Introduction and Personal Recovery Story

Welcome, everyone, to the Michael Jackson and Chronic Illness Summit. I'm doctor Christine Schaffner, and today my guest is Doctor John Lawrence. And we're going to be talking about innovative solutions and therapies for people who are struggling with mycotoxins and chronic illness.

So welcome, Doctor Lawrence. It's really such a pleasure to get to interview you again. Yes. Well, thank you very much, I appreciate that. I'm happy to be here.

Yeah. Well, great. Well, I know unlike many doctors out there, you had a personal journey and story and and I just want to, share that a bit, just so people really understand that the things that you're going to be sharing and, and the knowledge that you're coming from is from like a really deep understanding within your own body.

Because I think, you know, when people are out there in this community, they're they're really looking for hope. And they've been struggling for so long.

So I love for people to see obviously look at you now and the life you're leading you, you really did recover from this. So if you don't mind sharing a little bit about that, yeah, I would have, probably not believed that many times during that process that I would ever, but it's, you know, it's possible when you're in the middle of it, you're sick and, you know, you don't really know what's wrong with you, and you're bouncing from doctor to doctor and nobody really seems to have any solid answers.

And everything you try seems to either help temporarily or it doesn't help at all. It can be really frustrating and, you know, it's a dark hole, you know, and, and, and I went through it for many, many, many years.

It was, well over ten years that I had just, just the suffering wasn't imaginable. And, you know, finally actually uncovering the cause and then, you know, coming to the point where I'm right now looking back on it, it all seems to make a lot more sense because, I did go in so many different directions.

And so the understanding of not just this disease, which, you know, we can call bio toxin illness, some people call it SARS, chronic inflammatory response syndrome.

Some people call it mold illness. A lot of, a lot of us, also tested positive for Lyme. So Lyme seems to either be involved in a lot of cases or seems to be, you know, happens to be found in conjunction.

You know, we don't know what that that's all about. But, but, you know, it's there is hope. And you know what I've discovered, Christine, is that you know, the root cause of all disease is really one thing, and that's that the the body runs out of cellular energy.

And whether it's from whatever it is, I mean, my belief is that infection and toxicity are at the root cause of all diseases. And so, you could just imagine that with enough, you know, pollution and inflammatory, byproducts from infection, that it's going to literally make a big shift in the way that we make energy at a cellular level where, things just shut down.

So since the body is a self-healing, self-regulating machine, and as the wisdom to heal itself, it just it doesn't for for what reason? And that's because it just runs out of gas, runs out of battery power to do its job.

And so what we're finding is that by replenishing those deep cellular, functions, and reducing the inflammatory, headwind that your energy production, encounters, because all stress is lead to one thing, and that's inflammation.

And that inflammation is what makes that shift and energy and that shift in energy. Then doesn't allow the job to the

body to do the job that it needs to do, like to detox the body.

So we start accumulating more toxins. And that that becomes a real issue with mold as you know. Yeah. Yeah. No that's you know such a great point. And you know I'm so glad that you can be a story of hope out there for people who are listening.

And you know, I, I I'm so glad you're, you know, seeing things from this perspective because, as we talk about solutions and strategies, you know, I've had, this conversation, this thought over the years is like in the chronic illness world, right?

Everyone's fatigued. Everyone has low energy. And we have approached it in the past with, okay, they're buckets full. They're, you know, toxic that all of the downstream effect of that on the immune system, all of these microbes that are in balance and just like, let's chip away at that and then energy gets restored.

Cellular Energy and Root Causes of Chronic Illness

But with a lot of the solutions and tools and your mindset, and I think the change, a conversation that's happening more and more is like, okay, how do we bring cellular energy to the forefront of a protocol?

So then the body can actually regulate and to heal and do the work, you know, to clean up the body. So, is that your perspective at this point? And what what is life in your patients and what have they taught you from that perspective?

Well, you know, what I, what I find clinically and what I found for myself is that I had, I had to approach this both systematically, but also I had to look at various systems.

You know, before we started recording, we were talking about, you know, the importance of the sinuses and the nasal passage. And I think a lot of people, have a lot of inflammation that is caused by, you know, things growing in their nasal passage.

You know, we have this infection that we test, all of our bio toxin patients, actually, I test all of my patients. It's called mark ons. Right. And we want to try to get rid of this early on so that people respond to our other treatment.

So, you know, if you're listening to this, you know, you might want to look at getting yourself tested for mark signs to nasal swab. And basically what it is, it's this antibiotic resistant strain of bacteria that produces a lot of, biofilm.

So the biofilm is like the sticky, fly, papery type of, material. And so if you can imagine, if you have a lot of that in your nasal passage when you're breathing, it's, you know, what's in the air is going to stick, you know, to the mucosa, and then it's going to be carried into your bloodstream.

Right. And then it could also be carried into or straight into your brain from there and also into your gut. And so you could have a bad gut all the time just because your sinuses are creating that situation.

And the same thing for the brain. So what we do is, we have a couple of different approaches, but, my personal protocol is, we're using a product that we formulate and produce at my nose.

Incom. And it's called good estate. And it's one product, so it makes it really easy. We do have some other products that, other clinicians use, the Americans and the Americans be nasal sprays, but we've really found that just the one really does the trick.

And so this gluten, that nasal spray has emulsified sage, oregano, clove, as NAC, as glutathione. It has some terrapins that are very nice and antimicrobial.

And it has colloidal silver. So it really has everything that you need in there. And so we spray two sprays each side four times a day. And in the morning we like people to irrigate with a neti pot.

And you can actually put some of this gluten stat into the neti pot water. You can even put a little bit of iodine if you're wanting to be a little bit more aggressive.

And the neti pots done in the morning and in the afternoon. So that protocol is done for 30 days. And we have the vast majority of the cases that we put through that, are negative for Americans after we test them.

Awesome. That's great. That's a really great practical solution. And when you do the testing, are you also checking the boxes for fungal overgrowth and looking at biofilm, or are you just, you know, it doesn't matter if mark on it's positive.

You just, you know, proceed as, as you said. Yeah, it's going to be the same treatment no matter what, you know. So yeah sometimes people's curiosity but no in in bio regulatory medicine.

Right. We talk about these interference fields and you know, chronic infections that just really drain the body's energy. And are these reservoirs as you mentioned.

And so I find the sinuses are are huge in that. And so you know really great tip. And then we we're chatting to you wrote another book. This is potentially it sounds like your third book.

And it's around, the creating technique that you call functional cranial release. And that's really looking at structurally because I don't know about you, John, but I know about, you know, there's so many factors, but, you know, some of our patients come to us and have had repetitive sinus surgeries and, you know, or trauma, you know, to the actual, anatomy of the sinuses.

Sinus Infections, MARCoNS, and Nasal Protocols

And how does that impact recovering, the sinus health as well. Yeah. Great question. So, you know, I always say you're either a swamp or a river. And so if you're start using that training.

Yeah, you know, if things aren't draining properly, then it favors, microbial overgrowth. And so what, what happens in the sinuses is that because, really, it kind of goes back to Weston Price, right?

Weston Price is considered the father of the raw food movement. And what he did is he traveled all around the world, and he was able to see that civilized, in industrialized, people developed these collapsing phases.

And we think about how we need to have wisdom teeth removed. And that wasn't the case 100 plus years ago. So something's going on in, civilized culture, their stresses with food and and other stresses that lead itself to us mouth breathing, not breathing through our nose.

And and that's really what happens when we have a lot of inflammation in our body, is that oftentimes we can have challenges breathing through our nose.

And so when we start breathing through our mouth, our tongue drop backs in it, it causes, interference to the breathing, that way. And then there's a lot of consequences, negative consequences to, mouth breathing that include the facial structures basically collapsing in and, and basically everything just gets tight.

And so this creates poor drainage and you get more of a swampy situation. So what we do is we take balloons and the balloons are placed in strategic areas based on balanced testing that's done with, functional cranial release or the FCR.

And people can get more information about this if they go to functional cranial release.com. And you can see videos of me performing this, we do it a lot with people with chronic sinus issues, chronic sleep apnea, any type of issues with the head, chronic headaches, TMJ, I do treat a lot of neurologic cases with balancing dizziness and movement disorders.

Parkinson's, Alzheimer's, degenerative neurologic disorders. I mean, there's a lot of things that I treat using this, this endo nasal balloon treatment.

But for sure, if it's a challenge ging situation with the nasal passage, difficult breathing. This this treatment tends to do the trick. And, I, you know, I have never experienced it myself, but I've seen it done a few times.

And it's it's not, exploit. Like, what do you say? It's intense or, like, the way that you do it. And do you feel like it's just it's pretty quick. And most people, you know don't even know what happened because it's so quick.

I mean, just from a from a, patient perspective. What what should they anticipate? Well, you know, some people it's more pressure than pain. You know, I think pain is a personal, private experience.

So, the interpretation of pain, it could be pressure, but it's just we're wiring and we're filtering for something else. But, most, most of the time when I've treated patients that have had this type of work from another clinician that does it, we'll say that the technique is much more gentle.

We start out with lighter pressure, but, for those people that are really jammed, you know, when you expand that, that, that cavity with the balloon, I mean, it can be quite a release, you know, you literally can hear and feel things move.

And people are so excited. You know, they get so excited about the fact that, you know, they can feel that change and they feel better and they wake up more refreshed and they're breathing better.

So it's one of those things that you can really get that just immediate, satisfaction from like a treatment. And do you feel like one is usually enough or do I guess depending on the, the person.

But I'm just thinking of someone wanted to fly to come see you. I mean do you get it done in like 1 or 2 days or like just the anticipation, for, planning for that.

Yeah. So when people fly in, we usually we'll do it all in one week. So we usually do 4 or 5 treatments, back to back. People that are here for longer periods of time, we might stretch them out, local people, for instance.

Or if people that are doing longer protocols, you may only do twice a week. Awesome. And I imagine of course it and that only helps to, you know create a river whether you're in the swamp you know in you know the sinuses.

But also I'm like imagining the anatomy in probably a positive effect potentially also on the pituitary. Because I know a lot of our patients have a lot of pituitary dysfunction for a myriad of reasons.

But do you see that as well? Well, in the pineal as well, I mean, so so think about this. You have the cerebral spinal fluid and the cerebral spinal fluid is being circulated every 12 hours, that it totally goes around the central nervous system.

And it's a pumping action of the skull. And if you look at the skull and all the different sutures, they move in a specific pattern to facilitate this movement.

That's called cranial sacral motion. And so what happens is these things get stuck. And so you don't have that that motion that's pumping that cerebral spinal fluid.

But you also don't build up that pressure that's necessary because the pressure of the cerebral spinal fluid is actually the trigger of these cells within an area called the choroid plexus.

Right? The choroid plexus or within the ventricles. And it's the pressure that stimulates these, these choroid plexus to produce cerebral spinal fluid to begin with.

So oftentimes people don't have enough cerebral spinal fluid. And so there's not enough pressure. They're not

producing enough. And so they're not able to circulate these nutrients around the brain spinal cord.

And that pressure also goes and terminates at the third ventricle. And you've got the pineal at the very end of that, which when it's moved and you have pressure with it helps to really activate it and help it do some pretty magical things.

So the pituitary gland is also, you know, a gland that requires motion. You know, all of these structures in the brain. You know, when you move things, you know, you have something called the lymphatic system, which is this gutter system that flushes the brain of toxins.

You know, some of the things that we can do to enhance lymphatics are like, you know, we you initially talked about high dose melatonin, which I wrote a book about.

We can get into that because it's deep sleep. Deep sleep is the thing that really kicks in the system. Sleeping on your side actually tends to be favor the lymphatic system a little bit better.

And then also doing things to, improve the motion of the cranium can improve the lymphatic system. And I'm so glad you brought that up. And so so here we are addressing the sinuses, you know, doing this, technique.

Do you train, physicians if people can find people in their area? Or is there any way that, you know, for people who are thinking like, I need to go do this, obviously come see you.

I want them to go to your clinic. But if they're, you know, somewhere else where where should they look to find someone who is skilled in this technique?

Yeah. Good question. So, they can go to functional cranial release and reach out to me. And, I have trained a few doctors. But it's been a few years since I had a course.

Functional Cranial Release and Structural Drainage

I've been kind of sidetracked doing other things, but I plan on starting to train again soon, and probably in correlation with releasing this book. But but right now, you know, I would say it would just be a one on one referral if there's anybody in their area that I knew about.

Great, great. Well, I'm I'm grateful you're teaching more people and spreading this information and then obviously, you know, the sinuses, this technique, you know, has a profound, affect on the brain.

And we talked already about the pineal gland. And, you know, melatonin is becoming more and more, popular, especially in the realm that you're talking about it.

And the doses that you've been a proponent of. But, walk us through why any patient with a chronic, that they consider, melatonin in their treatment plan?

Well, you know, so if we think about, making energy. Right. So we had talked earlier about how cellular energetics might be at the core of all diseases, and fixing it might be the solution to, recovering from all diseases, especially, you know, bio toxin illness or mold, whatever you want to call it.

So where the rubber meets the road inside of the mitochondria is where oxygen and glucose are utilized in something called the electron transport chain, right?

So if you can think within that mitochondria, its job is to move electrons in the process of moving electrons. It's it's considered an exothermic response.

In other words, you produce heat with this, process. And so the body uses that heat to make energy which is ATP. Now within that mitochondria there's four particular proteins that kind of carry this on.

And they're complexes that are named one, two, three and four. And we'll get into that a little bit later when we talk about methylene blue. But you can imagine that when you're making energy in the mitochondria and you're producing heat and you're trying to convert that into ATP, there's going to be some smoke, right?

There's going to be some byproduct of making that energy. We call that oxidation. And so that oxidation is quenched by melatonin. And every cell in the body.

That's the primary antioxidant that buffers this this rubber meets the road in the mitochondria. And so we run out of that as we get older. You know, it's just the consequence of aging.

So, we either look at, you know, having that decline in health and increase in disease and susceptibility to disease, or we can supplement with melatonin.

And so supplementing with melatonin is, I think, something that makes a lot of sense for people over the age of 40. And and so yeah, so I think it's important for people to look at, sleep hygiene.

We want to look at the circadian rhythm. This is a very important sleep wake type of thing where, there's a lot of signaling that allow us to deeply rest, which is going to correlate to the parasympathetic nervous system.

And so this resting and then this, this wake cycle is more with cortisol. And the cortisol is going to keep us alert. That's going to help us to hunt, find food, get things done during the day.

And so melatonin is primarily the one driving the parasympathetic resting phase of sleep. And so when we start to suffer from declines in melatonin, we start to have a lot of problems with our ability to buffer stress from the person, that nervous system.

And where that shows up. Christina is in the, heart rate variability. So we can also look at heart rate variability with people and see that as we start to get older, heart rate variability starts to decline pretty rapidly, just like melatonin.

And the graphs almost look the same. And so I would also offer that it's melatonin is support of the parasympathetic nervous system that's really dictating that all important heart rate variability.

And that by supplementing with melatonin, oftentimes we can see some dramatic improvements in heart rate variability. And then as per all of the research, we see some incredible improvements in health and longevity based on that number.

I love that I mean there's so many angles to look at the role melatonin plays. And I always feel like I have an and a new one. So know that that's a really great angle to think about.

And you know I know that we both have connected and you know, looking at heart rate variability also in this idea of heart coherence and heart brain coherence.

And so can you talk a little bit about what your your perspective of that and the healing process as you know melatonin. So you know increased variability increase coherence heart rhythm and what your perspective is there.

Well you know, any time you're really you're really looking at, you know, vitality, there's, there's a need for energy to fuel that. Right? So when we're starting to talk about the coherence, you know, the that that connection between the brain and the heart, you know, and the idea is that maybe the heart's really the brain.

You know, there is the tissue in the heart and actually looks very similar to brain tissue. And there's been documentations of people losing quite a bit of brain matter and being able to function.

And whether, you know, a lot of our, our thoughts might be coming from, you know, the heart itself. So, you know, this is a really interesting subject and it's, it's something that I love to talk about.

And when you start getting into that, you start to really reflect on some of the spiritual, ideas that we have as far as, you know, coming from a loving place.

Right. And, and, and, and, and contribution and coming from our heart. Right, and leading from our heart. The heart, according to the Heart Math Institute, knows what's going to happen before it does.

They've done studies where they've actually, like, flashed pictures and the heart literally responds, up to 20 something seconds before the picture changes.

And so they're they're actually thinking the heart transcends time and space. So there's a wisdom that, that that runs through the heart that I would offer is a universal wisdom.

And, and this is one of the reasons I love melatonin, and I love looking at the pineal. And I love how melatonin converts into some other really important, chemicals and compounds and molecules that might allow us to to be more in touch with this, this other dimension.

Melatonin, Sleep, and Heart Coherence

Right. This other, aspect of healing where we're getting this coherent, effect through the heart, and we're seeing these instantaneous healings. So, you know, in Joe Dispenza, I've been I last I took a deep dive into some of his work last year and, you know, found that there was a lot of similarities between what he's doing and what we're doing.

And, and you know, what I, what I love is that, you know, there's this instantaneous healings that happen with people, right? And then there's the healings that happen 2 or 3 months after that might do some of these coherence, healings with the people there at the, at the, you know, at the, at the events.

And so what I've concluded is that it's, it's the microbiome that is more adaptable, and the microbiome is the one secreting all of these, all this information in the form of exosomes, which are these tiny little vesicles that circulate through your body.

And they, they're able to, create a healing response in the body where our own cells and tissues not being as adaptable as our microbiome, might respond, similar to how as if we injected like today, we had two cases that we did bone marrow with.

We went a big part of our practices regenerative orthopedics. And we do a lot of work with bone marrow and exosomes and, platelet rich plasma. And we use high definition ultrasound and place these cells, you know, in rotator cuffs and hips and labrum and meniscus and all kinds of things.

And so when we do these injections, we'll usually tell the patients it's going to be 2 to 4 months before the healing really happens. I mean, you can't expect to go and plant a garden and eventually and just immediately have tomatoes growing.

I mean, it takes time to grow. And so when you get into regenerative medicine, that can be the way it works. If it's the human cells and so I think it's really interesting.

It's an interesting subject. And I think that, you know, we could we could start diving into the microbiome as far as how important it might be, especially for the early, quick responding, healing sessions.

And what is more important than melatonin for us, for a strong microbiome? I really don't know. Yeah. And we can dive into that a little bit if you'd like.

Yeah. Yeah yeah please. Oh okay. So your microbiome is on our circadian rhythm just like we are. And so what happens is they have a rest and then they have more of a like a more of an active time.

And so at night when melatonin is high, your microbiome goes into what's called a swarming effect, where they, they actually regenerate. And so, there's 400 times more melatonin that's released in the gut than in the brain.

And so there's this huge importance for, not just a little bit of melatonin, but a lot for a healthy gut. And so. When we look at, you know, the various so I, when I wrote the book Melatonin Miracle Molecule, we broke it into chapters based on different diseases or organ systems, like what we're talking about now would be gut.

And there's so much research that shows the benefit of melatonin supplementation to Crohn's disease and ulcerative colitis and, you know, ulcers and really any degenerative, digestive condition you can think of.

There's been some there's been some research that shows that there's benefit to, the use of melatonin. Yeah I know your your book is phenomenal. I I love the reference in it.

So thank you for putting that together. And again another use of melatonin that people don't realize. You know the role in the microbiome and that that's so interesting John how you share like the more fast adaptability is coming from the microbiome rather than the human cells and I yeah, I it's something for me that, you know noodle because we have microbiomes in every part of our body.

Right. Our brain is a bank or biome or, you know, lungs or or skin, you know, all of that. So I think that's going to be a really exciting place to see the research.

It's like our consciousness has to tune into our microbes and help them to be, you know, more coherent and more, you know, with us. Right. So it's like this way of looking at the body, you know, we're like these stewards, right? You know, so, so no, that's a really cool perspective to think about.

So let's go into methylene blue because I, you've been really, innovating around methylene blue metals and has products. You do a lot of hands on clinical work in your, in your office.

So, how did you get introduced to methylene Blue? And just let's just quickly go through the methylene blue rabbit hole. Yeah. So it's, industrial dye.

Is the audio okay out here? Yeah, it's kind of outside to get a little, you know? Hey, you're practicing what you preach. Yeah. No, I well, today is a methylene blue loading day for me.

So, you know, it's nice to be out here in the sun getting a little, a little UV. So nice. Yeah. So methylene blue. It's an industrial salt. And what's fascinating about methylene blue is it works so powerfully on the mitochondria in a way where it works on all four of those protein complexes that we talked about.

And so there hasn't been a complex that they've ever or a compound that they found that works. So, so amazingly, on all of those complexes, one of the complexes that it works on pretty well, but not like, as well as the other ones is the fourth one, which is called cytochrome c oxidase.

And so that cytochrome c protein is also the the the area that light works on because zero and chrome meaning light cell light. So when you combine the methylene blue with with light it's it's just amazing.

It just turns on the mitochondria like nothing that we've seen. So what we started using in our clinic is intravenous laser along with IV methylene blue.

And besides being incredibly anti-microbial, it also has, the ability to really turn on the, cellular energy. So then the body can go in and do you know, the, the work that it needs to do.

Methylene Blue, Light Therapy, and Mitochondrial Support

Yeah. Awesome. And so walk us through I guess, if people wanted to explore using methylene blue at home like and obviously under guidance of their doctor OSHA just had a truck drive by. Sorry.

Oh, yeah. Oh, yeah. Anyways, just how to integrate this. Like how to think about integrating this in their protocol. Like you said, you're doing a loading dose today, so maybe.

What does that mean? Well, so I'll pick 2 or 3 days a week that I'll take methylene blue, and I'll make sure to get in front of the red light and get out in the sun as much as I can.

I do this with my patients. So we launched a product called Luma Blue. Luma tal blue. Excuse me. And Luma Tal blue is a, polyphenol. That's, that right now, we're we're kind of in the process of of trying to make it a little bit better, but it's a suppository that's made to, take orally.

So it's a 300mg suppository, and you break it into four pieces and the piece is the suppository. Is is basically, palm oil. So it's hard during within room temperature.

So you can throw it in the back of your throat and drink it down like a tablet, and your mouth won't get all blue. Really? Every other oral, application, is it?

You put it in your mouth and your teeth and your gums turn blue, and you look kind of like Frankenstein a little bit for a while. So we're trying to avoid that with, with this.

And then obviously and then we have a suppository, which is also very effective at slow releasing the, the methylene blue into the bloodstream over, you know, five or more hours.

And what, you know, I'm curious from your perspective, so it sounds like a lifestyle, like just, you know, pulsing methylene blue just because of modern life and for optimization to after, the healing journey.

But, is there any, like, kind of time frame that you guide patients in, like, let's do it every day for three months, and then you get into maintenance dose or, you know, any guidance from your observation of, how to work when people are brand new to this?

Well, yeah, I mean, I'll have my patients that I'll dose daily with methylene blue. There's been some really amazing big clinical trials on depression, challenging depression with methylene blue.

And they were dosing people at about 75mg a day for extended periods of time. And there didn't seem to be any side effects. You know, if you're on SSRI for depression, that would be the only thing that, you might have some concern because there's some information online that that discusses some possible, side effects with combining those together.

Yeah. No thank you for mentioning that. So then you know with getting I. V. methylene blue, can you just share kind of your thought process of when to add that into a protocol or it sounds like also from the in-person experience to, the yeah, guide people through the week, it just really turns everything up a notch.

But just. Yeah, your observations there. Well, we, you know, a lot of cases that fly in, that travel in with us, you know, we will treat them, with a combination of ozone and methylene blue.

So one day we might do methylene blue. The next day we might use ozone. And we might see people daily, you know, we might see people five days a week.

We might see people less than that. It just depends. People that travel in, usually we're it's a daily schedule. People that are local, we can spread it out a little bit longer.

But it tends to move the needle pretty well for a lot of the patients that we've used it on, maybe more so than anything else we've used. Yeah. Awesome. Yeah.

I've just started using, and referring people for I. V. methylene blue, and it's new to me. But yeah, it's really exciting. And just the more I learn about it, like melatonin, it's like, you know, how could we how could we ignore this? Right.

And then. So, John, what color, laser light do you use with in your office? So the methylene blue is activated by a very specific, wavelength and frequency at 660 nanometers.

And so that's, that's the one that we use. And so we also we have, panels that we sell as well. We're called we call them metal lights. Nice. So we have little mini ones that are really phenomenal for traveling and everybody that I've turned on to these little mini red lights, they, they it's like one of the best things they've gotten, you know, in a long time.

So they're really neat. So, you know, you can start, utilizing, methylene blue even on an oral protocol with, with some of the products might ozone makes.

There's other companies that sell, you know, that sell methylene blue. And then you could get a red light and start using the red light. That's a pretty simple kind of way to get started.

And you could do it daily or you could do it, you could pulse it and do it a few times a week. But, you know, you should really find someone that can help guide you through this.

You know, a lot of people may not be. It might it may not be the best idea to go it alone, you know, to find a health care practitioner. Yeah, absolutely.

I mean, I think it's great that there's so much education out there for people to feel empowered by and, as you know, get closer to figuring out what they need.

But I agree, it's hard to be when you're in it. You need perspective and someone to help prioritize as well. So John, as we wrap, is there anything else you want to share with the audience today about what you're most inspired about at this moment?

And the chronic illness community? Well, you know, we touched on the melatonin and the methylene blue, and those are the things that really have me excited.

We talked about the the unknown, a balloon releases that can really help unlock the skull and improve brain function and improve sinus health. The importance of using of doing a sinus protocol like a 30 day sinus protocol, whether you've been tested for mark signs or not, everybody really should be tested.

Whether you test yourself before or after the 30 day protocol just to make sure that you don't have it, would be the only consideration I would give it.

Closing Thoughts and Resources

You know, I think doing a good, blood panel, you know, for a doctor that's been trained and qualified with bio toxin illness to be able to look at some labs and look at what, you know, what you're dealing with, look at viral titers are really important.

And inflammatory markers, some some some hormones I think are really important to look at. You know, we we balance hormones. We have a, specialist in our office that co treats them and so, you know, I think those are all really important.

We covered a lot of these as like mitochondrial support binders we didn't really talk about. But I'm sure you're covering that extensively in some of your other talks.

You know I think that with all of that in context, if you've taken good notes during this, this interview and you start to kind of rabbit hole and expand on all those subjects that we touched on, I think you're going to be really far ahead.

Yeah. No, absolutely. I really, appreciate you sharing your knowledge and your wisdom and all these great resources. And if people want to learn more about your product line and your clinic and even the training, then

you're going to start doing more of can you just share some of your websites so people can drop those down as well?

Sure. So the store is my toes Incom and MIT the Incom. And then I have an educational site called Ultimate Cellular Reset, dot com. And then we also have Instagram Doctor Moto and Instagram and then my, my clinic website is Advanced rejuvenation.us.

Great great great. Well we'll have all of that alongside this interview. And thank you so much for the work you're doing and for your time today. Well you're welcome Christine. Thank you.

Thank you. I.