natural light and movement outside.

That is a way for you to begin to re-regulate your own autonomic nervous system just by changing your routine and what you're feeding it in your environment.

That is something that everybody can do. Yes, yes. So can neuroplastic change truly happen at any age? And what gives you the most hope when working with adults who feel stuck?

Yes. It's some of my favorite things to do because we are all familiar with living in that stuck survival state. And we do go into adult brains, geriatric brains.

So adults, let's start with the college age. College age, they super love us because they're trying to do all of these things independently. And we come in and can get them the regulation that they need.

We can get them the organization for the brain and nervous system so they can rise to whatever it is, trade, school, college, caring for very young children, whatever it is.

So yes, we go into there. I had a college student and she called, she said, I had to get tutoring all through my academic career. And I was always at like, you know, I had to rely on sports to get anywhere.

That's actually what got me into college. But once she got into college, she was really, really behind with all the academics. She starts doing this program, and then she calls us up and shares with us that she made the AB Honor Roll for the first time in her entire life.

So, right? Like, how is that possible? I'm not teaching her language arts or math. The reason why it's possible is that we learned if you don't have those connections in the right parts of the brain, then language arts and math are going to be really difficult.

But if you don't have them, we can build them and then all of a sudden you have these abilities. Then we move into right 30s and 40s. These are mostly professionals or maybe the caregivers for a large family.

We have amazing outcomes. We don't skip a beat. Then we start moving into, I had a gentleman call and he's like, I'm a retired attorney. And he still has the old fashioned newspaper like I do.

I actually have it delivered to my home. And he says, I'm reading articles and I'm reading things and I can't remember anything that I've read. And I want to have the memory like I had in law school.

I'm like, oh, gosh, that's a really lofty goal. But okay, let's go ahead and let's do it. And so, of course, we do the program the same way. And then he's telling me over several months, and then I'll call him and be like, how are you?

I can remember. I can read it once. I know what I'm read. And this is great. And I feel fantastic. So we'll get him to the highest functioning level possible.

It may not be 100% back to where he was in law school, but we have made it so functional for him and return skills that he didn't have before. Plus my little friend that had the stroke, he was in the geriatric population.

He was depreciating on the couch. It was a very sad circumstance until he got this level and sequence of input and it changed everything. So now degenerative conditions Alzheimer's, dementia, multiple sclerosis, so MS.

For the degenerative conditions, we can maintain function, but we won't be expecting those super, you know, firework rock star type of testimonies that I'm reporting to you with all these other types of conditions.

So that's important. We can maintain what's degenerative. We're not intended to actually treat those, but we will get to the highest functional level possible and maintain and restore as much of the brain and nervous system outside of those degenerative conditions, which allows for us to still make improvements.

Got it. Got it. So not really reversing but maintaining. Right. Yes. Which is great because I don't believe there's any medications on the market that actually reverse.

Right. Yes. Glowing slightly, very slightly. Yes. How do you see brain-based therapies complementing functional medicine approaches to complex chronic disease?

So we love working with functional medicine practitioners. Any listener who doesn't have one needs to have one like you. You're going to be treating on a cellular level and then you're doing diet, you're doing gut, you're making sure that the person can detox, you're decreasing inflammation globally.

Then, when the functional medicine practitioners refer to us, we come in, we specialize the brain, the nervous system, we use these different accelerant modalities, we fill the neurological holes, and that is when our program works the best, is the clients who are getting their functional medicine needs met, and they're doing our work.

Together, that is the highest level of success. And anytime you see our testimonies, it's those families not only are us, but they're getting that functional medicine needs met as well.

## Neuroplasticity Across the Lifespan and Functional Medicine Synergy

That's great. And I know you've given us some examples, but are there any other stories that really illustrate what's possible when the brain is given the right inputs?

Yes. So the trauma resolution is really so important. Absolutely. We work a lot with veterans as well, right, who have their trauma from being deployed in things and that it's just so beautiful to do that type of work.

Lots of head injury, lots of body pain, lots of mental health concerns, lots of trauma. I feel blessed to be able to be of service to them. Because of their sacrifice, I'm able to do my practice and have a private entity and share this with all kinds of people.

So we take that. We're very, very excited about that. Clients coming to heal their trauma for adults is, especially when it's some of that super scary complex trauma, this one gentleman, it's like I asked him how he was doing and it's like he like wrote a poem by explaining what is happening to him.

So I'm just going to read it because it gives you a very deep understanding of how does it feel to go through this type of therapy with complex trauma.

So he says to me, The waves come through, but I let them pass by. I am neither in a hyper state or in collapse, which was my old state of existence. I have learned better practices and they are sticking.

I am more able to follow through with my meditation. I am realizing that stuff I thought was me was not me, but more like a habituated response. It is bringing things up in my counseling sessions, which are now more productive.

As my body resets, I can clear things from my system. The trauma construct is dislodging, and I am a witness to it. It's beautiful. Wow, that's really beautiful.

That's so powerful. And that's what he just comes out and says as I'm talking to him. I'm like, it's so beautiful explanation of the transformation process.

Yeah. So complex trauma, super beautiful. We're getting a lot of concussions, a lot of TBIs. We're getting a lot of recovery with people who have neurological Lyme, mold, long COVID.

So functional medicine is going to treat those conditions, right? But then their nervous system is still just so out of whack. that it's glorious to be able to pick up the phone and call someone for their session, how are you doing?

And they're like, oh, now I'm sleeping. The titers for my tick-borne illness are coming down. I can tolerate the prescription that they've been giving me.

I haven't even been able to tolerate it. And now I am healing from not only that, but all of the neurological debris and fallout from those conditions.

So it's a beautiful gift. We wake up every day. This is what we find as our purpose. This is what we're intended to do. And we connect with these clients to restore neurological abilities so that they can express their purpose on why they are here as well.

That's that OT special, finding that unique intrinsic value for each individual that keeps this so exciting. The changes just don't get old. You would think after decades and decades, you would think it might get old, but it doesn't because each person is such a different individual.

The changes as they happen for them and what we're able to access, an aptitude for a child, speech and language, or just the ability to be able to hug and hold them that they weren't able to do before.

That's everything. And so there's just such a range that we can do for all kinds of different conditions. That's awesome. And finally, what advice would you offer someone who feels that they've tried everything and they're looking for a deeper, more functional approach to healing?

Don't give up that you are not making the changes that you need, even though it wasn't what you were looking for. That's feedback that, okay, you've tried that and that one didn't work.

That's good information. Then you can come to us. You can call me. We can talk about it. I just referred somebody who is in Amsterdam. Yes, with our program, we can of course be of assistance, but she's missing the functional medicine approach.

She's missing another aspect. So I gave her that information. That's where she needs to go first. Then she can call me when she's ready. So, you know, I'll tell you, connect with me.

I will lay it all out there for you. and then help you on your sequence of care. Awesome. Well, Carol, it has been such a pleasure. I really appreciate you coming on, and I know that all this information has been so incredibly

powerful and amazing.

Just excited to share it with all of our listeners. So thanks, everyone, for joining me on The Functional Edge. I really hope today's episode gave you fresh insights and practical tools to level up your life.

If you found value in what you heard, don't forget to hit the subscribe and share this podcast with someone who needs it and leave a review. It's the best way to support our mission of bringing powerful health solutions to more people.

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