Introduction to Hidden Infections

Welcome back to the conversation. Today I have Dr. Christine Schaffner. So happy to have you back. Oh, thank you so much, Laura. It's always so fun to be in conversation.

And you're a dear friend. And I'm I'm glad we're doing this today. Me, too. I think you've been on every one of my last six events, so thank you again.

You're so. Let me introduce you for our audience who might not know you yet. You're a board certified Naturopathic Doctor. You've helped thousands of people recover from chronic and complex illnesses.

You host the Spectrum of Health podcast You have online programs and you have a clinic in Seattle where patients can see you in person. And today, we're going to talk about one of my very favorite topics, chronic hidden infections.

And you're the perfect person to do this because we're going to be talking about the places where you don't expect hidden infections to be. So we're going beyond the gut. We're going beyond the lungs.

I mean, people think about you get you get respiratory infections in the lungs and you get, you know, gut infections and parasites and bacteria. And, you know, people think of think of infections kind of being isolated to these places.

But what they really go everywhere, right, Christine? Yeah. Yeah. Those are just two of many, many places that are hotspots for the body. And, you know, as you mentioned, this is silent and hidden infections.

And so it's not so obvious. Yeah. So what we're going to do today is we're going to go over where they are. We're going to talk about signs that, you know, you have them.

We're going to go way beyond using prescriptions and supplements to remove infections. We're going to explore some other ways to help solve this. And before we get into, you know, where are these infections are hidden, I think we need to explain and define one really important concept and that's pleomorphism.

So let's start there. Yeah, I love to and you know, I'm a naturopathy doctor, but I've had the opportunity to also study what we're calling now in the U. S.

bio regulatory medicine that was also known as biological medicine that has these roots. And in Germany, Switzerland, Austria, and, you know, they took ancient philosophies and principles and kind of a modern day lens.

And then they, you know, really have these kind of, I would say, two really main topics that allow me to help so many people. Because the premise of this system and again, any system that really helps people is that the body is very intelligent and it has this self regulating capacity and it knows how to heal.

And you know, when we're in our role as a practitioner or a doctor, our job is to identify those hidden or obvious roadblocks as obstacles, to allow the body to have that energy to do what we don't even know what the beginning of how you know, why they do it.

And so so again, with by regulatory medicine, we'll talk a little bit, I think, in this conversation probably about interference fields. You already have Dr. Moldovan about the mouth and you know also there are other focal infections, the tonsils, the sinuses, how scars interact in the body.

And then this idea of Pleo morph is so these are I heard this rather is this idea that, you know, we're talking more train theory and we're not talking germ theory.

We saw this kind of get us up to speed there because my job is not to kill every bug and you know, that person's

body that is, you know, coming to see me.

And my job is to make them adaptable, resilient that they can encounter stressor. And it doesn't become a long term stressor, chronic illness, and they can adapt and move on.

And so when we think about the terrain rather than germ theory, it's our job. It's more of an empowering version of kind of how to look at the body that we can strengthen and we can epigenetically optimize our selves.

We can train toxicity, we can balance our immune system. There's many things we can do. And then when we encounter that stress, that toxicant, we don't have to have the same response as, you know, the standard American diet people would, you know.

Pleomorphism and Terrain Theory

And so there's a lot more that we we can modulate in that, rather we get a you know, we get a virus or bacteria, you know, we encounter it. We get the same textbook symptoms and everybody is doomed to it.

And you only need a vaccine to clear it and you know, move on. Right. That's germ theory. So polymorphism is this idea that that the actually the you know, we have microbiomes with an S and then we have, you know, these different and stealth pathogens that we can encounter and we can actually change the virulence of either commensal flora or stealth pathogens based on environmental conditions.

So this is maybe the obvious kind of like example I use. So there's a clear relationship with mercury toxicity and this is pretty well known, a lot of snow and a lot and functional medicine.

Now that you know, when people have really persistent Candida overgrowth, you think, okay, they've got to change their diet. They got to be I'm like no sugar forever.

They got to be on the antifungals. And why is that person not getting better or even getting worse? So candida is known to sequester mercury and and so and so it might even have an adaptive, you know, kind of quality to be allowed to thrive in the body when there is a high load of mercury and people have had amalgam fillings that people have been in occupation with mercury exposure.

If you're just on planet Earth or live on the West Coast, you're inhaling mercury, you know, in some way, you know, from coal burning. And so if you don't tend to the environmental burden of mercury in the body, you'll just be whack a mole with Candida.

But if you have this kind of idea, like, okay, if I drain the mercury out of people, if I use chelation when appropriate, that I can be more successful with my Candida protocols.

There's also the caveat there. When people get worse with Candida treatment, there can be a neurotoxin, basically exposure with a release of mercury, you know, when you're going through that.

So so it's you know, we know this mousetrap as well. There is a mercury disrupt connection in the throat especially. And so it's there's this dance, this kind of dynamic conversation and dynamic aspect of how our body maintain maintains homeostasis, maintains the health of the ecosystem.

And so we look at relationships and I would say for the purposes of our conversation, think could play a microcosm is this like relationship between, you know, toxicity and how that impacts your immune system and how that impacts your ability to modulate your immune system, either clear or something and move on or let something just kind of be resonant and stay in Paris.

Things are pollutants, things as well. They'll sequester toxicity as well. So if you have a persistent parasitic infection, the same kind of idea holds.

So I hope that makes sense. Yeah. I want to unpack a little more pleomorphism just a little bit. Can you talk about it in the context of H. Pylori? I think that will help people wrap their minds around it.

It's really clear. Yeah. H pylori I would say the same, you know, h pylori is commensal flora. Right. We know that we have bacteria in our GI that reside.

I think of H. pylori. You know, when you think about the environment or the train, why is it so persistent? I think it's multifactorial. I think, you know, what I know to be true is when people actually have low stomach acid.

So a lot of the chronically stressed and you know, they are rushing when they're eating. There is many things that have like slowed their digestive fire for a time.

That lower esophageal sphincter doesn't get the signaling to close as tightly as it does between the stomach and the esophagus. So then there's a ligament laxity in that lower esophageal sphincter, and then people can feel, you know, basically heartburn, which is related to H. Pylori or the conditions of the city, that of Ironman.

It's like making people think they have high acid. But in, in, in fact, there's a lower acid environment allowing that commensal for it then, you know, basically not have the brakes on it and to thrive and populate.

So that's kind of one example. I also really I love that you have Dr. Moldovan on your summit and you know, just think that the oral microbiome is so interrelated to our GI tract.

So if you have upstream toxicity in your mouth, if you have periodontal disease or, you know, toxic mercury, amalgam fillings or cavitation of root canals, you're basically swallowing toxicity and swallowing, you know, this biotic flora that can also basically affect, you know, not only the stomach and the upper GI, but also the, you know, the GI tract, you know, the intestine and everything as well.

So that would be my first my first thought there. Okay. Thank you so much. So now that we've kind of laid the the foundation of where we're going to go and talk here, you know, looking for hidden infections or finding hidden infections in the body are such an important piece of the discovery process when we're looking for root causes of chronic inflammation, health conditions, diagnoses, you know, even something we were talking before we jumped on the camera together is mast cell, for example, you have to look for the underlying root causes of this.

It's just not a matter of, you know, just treating Mast cell. There's other things that need to happen. So can you explain why it's so important for us to do this piece that we look for hidden infections?

Yeah, and absolutely. And you know, you're doing a great job in the segment educating like when people come to see me, I have this idea again, I remove interferon my skills and understanding about play of more of, as you know.

But I also kind of look at buckets of why people are sick and it's exactly what your segment about toxicants, pathogens, and trauma And when we go into that pathogen and, you know, kind of bucket, this is also there's a relationship, as I mentioned, between toxicity and the immune system and also trauma and the immune system.

And that, again, you know, is this play and market idea and there is this ecosystem. So where, you know, we're made of microbiomes, microbiomes, we have a virome, we have 370 trillion viruses that, you know, epigenetically dance with us and are part of our milieu.

Right? So we're not meant to be sterile. Like that's never been, you know, how nature intended. Then we have microbiomes in our brain. We have microbiomes in our lung and our sinuses and our, you know, in our tonsils, on our skin and our obviously our God and our pelvic floor and our bladder.

You know, there are all these places where those microbiomes can become in balance. So, again, great people are going to be talking about toxicity and trauma.

So within those microbiomes and in the stands for the immune system, why do we allow things like Lyme and co-

infections to thrive or viruses and retroviruses or parasitic infections or fungi and mold?

So what I have found is that there can be you know, usually when people come to us, it's not like they get sick overnight, right?

Why Hidden Infections Matter in Chronic Illness

They're, you know, but from preconception to how they were delivered to their families choice the breastfeeding and vaccination to the stresses that they encounter to okay, then you live in a moldy house, you get a divorce and then you're sick.

You know what I mean? It's kind of like this, you know, again, this it happens over time. And so, you know what? I want to share about that is that there's a slow weakening, like with all of this stress.

I mean, it's very, you know, stressful to be a human. And, you know, I'm Mother Earth, you know, these days there's so many things coming at us right now.

You know, they're they suddenly weaken us. You know, I was talking to a patient like we have to spend a lot of money not to be poisoned in America these days.

Right. And so that kind of slow poisoning also affects our immune system. So let's say, you know, somebody had, you know, strep throat like a toddler, you know, and, you know, like I had a bunch of strep throat.

And over time, their, you know, their buckets are filling in the other, you know, departments, toxicants and trauma. Over time, the body becomes, you know, kind of almost can't even amount of response anymore in that tissue.

That tissue has been kind of overcome. And B, you know, it becomes this kind of silent reservoir of these microbes that kind of hide out. This is, again, this idea of, you know, these vocal infections, these silent infections that are in key targeted areas and tissues that have a profound effect on the body.

I would say nine out of ten of my patients have a tonsil interference field. And when you think about the tonsils, we're going to spend them on the tonsils do. Yes. Right.

Yeah. So just think about it. So, you know, chronic strep, you know, if you've had chronic strapped, if you've had mono or EBV, if you had amalgams that are draining into the tonsils, you know, or any root canals or oral microbiome, you know, the tonsils sit at the base of the one paddock system and then at the top of the gut associated lymphoid tissue.

So there were actually I kind of think the connection between the gut and the brain is in the tonsils. And so if you have this kind of, you know, unhealthy reservoir of tissue that silent, again, your body's not, you know, telling me you have a sore throat anymore or you're not getting, you know, all those, you know, acute inflammatory signals anymore.

It's just kind of it's there there is an entry point into the brain, you know, from the tonsils. The tonsils can have there can be these kind of, you know, highways for microbes to find themselves on into the brain, on the through the nerves, highways and through the, you know, the crypt of foreign plate.

So in the olfactory system. And that can enter into the the brain that can actually, you know, be a source of microglia activation and all sorts of neurological symptoms.

Again, the tonsils can also be at the base of the lymphatic drainage. So there are couple routes for the lymphatic system to drain. So it's in the front of the neck, around the jugular veins alongside that.

And then if you did a cross section of your head through the crib before and played a shared and then the train ends around the tonsils, it's also, you know, when you think about the tonsils, think about there's five lymphatic

tissues.

The wildfires ring, there's the adenoids, the Palatine tonsils, the two tonsils, the lingual tonsils. And that whole ring can become, you know, really a reservoir.

So all of a sudden you have, you know, poor drainage, you know, through that root and also migration upstream as well that can keep things inflamed. And then when you think about, you know, swallowing and kind of the tonsils become weaker and don't defend you as well, like, you know, the things you're encountering through your food and through breathing.

And then more and more things travel down the lymphatic network in the gut, and that can also perpetuate and keep your GI symptoms, you know, in a chronic state because you have this I think about interferon still does not only have these infections, but you have the bio toxin, bio toxins that they release that can kind of chronically poisoned the nerves and the length and the, you know, circulatory system as well.

So the tonsils are kind of like a big deal for us because, you know, who doesn't have a problem with, you know, all of those things when they come to, you know, somebody like ourselves, you know, to treat.

And so that would be a really, you know, a big hit and I would say focal infection, the big hidden source of infection that, you know, we can treat, you know, there is different arms so we can use ozone differently also to regain support there.

You know, the best kind of idea, like the clinical presentation around what I'm saying is the whole world of pandas and pandas like that is kind of a technical name for like upregulated gut and brain inflammation when there's a reservoir of infection in the tonsils ring.

Okay, so one more. You know, as we're doing this first part of our interview here, I'd love to touch on some of those other places that could be reservoirs for infection.

So there's a few other hidden places. So let's unpack that before we go into, you know, big solutions for this. So what are the other places? Yeah. So just since we're, you know, talking about, you know, the tonsils, we'll just go right to the sinuses.

I know in the world of mold, there is a lot of conversation around sinus dysbiosis. We have a whole microbiota in our nasal passages. And if that becomes out of balance, just like if it was in our gut, that can be a source of bio toxin activity as well.

And the sinuses are very close to the brain, not only through the entry right for the cargo form plate, but this, you know, in sinus is right near the pituitary.

And so, you know, when we think about chronic inflammatory response syndrome, that is a a kind of like a pattern that we see, like with mold, illness and Lyme and biotech carcinomas.

And why I just mentioned that here is because they kind of came in doctor Shoemaker came up with the idea that the bio toxins from sinus dysbiosis really affect the pituitary.

And that's why we see a lot of antidiabetic hormone that that is dysregulated. And so people who have this can be chronically thirsty or they get up to pee.

I know these patients because they come at my office every so often to go, you know, go pee, try to, you know, hour to hour visit. So there's a direct connection to the brain.

And when I'm, you know, I'm the big, you know, people come to help me, you know, on a lot of levels. But, you know, we talk about really helping the lymphatics and the drainage and improving cognitive health.

And so if we have infection in the sinuses, in the tonsils, that's going to be, again, an area of stagnation and a source of bio toxins that can keep the brain inflamed.

You know, you've already covered cavitation, but cavitation is a really big hum that can also poison the vagus nerve. So I think about, you know, vagus nerve toxicity and infection.

We know a lot of Lyme co-infections hang out in the vagus nerve. So people are talking about this slide on and on me. I and they're just talking about like gargling and singing and all that stuff, which is awesome.

But, you know, why is the vagus nerve disrupted in the beginning? What then? So I always look upstream and make sure my parts patients and this other NAMI patients don't have a cavitation.

Just think about you.

Common Reservoirs: Tonsils, Sinuses, Vagus Nerve, Brain, and Appendix

Know so we do have a talk here with Dr. said mold often talking about cavitation which are little pockets in the jawbones just in case somebody is wondering what that is.

It's a little infected pocket in the jawbone. So if you you know, you really should catch that interview with Dr. Moldovan because we talk about what to do about that.

So go ahead, keep going. Christine Yeah, I can totally. It's just this area of necrotic tissue that never heals when you get your tooth extracted and that can be due to proximity.

It can, you know, some of these microbes can settle into the vagus nerve again within the circulatory system. And so then, you know, when you think about like, okay, what is vagus nerve toxicity and infection mean?

So if we have, you know, basically these toxicants and these pathogens starting to accumulate in these neurons that are, you know, make up this long, you know, nerve that has all these beautiful functions that that, you know, engage in our parasympathetic activity and our heart and her lungs and and try and have that communication highway between the gut and the brain.

And the brain to the gut is starting to be full of microbes, toxicants. There can be a slowing down of communication or even, you know, changes can even lead to cell death over time.

And so that can be a big area, I think, of hidden infection, you know, especially if people have any autonomic issues which most most people with a chronic illness do.

So, you know, we covered tonsils, we covered sinuses, we covered the vagus nerve. I'll just kind of it goes without saying, but the brain has a microbiome.

And we know that a lot of the pathogens that you're talking about can get the central nervous system and they can affect, you know, electrical activity and signaling and neurotransmitter release and affect people not only from, like insomnia to brain fog to depression, anxiety.

And the list goes on. So in a big part of our work is to try to clean up the entry flow to the brain so that we can get some deeper treatments to the brain to heal it.

And then I'll say, you know, I would say the next place, I mean, the appendix, you know, the classical valve, we talk about SIBO all the time and this is obviously something that needs to be addressed and treated.

But when you think about why, what's happening is the feedback to you from the large intestine are entering into the small intestine, from the large intestine, into the ilium, through this valve where there's kind of a juncture, you know, where one in one part of the intestines.

And during the different part, there is a valve that kind of is entry way or can or it can close off an entry way. And sometimes that can get stuck open, it can get stuck open or closed.

And so that is right at the same area as the appendix. In the appendix you said the thought is vestigial tissue, that it really never matter. We just evolved out of our use and there are lots of thoughts that it can be a reservoir for probiotics.

So when the body's gone through, you know, different periods of stress or antibiotic use, that that reservoir can be released, but also it can be a pocket of where if that area is not like, again, that environment, it becomes pretty, you know, the waters get muddy, right.

The Tebow's happening and of course that open, you know parasite can migrate there, fungi can migrate there. And there could be this low grade chronic appendicitis that's not acute but is kind of like weakening and poisoning that area.

So that's another one. And then I guess. I have to say really quick, I'm going to say this moment right now is my most delightful moment of this entire project is that it is I have such delight right now that the appendix could be a reservoir for probiotics that just makes my heart.

So I've never heard that before. But this is what I'm going to think of every time I think of the appendix now and that I still have my my I don't have any more about at 21, but I have my little reservoir.

Okay. I know, I know. It's is the body's lies, right? First. So give us a couple more spots here. Yeah. Chronic infection. I would say. Let's talk about the bladder. Right. So there microbiomes in the bladder.

I see a lot of patients with chronic UTIs and interstitial cystitis. And, you know, the interstitial societies can be like a nasal issue. But again, why are the muscles so irritated?

We always have to ask that question and then chronic UTIs can be when there are and you know, some bacteria just make at home. When you treat Lyme and co-infections, it's often known that skyrockets like the bladder and so they can create biofilm communities.

And biofilm is a big, you know, I would say a source of an infection because, you know, these microbes are intelligent and they can find ways to thrive within us.

And biofilm in the creation of biofilm can be a way for these stealth pathogens to block the entryway of the white blood cells getting through to help clear that.

So the chronic UTI idea is, you know, there could be like a home base, as, you know, not only bacteria, but, you know, I've seen parasites in the bladder.

And then there's a there's a courthouse called Microbes and an ID for people have chronic UTIs or interstitial cystitis. You can take a and a capture of your urine and do a PCR test and then Ruth Chris is a wonderful nurse practitioner who did a lot of work for this community and she's retired, but she consults with my surgeon and she will talk to you about your patient and help you to do targeted antibiotic therapy again when it's appropriate or herbal therapy to help resolve a chronic UTI issue.

So just a plug for that because that's helped a lot of my patients and I could keep going. I know. I know it's not for you. Okay. So we are coming to the end of the first part of this talk, but we're going to keep going.

So, Dr. Schaffner, thank you so much for joining us today. This has been an extraordinary already what we've learned about chronic infections in the body where they're hiding.

In the next part of the talk we're really going to get into when is it proper or when is it appropriate to kill? When do we start a killing process? Do we really want to kill everything and and ways to do this beyond, you know, beyond

the pills, beyond the supplements?

What are some of the strategies? So to our audience, I hope you found our conversation thus far insightful and helpful. I know I certainly have. If you're a summit purchaser, stay right here, because we're about to dove even deeper into this discussion with Dr.

Schaffner. If you're not just click the button on this page to get access to a continuation of this conversation and all the others and get the tools you need to reclaim your health if you're watching a continuation of my talk with Dr.

Schaffner, thank you for being a valuable member of our community, and we're going to dip right back in. Okay, Doctor. Dr.. We, we ended with, you know, this whole talk about all the places hidden infections are at.

And then you said, Well, do you want me to keep going? So do you have a few more that that we should unpack before we get into the kind of what do we do about this? Do we do we tell them straight off, is there some stuff that needs to happen first?

What are the modalities to kill? Yeah. Yeah, yeah, totally. So I, I'll really say two more things maybe. I mean, I don't know, I could go on, I'll, I'll love them together.

I'll do two more. The joints, you know, the joint capsule can be an area where and co-infections thrive and spiral. Kids and other co-infections have the ability to degrade collagen and also to upregulate our own MMP nine to go deeper into tissues.

And so they can traverse, you know, into joints, you know, throughout the fascia into cerebrospinal fluid and other, you know, really collagen rich tissues like the heart and the eyes and so forth.

So the joints are, you know, big one of you have arthritis, osteoarthritis or any type of arthritis. I highly encourage you to look into ozone therapy and to consider getting your joints ozone needed and maybe following that up with regenerative medicine from PRP to EXOSOMES to stem cells to save your joints.

And so that could be an area. And the other area I guess would go hand in hand, I would say. So when we think about the blood vessels, there is the endothelial like, okay, legs, and then there's the endothelium.

So in the in the blood vessels, it's well known that some infections like chlamydia, pneumonia or other even bartonella, I believe, can live in the endothelium.

So they create biofilm communities within the lining of our blood vessels and live and thrive in this nutrient oxygen rich environment. So if you have any circulatory issues or cardiovascular issues, this could be a hidden infection.

The circulatory system is very much tied to the system. I'll leave here. You know that you know that a lot of the action that's happening in the body is kind of the space between the cells.

Right, and the space between the cells is the beginning of our lymphatics. And a lot of that fluid is strained and still in barracks. And then the lymphatics job is to, you know, drain and detoxify that lymph and what's getting removed in the waste and also all the things that the bodies encounter and return it to the circulatory system on the way there, it's encountering lymph nodes and lymph organs to mount a proper immune response to hidden invaders.

So when we think about, you know, chronically swollen lymph nodes or the spleen or the thymus, you know, actually the tonsils are part of that lymphatic tissue as well.

So I would say your lymph nodes, your lymphatics are definitely an area where chronic infections can thrive. This is such a good talk. So ah, okay, so so many questions and I only have so much time.

So I said is now everyone's thinking right now I think I want to kill these things. I want these out of my body like and so it's a lot of functional medicine just goes straight for killing and that creates a problem.

Additional Reservoirs: Bladder, Joints, Blood Vessels, and Lymphatics

So let's talk about first, let's talk about when it's appropriate to kill when we start a killing plan, what needs to happen first before we can actually safely help your immune system?

When I say we're killing stuff, we're also boosting the immune system to solve this, right? Then we can get into after that some of the modalities that you can use beyond just pills and supplements and and antibiotics.

Yeah, yeah, absolutely. So, you know, when I kind of a patient comes to me and we approach, you know, like, okay, where do we begin? I just want to say, you know, you want to work with a provider that can help you prioritize, right?

Because there's so many things to think about and yet we can't solve them all at once. So how do we, you know, really prioritize treatment? I employ not only my regular diagnostics and specialty labs, but I and then big believer by a resonance and bio energetics and muscle testing that guides me a lot with my patients, but their principles and there is a quite a, you know, I would say roadmap.

So I want to identify my first, you know, these areas of hidden infection. So I do that with these tools that I'm sharing. There's also like a clinical picture that you can often learn and it's really a clinical diagnosis where these infections might be.

So it's hidden infections if there's a dental problem or if there's scars in the body. That's actually I want to know that. Do I go after all that at once?

Maybe not, but I definitely will inject tissue with protein. That's the neural therapy technique to open up the social network, the lymphatics support, the, you know, energy meridians and the nervous system so the body can regulate and heal.

And I often won't really do much, but the patient of they still have mercury and organs of they still have mercury amalgams. That will be the first thing I will try to get their body in a way to work with a great biological dentist to get their amalgams out.

I find that when people have amalgams, they're very hard to treat. They can be quite reactive. You know, your hands are tied with detox agents and it just, I, I, I have a, I have a kind of a tenant there that I like to buy because I know I've tried to, you know, patients have told me if I ignore that, we just run into problems.

So kind of knowing where we are there and then I'm a big believer in draining the lymphatics and, you know, having lymphatic drainage on board. I think that's a huge piece of that.

If the swamp is moving, it's going to be really hard to add anything to that system to work. We're just going to get into, you know, more stagnation, more congestion, more flaring.

So I think about that. I'm a big proponent of binders. We use a lot of software binders and Clarissa and chuckles at times and zeolites and modified citrus pectin and all that kind of stuff.

And binders are very foundational because they're there to lay in the intestines when the bile releases, not only in bile that helps to digest your food, but also where vials are out of elimination.

This is where a lot of our endogenous metabolic waste and toxicants are coming out of, but also a lot of these mycotoxins bio toxins, their toxicity. And so we need the, you know, binders on board.

I'm also a big proponent of supporting the organs of elimination. You kind of want to support everybody. You know, most have kind of a weak link. So we're thinking about liver, gallbladder, colon, kidney, skin, lungs.

And in this day and age, you know, patients are becoming more and more sensitive. And we mentioned already the

mast cells. So the mast cells, there's some underlying causes, but some people are so sensitive that you want a stable rise through my cells and get a good nasal stabilizer protocol so you can actually get in reach these root causes and that your patient is in having rashes and reactions and, you know, you can't go deeper.

I'm a big believer on, you know, also restoring blood flow and, you know, getting above that endothelium and also the endothelial. Okay. Like so a lot of people have very thick blood.

So it's full of, you know, spike protein and fiber and then, you know, all sorts of things. So I use enzymes and I like Blue Key and Sara peptides and sunshine and our carousel and you know, keep the blood moving and then we also have to have a good sleeping environment, right?

So sleep is really important. It's kind of the chicken or the egg, but sleep is really critical for healing and repair in that lymphatic activity. So I just kind of, you know, really try to create a safe sleeping location on that love, an electric smog.

So turn off your wife.

Preparing the Body Before Killing Pathogens

I don't bring in your, you know, electronics, try to minimize blue light and then kind of like, you know, like that's like foundational. Like those are like the foundations and then, you know, and this can happen, you know, it's not a linear, it's dynamic.

You know, those are really important parts of my protocol. And then, you know, I use, you know, clinical signs and then, you know, symptoms and muscle testing to help prioritize, you know, what what is the infection that we need to go after first?

And, you know, often, you know, I know everybody wants like a cookie cutter way, but, you know, there is an interrelationship. And so often, let's say parasites are coming up.

I'll use my parasite remedies. But within parasite it's are often Lyme and viruses and they can be released through parasite treatment. So we want to make sure we have, you know, support for the downfall of, you know, the after fall or after fallout.

Yeah, fallout of that. And so, you know, that or, you know, like if we're going to be going after Candida, like I mentioned, we want to make sure we have some neurotoxicity mopping up so people don't get mercury, you know, toxic.

So I often layer, you know, I'm I do have, you know, protocols that are pretty balanced. But I often layer, you know, like is a parasite mode where we're going after and then the some type of herbal strategy to support the body with, you know, viral and and co-infections at the same time.

That's very typical in my protocols. So that's kind of how I think about things. And then again, we're not going to kill every bug, but can we get the body down the threshold, the microbial burden down so that the immune system can take over?

And sometimes that's easier than others for individuals, depending on, you know, what's going on with them. So it's good information. Okay. So I know I'm just like shooting questions at you.

I want to I want to squeeze as much out. He was like, Yeah, what I love most is that like 5 minutes for we came on here. So Christina have said, yeah, of how I'd like this to go are you game and yeah this is Christina just does flow and so okay you're just pouring your brain out with no preparation whatsoever.

Whatever you want to ask me, Laura, I love it. So here's what I want to know. I want to go beyond the I want to go beyond the supplements, beyond the prescriptions, beyond this, there are many modalities that can help support

your immune system and your body to clear against infections.

So, yes, the supplements are important. Yes, sometimes prescriptions are important, but there's a lot left on the table by Western medicine for sure. And also, I'm going to say it most of functional medicine.

So what are the extra things you can do? Right. So, yeah, absolutely. So I'll just start with some foundations. So, you know, I know you probably have people talking about this, but I'm a big proponent of, you know, clean filtered water.

I love structured water. I know there is a time for distilled water, but I'm a structured water person. It just makes a lot of sense with how we're wired to generate electricity and energy in the body.

So filtered, structured, highly mineralized water is really foundational. And then I would say, you know, that kind of circadian biology. So making sure that you don't have light, you're not surrounded by LEDs in your home environment, that you're using, you know, more full spectrum lighting.

There is a light, you know, incandescence are going away. And so there's a light called Chroma Lux, which is a health light that combines incandescent and halogen, which is like a soft, warm glow.

My friend Julie Conway told me about this. She's a glassblower. And we were like, What are we going to do with that without incandescence? And so we found those lights.

We're going to go back to burning candles. Christine I know, I do now. We're going to do and we're going to go to bed when the sun goes down and we're going to get this uncovered.

Yeah, I know. Yeah. So you're onto something, you know, because, you know, especially after sunset, you know, if we over pollute our bodies with blue light, that can be very confusing for our melatonin production and circadian rhythm.

So, you know, blue blockers at night or you can get those kind of red amber lights at night that can help you kind of support your body in that way. You know what you mentioned with the circadian biology, too.

You know, the circadian biology. People like you to go out in the morning and get the sunlight on your eyes and see the sun set on your eyes at night.

And that does that is meaningful. So I would say, like, those are going to be foundational. I mean, I'm a big proponent of, you know, teaching people to have like a meditation or gratitude practice.

I think that's really important when you know that the heart is the strongest electromagnetic field generator in the body and if your heart's not aligned, your brain is not aligned, your field isn't aligned.

And, you know, that's a whole other conversation. But I'll plant a seed for you there.

Beyond Supplements: Water, Light, Frequency, and Drainage Support

And then I, you know, I have a clinic here and we do lots of exciting things, but I encourage people to have like their own home healing circuit and there is way more affordable than when I started ways to do this.

So having some type of how are you going to eliminate on a regular basis because this is a marathon, not a sprint. Is it good? Do you tolerate the silence? Could be the silence.

Is it going to be the ionic for that? Is it going to be coffee enemas? Is that going to be all three? You know, those are great tools to have. Like, how are you going to move your lens for you going to have a power plate or a vibration plate or you going to have a stone body wash or the flow vibrate to, you know, drain your limbs on a regular basis.

And then, you know, I love ozone. You know, I use a ton of ozone. I'm going to stand at the right time with the right support. Ozone is really great. I use that three VBI masts; Impasses and EBOO at my clinic.

However you can get a home ozone generator and you can ozone eight your sinuses. You can put it in your ears, you can listen to your water. You can do rectal or vaginal or even bladder ozone and ozone is three oxygens strung together and it creates an oxidative burst to not only kill pathogens, but also create a traumatic effect upregulate your antioxidant pathway.

So it's this very long chaturvedi, you know, kind of tool. And then, you know, you know me. I love the sound and the light and the frequency and stuff. So, you know, sound you can interact with that and a of different ways from mantras to humming to toning to listening to sound bass on YouTube now to using tuning forks, you know, all of that.

I like the Weber technology for Photodynamic and photo by a modulation. I also like red light and infrared light. I like the solar space photon. So those are cool things.

And then frequency and you know I love Harry Massey NES and the AO scan, I'm a user of that and you know, there's just so many, you know, emerging tools in that space and, you know, what we're learning I'll just kind of end on this is that, you know, your functional medicine more will work better if you combine mind.

You know, all of what we're saying with those tools in the realm of, you know, sound, light, frequency, meditation, gratitude and intention. And that is really kind of the beautiful blending of the worlds that really goes to the root causes that are deeper than what we've shared.

And it's it's amazing. You know, we learn so much about the body. I'm always evolving my thought process and my patients teach me every day. So I hope, I hope this was helpful.

It was so good. I can't even wait to go back and listen to it again. Notes. I mean, I've got pages of notes I love it's like Professor Christine is. Yeah. Okay.

So tell our audience where they can find you because they can come to see you, but you better get your amalgams out before you help. I'll help you with that if you need help.

So I'm in Seattle, Washington and my clinics called immanencehealth.com. Immanence means the divine within so that it was a name that came to me and then we did telemedicine.

So depending on where you live, we have lots of ways to enter act with you of resume. And then I have a podcast and you know, I do all sorts of things.

So I, I really appreciate you have me on. You also have your apothecary and your formulated some really beautiful. Thank you. Animal supplements and, creams and topicals that you can use to support lymph flow.

And I want to shout that out to how do they find those products? Thank you. Thank you. Yeah, we I created a line for and that exist more or less and so that has been a passion of mine.

And I have a website called Ipothecary, like Apothecary with an I Ipothecarystore.com and you can find out more information. What you've created is so lovely.

So Dr. Schaffner, thank you so much for pouring your love and light into this talk into this community. I know they can feel it even though they weren't here with us in person.

They can feel how much you love humanity and what big work and heartfelt work that you're doing in the world. You're a mentor of mine and. I really appreciate you always being open and pouring your knowledge into me.

I've learned so much over the years, so thank you. That was very kind. Thank you very much. And thank you for

the delightful comment about the appendix.

I'm like, I'll send you a paper on it. I'll go find one. I would love that. I would love that. And for everyone watching, I hope you've loved this as much as I have.

And until next time, everyone take good care. Bye, now.