Introduction and Guest Background

Through. Hey, everybody. Doctor Tom Moorcroft back here with you for the reversing mast cell activation syndrome and histamine intolerance summit. Thanks for joining us today.

It's going to be an amazing episode. Today we have, Doctor Keesha Ewers, who's an integrative medicine expert, doctor of sexology, which is super rad.

Family practice aprn, psychotherapist, herbalist, board certified and functional medicine. And are you Vedic medicine? I'm the founder and medical director of the Academy of Integrative Medicine and Health Coach certification program.

And Doctor Keisha's been in the medical field for over 30 years. And after conducting the heart study in 2013, which is healing unresolved trauma, she developed the heart model for understanding how past childhood trauma affects adult health.

And I think that that's going to really dovetail into everything we're talking about with mass activation in our summit. After the hurt study and the creation of that model, she, that led to the creation of the unbroken online program for patients to heal their own trauma and the mystic medicine deep immersion healing retreats that she leads at her home in San Juan Island, Washington.

And she's a popular speaker on tons of stages, Harvard, TEDx acts, and all these other cool places. But one thing I wanted to share as I was like, you know, where you get to meet people.

I remember deciding at one point in my life, seeing one on one and just working in my office wasn't enough to make the healing changes we needed to make in the globe.

And so I stepped out. And the organization when I first went out there. Kiesha you were one of the first people that I saw to is doing stuff that I didn't even know was possible, and it just making such a massive impact.

And you've always been an inspiration, and it's nice that I finally get a chance to talk about what you're doing. So thanks for joining us. Thank you. That's that's great to know.

It's crazy. It's like, you know, you were all in here. Like I got in the medicine. I was like, I feel like I have to do all this myself. And I'm like, wait, other people think this way?

But we were still pigeonholed. And then to see people who are reaching so many people. So I, I've always wondered, I mean, like, how did you come to this work and kind of how did you go from where you were to where you are now?

Yeah, we all have a story going. Yeah. So for me, I started out as a young nurse at the age of 19, being, an adrenaline junkie. I really like the high intensity intensive care unit.

Like. Like I had the marathon runner. I like to skydive. You know, I was just kind of crazy that way. And. And then I started, I got married, and I started having children.

I had four kids, and I drove myself in the same way. And every role that I had, which was I didn't compete against others, but I was always driving myself to bring my best self to every arena that I would then.

Autoimmune Diagnosis and Early Healing Journey

And that's really now. What I can identify is incredibly toxic perfectionism. And so around, you know, in my early 30s, I was diagnosed with rheumatoid arthritis.

And I, I woke up one day and it was like all of a sudden, have my patients describe it? Well, we know that's not true. You know, all of a sudden get an autoimmune disease, but all of a sudden I wake up right?

And and I've got ten extra pounds of puffiness all over my joints, red, swollen, inflamed. And it was like someone had taken the batteries out of the Energizer bunny.

I was just flattened, and I got myself into the A doctor. And in the course of the history taking process, she asked me if I had a family history of autoimmune disease.

And I said, yeah, I think my grandfather had RA and he actually died at the age I am right now. I'm 57 and I never knew him. And, you know, the I knew that he'd been wheelchair bound with it for a lot of years and was very sick.

And she wrote quickly, wrote out prescription for methotrexate and another one or a non-steroidal anti-inflammatory drug handed them to me and said, when you get worse, not f come back and we'll change your meds.

And I remember saying, well, hang on, hang on. You know, like she's on her way out the door. I'm like, wait, no, is. And I said, I'm really disciplined.

Like, I run, I make my own food. What else is there? And her response, which people you know, I'm 57 now. This when I was in my early 30s. So 25, 26 years ago.

People are still hearing this today. The same exact thing, right? Same exact thing. Come back when your words will change your class of meds. And no, nothing else has to do with this.

It's genetic, you know, and therefore, to close the book, put it on the shelf. That's all there is to say about the subject. Right. And I remember on my way home thinking, you know, the model of medicine I've been brought up and trained in and practice for all these years doesn't have anything for this.

And so maybe there's something else that does. And and, you know, I always tell my patients and students that if an herb had bitten me on the bottom, I would never have known it.

Like, I know I knew nothing about what I do today. Nothing. And so I went home and I went on my dial up modem computer of that day. Remember those? Yeah. Yeah, yeah.

And looked in Poznan where we keep our medical literature and looked for like, are there other things I can do? And I found a pretty compelling article on yoga and autoimmunity, and I went to my first yoga class the next day.

And in the course of holding my asana, you know how the yoga teacher wanders around and talks as you're holding your poses? He mentioned this enough about this word ire Vedic medicine, but I got curious and I went home again and went to my computer.

It looked up. Dear Veda, and it's the sister science of yoga at 10,000 years old comes out of India. It's where traditional Chinese medicine comes from.

And the more I read about it, the more I like the clouds parted and the angel thing, I was like, oh my gosh, you know this idea that you don't match the pill to the disease the way I've always learned or the symptom, right, that you actually treat the person with the imbalance, and then you look at what is the imbalance and get to that.

And then the disease process moves up out of your tissues. That was extraordinary revolutionary to me. I know it sounds weird, but it was. And then the other thing that came forward in my reading was, oh, by the way, autoimmune disease is undigested anger.

And I remember sitting back in my seat going, But I'm not an angry person, and I was a consummate people pleaser. And if if anything rubbed up against anger for me, I'd put running shoes on and go running.

So I do anger, and I thought, maybe that has something to do with this. And so I was learning to meditate and, and, you know, doing what I was, I was finding out in the literature and one day this word autoimmune came dancing in front of me.

And I remember looking at it and going, gosh, you know, I had do I do mean I'm doing this to myself? I'm basically committing suicide in a societally acceptable manner.

I there's nothing out here to look at. It's all in here with it's auto. And now it's really important. Kind of like change of perception. And I asked myself this question that was also very important when the first time I wanted to die, because I certainly don't want, you know, like, is there a place, right that wants to go?

And so I started following my memories backwards and looking for their place. I ever wanted to die. And I landed on this ten year old little girl version of myself who was being sexually abused by the vice principal of the elementary school I was attending, and my dad was in the Navy, and we had lived in Japan prior to that.

I was raised with no television. It was 1975. I don't think I knew the word. I don't even think I knew the word sex. I don't think I knew the words molested Asian or me.

I tried to tell my mom, but I think I was saying things like, I'm afraid to go to school. So she wasn't picking up what I was pinning down. Right, right.

And I, I went and I saw her and I went, oh, you did one off the planet. Like you didn't know what was going on and couldn't navigate this. And was that all confused? Right.

Yeah.

Trauma, Childhood Wounds, and the ACEs Connection

And I was doing things like talking the angel then, you know, like really trying to figure out what's going on with humans. But this kind of thing goes on in the world, you know, and, and so I realized that that probably had something to do with the IRA that I had, like, these had to be connected.

And sure enough, science tells us that that's true now. And so that's where I went with, okay, I'm going to put myself into some trauma healing therapy and it and talk therapy does not work.

So I didn't go to talk therapy. I went into like eMDR and brain spotting and, you know, working on the deep really making that change. Yeah. Yeah. And in six months my area was gone and it's never been back.

And it is in my genes. So I went back to school and became a nurse practitioner and, you know, got a master's in innovative medicine, board certified and functional medicine.

And along the way, I became a psychotherapist because I started realizing, like this idea that we can separate the mind from the body is absolutely, irrefutably ridiculous.

And so, you know, that's why there's so much in my CV is because I always say, anytime a patient came in and stumped the champ, the jump went back to school.

Right. Well, it's interesting because the parallels, it's like you're you're you're doing all this really cool stuff that you're going back into conventional medicine.

Yeah. But you're also doing all these other pieces to fill in the, the integrative. Yeah. It has to be. Yeah. So that, so that I could help people where they are on their path.

Right. Not everybody has that realization that, oh, undigested anger might be at the root of my autoimmunity. Right. And so they don't have access to the same article that I was reading or the same way of their mind that works.

And so, you know, it's it's important, I think, to be able to bridge the cutting edge science that we have today with this wisdom that has never left the planet and has a much more holistic way of viewing humans and their environment in the context of their thoughts, you know, their their relationships, the their daily schedule, their lifestyle choices that are epigenetic triggers for their genetics.

And, you know, so we are looking at sure, your your microbiome and you have to heal your leaky gut. We look at toxic burden. We look at your genetics.

But also everyone has had trauma, everybody has had trauma. And so I think about it as capital T trauma or a lowercase t trauma. You don't necessarily have capital T trauma, but everybody has literally hundreds of events throughout their childhood that were traumatic.

Hundreds. So how do you how do you pick those apart. Yeah. The capital T versus the little T. Yeah. So the Aces study the adverse childhood experiences study that was done between 1995 and 1997 by Kaiser Permanente and the CDC actually kind of defined capital T trauma as the stuff that we usually think of when we hear the word trauma, like domestic violence, sexual abuse, psychological emotional abuse, neglect, abandonment, having a mother, and be a victim of domestic violence.

And you witnessed to having a caregiver incarcerated or addicted to a substance or mentally ill or dead, you know, divorce like these are capital T trauma.

These are the ones that got classified as the big nervous system disruptors and partners and the like. What that outside people connect, like most people would look at it and go, wow, that's a traumatic trauma, right?

Exactly. When they hear my story, they go there as a trauma. Yeah. Yeah, exactly. And and the the truth of the matter is, is when I did the healing Unresolved trauma study in 2013 for my doctoral work, I was flabbergasted at the I this like what I just said when I found out, I looked at hundreds of fMRI brain scans, Pet scans of people that had been victims of capital T trauma and had PTSD, and to see the architecture of the adult brain change.

When you have had childhood or adult trauma is, you know, like being the picture of it when before we're when we're children, our prefrontal cortex is not fully developed until we're 26 years old.

So this prefrontal cortex we call our executive function or our adult brain is the one that makes our good decisions for us when we're adults, like kids, they're, you know, they don't have that in place yet.

So there's a lot of limbic system activity, because when you're a child, a you have zero power and, you know, no autonomy. You're you're being told what to wear, where to go, right, when to eat, what to eat, when to go to bed, when to get up.

You just don't have any power. And so now our locus of control is eternal. You know, we're we're trying to figure out how to be humans in a world governed by big humans who have all of the rules.

Right? And so survival is paramount. And so we have the limbic system that's on. Am I doing it right? Am I going to be loved? Am I going to get my needs met? You know.

And so there's like this constant, am I okay, am I okay, am I okay? And that that locus of control being external, it's we need approval. We have to get our I have three dogs and I trained each of them as puppies, you know.

And it's like so interesting if you give them a little peanut butter treat for every time that they do something good, they're like, oh, I'm good, I'm good, right?

And children are the same. The right no doubt. Yeah. And so any moment in our childhood and of all animals on

the planet, we are the slowest to launch like we have at least 18 year teen crazy, a long runway, right.

And so there's tons of time in there to be traumatized. And you can think about, like, childhood is the jungle of these moments when we have an event that we can't understand and we don't have someone right there to help us navigate it.

So I call it a naive event. It's a brand new event. We haven't run across it yet. And, you know, like maybe you didn't get picked to be on the team you wanted to for a reset game or, you know, you were shunned because you wore glasses or you screwed up the spelling B word in front of the entire class, or you tripped and fell and everyone laughed like, there's a there are hundreds of these.

And in those moments, you're it's traumatizing because we are biologically wired to know that if we are put on the outside of the firelight, circle the saber tooth tiger can eat us.

So they're traumatizing moments. Like, I didn't pass the test that I wanted to pass, I, you know, so then what's the meaning you're going to make up? And what's the feeling that comes in right there?

I feel sad, I feel ashamed, I feel like we're all going to be different. I'm not smart enough. I'm not good enough. Then you're going to attach a behavior to that belief and that feeling that's in your nervous system now.

And so everyone will be different with that too. So a kid that failed the test that they, you know, they needed to do well on my might have fear. Like when I go home, I'm going to get it.

Or they might feel ashamed because they feel less than smart, you know. Right. So then the behavior that they choose to put with that will be adaptive to the wise mind of that child.

So it might be I need to study harder next time, or it might be school stupid. I'm going to put all of my my eggs in the sports basket. It may be oppositional defiance.

It may be to become the class clown like we all do it a little bit differently, right? For me, it was, in my family, intellect was everything. And so. So I would. Yeah. Yeah, I know that family.

Yeah. And so, you know, the first time in my entire life that I ever got to see with in my first quarter of college and I was, I was raised with no TV.

So having a TV on, having all these roommates, I had a very quiet family. I got a C on a microbiology test, and I was darn near suicidal like I it was.

It was the most out of weird, weird reaction to a C, right? And it was like, I don't need to kill yourself for a C. Oh my gosh. It was like c! I literally was crazy sobbing.

And you know, I thank God. And so my little 17 year old self who got that thing in college, her first summer quarter right after graduation, you know, and went, okay.

Perception, Safety, and the Mind-Body Link

And the behavior that I put with that was to study a lot harder, you know. And then from there on, I did what I normally would do. But like that out of just weird response came from a culture that I was raised in that that you're not worth anything if your intellect isn't intact.

Right. And so we all have these different like no one would put that as a capital T trauma in any but that you got to see on a test. Right? So this is what I'm talking about with, with so many traumatizing events happened with us that we don't really assign them as traumatizing.

We just but but when we have this, this response to them, it's going to be based on the story of our upbringing.

What the values of them that's been imprinted on us is like all of those things.

Right? It's really interesting to me because it's it's so much of what you're saying is it's the people who are to guide us are the ones who are putting us.

They haven't dealt with their own stuff, and we're but they're still in charge of us. So yeah, it is so much that environment and a couple of it just quickly there's like, I just I'm so interested in all the brain scan stuff because I've looked at like Franciscan nuns and Buddhist meditators.

They've done studies that you can I don't know if you're familiar with Andy Newberg, but like, they look at him and it's like they do they get to this high of prayer or meditation.

But when we study their brains, they look the same. So it's so much of it has to do with the almost like the, the lens that you look at it from and your environment.

And there's a place that their, their, their temporal lobes will light up differently. So the, the architecture in terms of like prefrontal cortex is the same, but their temporal lobe has more activity.

Right. Because that's the spiritual center. So it is interesting how you can see different parts of the brain light up, like the parts of the brain that light up when when you have PTSD are actually the exact same parts of the brain that a woman needs to feel sexual desire.

Exact interesting. Yeah. So what's the difference between PTSD and and and appropriate, you know, sexual desire. Well, actually the what happens is the PTSD hijack.

Then you can't feel desire because those parts of the brain have already lit up in response to something else. Yeah. Interesting. So that's what led me into, oh, like held on to her undigested emotions and traumas are actually interfering with not only your health, but also your sexual desire.

And to me, sexual desire. I use the word libido. Libido comes from a Latin word does rei, which it means from the stars. And so it's actually more like your life force, vitality.

We have a better word for it in Sanskrit than we do in English. We would say your just so it's not sexual desire for me doesn't mean intercourse. It means like the the energy that you need when you want to write a book or you want to paint something or you want to go hike in the Pyrenees or, you know, like that energy that's required is the same kind of energy that we engage in when we use it for sex, too.

But it can be used for so many different things, including creation, you know, participating in everything. So then how do we because this is a place where so many of the people who are experiencing chronic illness or I mean, just think about trauma, real or perceived trauma, like everybody all day long, every day, how do we how do we start to move past this childhood stuff?

Because I know so many people listening are like, yes, yes, yes. And so what are those kind of first steps where people can start to let go or move past, I guess, the childhood trauma?

Well, I do want to just mention real or perceived. That right. There is a distinction that hangs people up a lot, and being able to move past so perceived is real.

Yeah, yeah, there's not a distinction. So however are you perceive yourself. So if you perceive yourself as not safe then your body believes that right?

So if you're a zebra being chased by a lion all the time because that's your perception, then your body will respond accordingly, right? You'll have your mask, all the activated, your cortisol get released from your adrenal gland, your reproductive hormones will get hijacked and make cortisol.

So you know, you're going to break down your gut wall. And this is being done in perpetuity. So your your little micro glial cells in your brain are going to start carving away what's not necessary in there outside of survival.

And you're going to start have like real cognitive decline. And so this is all based on perceived perceptions are everything. And so when people come to me with trauma, patterns like an autoimmune disease, cancer, you know, something that's been physical while diabetic medicine says the the body is the canvas of the mind.

So, you know, this idea that, oh, are you just saying it's all in my mind is like, well, yeah. Yes we are. They're not separate. Right. Yeah I am you're not crazy though.

That's the thing that goes neck. So I'm crazy, you know, it's like well no like this is the perception are how you release your neuro hormones. Your immune activation comes from perception.

So this is really important to understand, right. The the first thing to do and I always say like to all of my students and patients, we have to work on a felt sense of safety first.

Because if you're in Magdala it's like jacked. Yeah. Constantly. Right. It doesn't matter how many supplements you take, it doesn't matter what protocols you engage in.

This is why people like they'll be really angry a lot of times by the time they find me, because they've spent thousands of dollars on different things and they haven't dealt with this part.

Well, it just I'm thinking because, like, I wanted to share, like you're talking about yoga leading you down this path, right? Or being a part. And so many people watching know, like I come from my own health challenges and overcome that same thing.

It was like the yoga led you down. But that's where I learned about real or perceived all being real. And I just I want to just highlight what you just said. Keesha.

It's so critical. And for patients who go see providers and providers seeing patients, even if you believe that that person has slighted you or they did something wrong, it becomes a real thing.

And I just yeah. And it's like, so as a provider, I try to be so careful and support people. And but I do think that this topic is so critical in, in being able to move forward because so many people come to me and you and other providers and say like they think they're nuts because everybody else is, it's all in your head and like, yes, of course.

It's like you just highlight. And I just wanted to just put a big old neon sign around everything you said the whole time. But last five minutes, just like that, is so key for us to digest and understand.

This is a critical part of your healing, and this is your body doing its best to support you. And then what are the next steps? So once we can understand this as the background, well, there's a Buddhist psychology, volumes and volumes of, you know, information.

And inside of that the, the, in the Buddhist have really mapped the science of the mind. And I went into a master's of divinity program just to understand the mind in the way.

How many degrees do you have like 20 anyway? Yeah, I love it. I wasn't really loving it. And and so one of the things that they, they say is there are 18 different steps of one perceived piece of data that comes through our sick mind.

We have six, nine. Do we have an eye, mind and nose, mind and taste, mind and ear? Mind that felt touch mind and then the synthesizing mind. And so the these other five minds of our sense organs are bringing us the information that we are perceiving through them.

But we're going through these 18 different steps to come up with, oh, like that amethyst is purple, or that's an amethyst, like 18 different steps just happened in a in an instant, right?

Instead. And so what they say is there's in the 18 mid-way through is what they call the gateway to karma. And and so they say that as long as you have your habit of perceiving and that was established a long time ago, then how will you perceive is going to be how you perceive forever?

You will always see things through your wound and respond through your wounding. Unless you stop your perceptions, slow them down the process. Get to that midway point of the gateway to karma and open that up a little bit and create some space so that you can shift and go, oh, I don't need to perceive that.

That way I can create a new habit of mind, but that has to happen in quiet stillness. You have to be able to reach still point.

Practical Healing Practices and Resources

If you feel unsafe all the time, then you're not going to be able to access that slowing of your perceptions and you'll keep doing it how you've always done it, which obviously if you have mast cell activation syndrome, is causing a great deal of suffering.

And so, you know, being able to create contemplative practice time for yourself is actually essential and not just sitting still and dropping your thoughts, which is what people tend to think of when they hear meditation.

And that's not that's an EEG that's flatlined. You are dead. And so that is not the goal, you know, but being able to do that with you yourself and you with no distractions.

And actually like the day that I saw the immune and go, oh, that's me right? To be able to have compassionate curiosity about this combative relationship you're in with yourself and move it into a collaborative reality.

Mast cell activation. When you're at war with yourself, there's no winner. So it always has an aspect of habit, of mind that's at war with yourself. And it will keep doing that.

You can't go on a low histamine diet and have that change. All you're doing is managing symptoms. It does not matter. And how many people go through this and they're like, I've done everything right and everything right.

That's the perfectionism. I would know nothing about that. Me neither. It was funny. I was talking to a friend of mine last night. He's like, why do you do sports so much?

I'm like, and then we were just talking a minute ago, I was listening to. I was like, my answer last night was almost right, but not quite. But it's interesting.

I think it's so important to everybody. Like what Doctor Keesha just said. I mean, this habit of mind and this like, oh, so much of what's not may not be working on the outside is because we haven't gotten to the core of what's holding us back.

Yeah. And there's really nothing holding us back. It's it's a, again that in a, I like Buddhist language for this because again, they've spent so many thousand years mapping it is the idea that you at core are Christ consciousness, your luminous nature.

You're divine. You're a child of God. You're you're an energy being. However, your language fit into that idea that you're perfect. Your beauty is you.

And there's nothing to be a team. There's no goal, there's nothing that has to be, that you are the essence of everything. That's beautiful. And what trauma does is it draw the curtain across that.

It's like what Christ said when you said, don't hide your light under a bushel. The bushel are those are the meanings and beliefs you created in response to the traumatic moments, which can be like the most trivial things.

If you talk about them. And you know from that perspective, Western mind. Yeah, yeah. Right. And that's why people like why I say perceived is real, right?

That that moment got placed inside your nervous system and frozen in there. We don't do fight, flight, freeze or faint. When we're children. We only do freeze. You don't.

You're not autonomous. You only do freeze. So you have frozen a number of things in your system that create that, like barrier between you and your luminous nature, but it is of your own making.

It is not anything outside of you. And so what meditative practices, contemplative practice, prayer practices is, you know, centering prayer, like some of these really beautiful non-dual practices are for is to be able to witness that inside those little veil, those little curtains aside, right, so that you can shine forth in the only way that you can is to remember, like, if your heart shatters open, then the light can shine through it.

Rumi has a lot of poems about that. It's yeah, they're beautiful. Right. And so it's recognition that part of the human experience is traumatic and joyful and loving and beautiful, and that you can't control, which is our biggest addiction in our country.

You can't control this. You have to surrender to it and just allow it to unfold gently enough force. And so every if you have perfectionism like you and I and, you know, effect on your childhood behavior as an adaptive response to something, then if you hear low histamine diet, then you're going to contract around it.

And that perfectionism and it's going to create more disease process because the perfectionism creates that force thing that I have to do this. Right? Right. And it it creates more mess.

So actually being more myopically cutting away your brain. Yeah. It's like more and more and more information as I'm listening. I'm just like, you know, there's there's two parts.

There's my mind of the doctor going, yes, this is what the experience is. So many of the people listening today is which is like, I try so hard. And then the other part is my heart just like singing, because these are the conversations.

I love having so much of this research is new to me, and so much of it has been my experience and I've seen and bringing it out and the way you put it all together, I feel like when you're listening to this, like you're just speaking directly to my heart.

I know the truth. And I think that's what so many of you listening, I mean, can, can, can just innately know that what doctor is telling you is the truth of healing.

And it's just so refreshing. So I just want to say thank you so much for sharing this with everybody and for when people do for the folks this really resonates with, which I'm assuming is most of us, because so critical.

How can people learn more about what you're doing and, you know, do you, you know, any other kind of things as we wrap up, that you'd like to share with them?

Well, one of the questions that will often follow from this is, well, then what do I do? You know, and, and I, I, and that that's important. Right. You want to take steps.

So I hold, trauma healing retreats because I don't think an hour at a time, a therapy really works very well. And sometimes I do plant medicine with them if people want that right in a group field.

And what that does is it gives you access to your heart and not that analytical brain. And I find those incredibly

helpful. Another thing that I'll do is a, you know, a first step is just, you know, and that job is to to take 24 hours and witness your own thoughts.

Stream 94% of our thoughts are recycled from day to day, and we ruminate on the same themes over and over and over again. And so if you can start with the thing that it's for a day, right?

Notice the the quality and the quantity and the tone and you know, the content of your thoughts and what you tend, what are the themes of those thoughts that you go over every single day?

And one of the things that I'll often give as a practice is to take like a little handful of black pebbles and a little handful of light pebbles or dark and light.

And at the end of each day, after you've done that practice of really observing and developing a witness observer's mind for you of yourself, put a pebble in in front of you at the end of the day for like if it's a dark pebble for every thought that you've witnessed that has not been life supporting you, that has been, you know, any of the deeds defensive, demeaning.

Right. And then and then for any of the seeds, the compassionate, curious collaborative thought put a light pebble life sustaining thought and the, the thing that I don't think people realize is that just because you have a thought doesn't mean it's valuable. And just because you have a thought doesn't mean you have to speak it or finish it.

Like if you watch TV and you don't like what you see, change the channel and that is in your control. That is the one thing and the only thing you have control over.

You know, all the desire to control the external is useless, but you can you can go into your thought stream, and if it's something that's taking you downhill, then you can shift it and you can go up.

Right. And so the more that you use these pebbles, you start to feel and have a kinesthetic feeling of, oh, this balance is off. Okay. This was I have a lot of fearful thoughts and a lot of angry thoughts.

I have a lot of projections, you know, and so can I shift that? Can I change that channel and make this a more life supporting, collaborative, compassionate thought?

And the answer is yes, you can. And so time spent in that direction is, I find, much more valuable than in almost any other direction. Yeah. In your healing journey.

Yeah. So good I love it. So how can folks, you know, get in touch with you and find out about more about the work you do? Well, I we're giving a gift to your audience.

Yeah, that's the fast action bundle for energetic healing of personal and generational trauma. That perfect next step. Yeah. Get people started. And then my website, doctor Wkyc.com.

Perfect. And finding the autoimmune puzzle obviously that book. Yeah. Cool. Well thank you so much Doctor Keesha. It's been such an honor. And thank you.

Oh my God, what a great conversation everybody. Again, just send lots of love to everyone and just, you know, go back and listen to this over and over.

Check out the bonus, gift from Doctor Keesha. And I'm doctor Tom Moorcroft and just want to say a heartfelt thank you and lots of gratitude for joining us for this episode of The Summit.

Hi everyone.