Why So Many Kids Are Struggling — a Functional Pediatric Perspective Transcript

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Podcast intro and guest introduction

We all talk about how you can modify your genes, but some of these are non-epigenetically modifiable. They're hardwired and they have a certain amount that, you know, can produce.

Either it works or it doesn't work. Welcome to My MD Unscripted, where healthcare gets personal and the script gets tossed. I'm Dr. Clint Carter, ER doctor turned direct primary care freedom fighter.

We're on a mission to challenge how our healthcare system treats patients in America. In every episode, my expert guest and I dive into real conversations about what's broken and how we can fix it by making healthcare about people, not just managing disease.

It's time to rethink what healthcare should be and we how can make it better together. Welcome to the ByteCast. Hello y'all and welcome back to the My MD Unscripted podcast.

I'm your host, Dr. Clint Carter, and it is my pleasure today to be joined by Dr Paula Kruppstadt. Did I say that right? You sure did. Right on. You know, there, a lot of functional medicine being done more and more, and there's, more need than there is supply right now.

However, There's just not a, lot, of pediatric functional, medicine, being, done. that I know of. I mean, I'm sure there's people trying to throw their best at it, but, you know, we're all seeing more ADD, autism, autoimmune in kiddos when they used to be basically made of rubber and invincible.

And so, they get more and more medications, more monitoring. Really, the question that we'd all like to know is, Why is it happening and what can we do about it?

So we've got Dr. Kruppstadt with us. She's board certified pediatrician and IFM certified functional medicine. she's practicing in the Houston area. So, we're both sporting the Texas vibe today and you know, digs into the root cause and we are going to get into a lot of the fun stuff there.

Dr Paula, why don't you give us a proper introduction of yourself and let's get this thing rolling.

Why pediatric functional medicine matters

Sure. Well, thanks for the intro. I went to med school in San Antonio a little bit earlier than you went. So I graduated in 1990 and I had a military scholarship.

Went to Fort Hood, Texas, and then I settled in the Houston area in fall of 95. Seen a lot of water under the bridge. Yeah. Yeah. And as a general pediatrician working for one of the premier children's hospitals in the Houston area, you know, when I graduated from med school in 1990, the rates of autism were about one in 10,000. and now in some parts of country, it's as severe as one-in-21 like in California among boys.

Yeah, So people are like, why is this happening? You know, what you alluded to with autoimmunity and stuff like that. And I mean, part of our constipation workup is when a two-year-old comes in plugged up, we make sure they don't have Hashi.

That's the youngest we've diagnosed Hashimoto's thyroiditis. That's crazy. Wow. Yeah. So it's not that the genes have changed. It's that, you know, and I know the world is just so toxic.

I'm really grateful for what's happening in the administration right now, eating real food and some of the adjustments to the CDC vaccination schedule.

Yep. You know, we've just been pounding generations of kids with toxins. So that's the biggest factor in the whole thing. I am impressed to hear, cause you know my clinic's very, you're know we're not opposed to vaccines, but we are certainly not.

You're opposed to some flexibility and some pick and choose and, some parental guidance on that. And most of the pediatricians, pediatrician were just trained so hard core on the schedule, keep to the schedules.

A lot of my patients. They come to me because their kiddos have been kicked out of every pediatric practice in town because they wanted to do something slightly different than the full vaccination schedule.

When did you start to pull away from the… What you're saying about pediatricians is right. I even went to Africa when I was in medical school and I saw an adult woman die of tetanus.

But when you look at the United States, and we have clean water. I mean, we're not a third world country. We're, not wrapping umbilical stumps in dung or grass or something like that.

And so, I'd always been a little open and a, little crunchy. But I also felt like we, have to listen to parents. and, We saw these trends of kids getting sicker and sickers and And I think this is kind of how it is in functional medicine.

You usually don't look for other things until your own health fails. And that's what happened to me. So I'd always been more of a follower, but I was always a little bit of rebel.

I hung a shingle out June of 2015 after I just attended some of the core stuff in the Institute for Functional Medicine and then finished. my certification, but I chose not to carry vaccines.

And I'm not anti-vax. I am pro-patient and pro immunization. Yeah. Confused with that too. They think that just because you give a vaccine, you know this and I know that you're immunized and two different things.

One of the things that pediatricians are not trained to do is to measure antibody levels.

Dr. Kruppstadtu2019s path into functional medicine

They're called titers and so we started measuring antibody titres and there's all these kids who had been vaccinated that didn't have adequate antibodies or a kid that gets one tetanus shot and they have a robust immunity.

It's all about if the parents are okay with their child's blood being drawn. And I have so many parents who'd rather do that when they've got one kiddo who's autistic who regressed after certain types of vaccines.

And they don't want that to happen with the next ones. Yeah. So that's a decision we made and we've seen some really amazing results in the almost 11 years that we'd had the practice going.

It's kind of exciting. So what is it about, so tell us how you went from traditional page working in the, you know, the big, pediatric hospitals, which are doing so much good.

Let's be clear. You know, we were not bashing primary PEDs in any form up here and we're not anti-vaxxing here. We're just, you know a little modicum of common sense and stuff mixed in.

But when did you decide to do the IFM track? Like how did end up getting functionally medicine trained? Pretty much my own health failing. I have four kids of my, they're all adults now and I'm a grandma.

On that side of the fence now. But it's also cool just seeing newborns. Usually in our clinic, pediatric nurse practitioner and nurse practitioners tend to see the healthy kids and then I get all the really, really sick kids.

It's really nice to those cute, adorable, normal babies. But my own health failed and I just did what I thought was

right. I've got that genetic predisposition to having high cholesterol and all these other things.

And so I made a conscious decision with my fourth child, well, I'm not going to breastfeed. And I went and saw my internist and they're like, really? And i'm like okay, that's it.

There's gotta be a better way. I'm an MD. iIm telling you that I am suicidal on this statin and got treated just terrible. And that was the end. That was beginning of the ends.

So I started looking outside the box. My weight also ballooned up to about 300 pounds. I knew here, but I couldn't translate it to here. Gained and lost, gained and loss.

Precision genetics. Really? Yeah. And found out that I had some really profound inflammatory and methylation deficiencies. That allowed me to get off antidepressants, which I took off and on for 27 years.

Welcome to the club. Yep. And that, so yourself, you decayed your presence too. Yeah. I'm currently off of it, but only because I had some transcranial magnetic stimulation therapies here recently that kind of helped clear it.

Cause I've been on and off and on, and every time I go off, eventually I ruin a vacation or two and hit, I let it sneak up on me, even though I know good and well what it's supposed to look like, that you just kind keep plowing through and Yeah.

You know, and so, you know working on, gluten-free and some other anti-inflammatories and, some of the other, I had some autoimmune stuff like costumotos and and other things.

And so it was just like big picturing it, but right now with some hormone therapy and. Some counseling and it's just nice not being on it. But you, my wife is, she's a fan of me not be depressed and if I need it I'll get back on one day, But it just, nice to not.

Yeah. You know, it's interesting you said that. I think the thing that kind of sealed the deal was my fourth daughter, the one I didn't breastfeed and, you know I've gone through the whole guilt trip thing.

Severe autoimmune polyarticular juvenile idiopathic arthritis. Wow. Yeah, and in all of our visits to the PD rheumatologist, they never asked me what's she eating, And so then I'm like, there's got to be a better way.

So for myself, I went to a Daniel Amon clinic in Atlanta, had my brain scanned and all this stuff. But then we had done 23andMe for all of our daughters and myself because my husband's mom died of breast cancer.

I saw a psychiatrist and he goes, you might have this thing, this methylation thing. And that just started me on this journey. Then that was the foundation of the beginning of our practice.

I was seeing adults and children with genetics and it's like, these are the things to give your body. These are things not to your give body and then I'm like I am doing my bread and butter and I get back into PEDs and everything else.

So we've integrated You know, all kinds of therapies like ozone therapy. We do ozone for ear infections in our clinic. You do Ozone in the ears. Yeah, I saw a little kid today, three year old, you know 33 months old.

He could point this is the ear that hurts, no way. And it wasn't full of pus. Although I've treated pussy ear infections with ozone like five days in a row in the ears, but this little guy, we went ahead and put the ozone in his ears.

You do it three times in row and there's certain amounts for kids. I helped kind of develop some of those protocols. It's coming back tomorrow.

Vaccines, titers, and individualized care

Told mom, if he's not a lot better by Monday, come back for a third and let's see how he does, you know, without antibiotics. That was my question. So in lieu of screwing the gut up with the antibiotics and all the stuff that's downstream from that, You're just treating the air with ozone and it knocks it out.

Yeah. I would not have believed it myself. Awesome. When I first started doing this, it was like one year when Christmas fell on a Monday. It was the Tuesday before we did Tuesday, Wednesday, Thursday, Friday.

And I hadn't come back the, Tuesday after Christmas. did the fifth one looked I didn't look back in his chart to tell which year it was because I did want to bias myself and they both look completely normal and the week before one of them was full of pus you know yellow bulging ear infection yeah and we chose not to do that now this we see a kid that doesn't look good and they've got pus in their eardrum and it hasn't perforated.

I'll give them a shot of rosephin, ceftriaxone, do the ozone, maybe see them back the next day and do that and we're bypassing the gut by doing the intramuscular ceptrioxone.

So, we try not to screw the gut up. But, you know, if we have to do it, yeah. That's, I mean, and what I love, okay, so what i didn't love about pediatrics was the parents, right?

Like that, that you, know I didn' want to OB-GYN because of the call, but I loved delivering babies. And I didn't want to do just pedes just because the parents can be so hard at times.

And then, you know, so I went family medicine, just do it all. But what I suspect your practices is a little selection bias as far as you've got parents that are on board and fully motivated to try to, do the functional medicine approach and limit some of the antibiotics and all the things going on.

Tell me how that partnership looks in your practice as far as, you know, parents come in, either, a fresh referral over to you or someone who's been struggling for a while.

Yeah. It's usually word of mouth and it's kind of like three camps. We've got healthy, uber healthy kids. And then we've families that come to us with a child that is struggling with something, you know, anything from autoimmunity, eczema, ADD, ADHD, autism, potential vaccine injury, regression, and they've got another kiddo on the way.

And they're like, we want choice. And so we just kind of discuss it with them. And you know what you said, Clint, earlier about children's hospitals, you need hospitals for broken legs and chemotherapy and all these other things.

Yeah, the really bad stuff. Yeah, but there's so much you can do in your home. And you know this too, if you win the hearts of the parents, because I think 80% of pediatrics is the parent's.

So we have a welcome call and established trust when the parents are all in and we use this proprietary genetic panel and it's like, you know, we're shooting blind if we don't have it.

And if it, too much at the time, We're like okay, let's coast along. We'll do the basic things like this amount of D3 with K2. You know we start D 3 with k2 at birth, And in all these years, I've maybe had 15, 20 kids with a vitamin D above 100 when we check it out a year.

You know, we add vitamin d to our one-year labs. That's great. Do a CBC. But yeah, so, and then, you know, a whole family, just a lot of stuff going on.

So healthy kids, kids with challenging issues and parents too. We have healthy parents because we've got, we're womb to tomb at our practice with family practice provider too, but.

Yeah, so it's mostly word of mouth and people just Googling alternatives where they've been fired from their local… They'll just fire you. Yeah. If you don't love their vaccine schedule, you're gone.

Or multiple reasons, I'm sure. And then the third camp of folks that are with you, are just the really sick ones that

just can't get well and nobody knows how to, their pediatrician just cannot figure it out.

Yeah, it's a lot of the neuropsychiatric stuff or vector-borne illness. I mean, you're up in Tyler, but a lotta these kids that present looking like they need to be in a mental hospital actually may have Lyme disease or Bartonella, Babesia, anaplasmosis, or they've got what we call pediatric acute onset neuropsychiatric syndrome, associated with strep, and that's called PANDAS.

It's kind of strict criteria, their brain is just on fire and the parents get bumped around from psych, PD neuro, gastro-neurology, just all over the joint and nobody can figure out what's going on.

It's a joy when we're able to get with people, find out what the problem is, and then start work in that direction.

Ozone therapy and treating ear infections

But man, it's journey when a kiddo has been so dysregulated, they mess up their whole family, you know, in all the emotional type stuff, that everybody walks on eggshells.

Yeah. So tell me, I guess, When you start talking about like lime and some of the vector borne stuff, I mean, are these folks like in the Houston area?

I just don't think of Houston areas being sort of a hot spot for that. Yeah well you know ticks are everywhere and in kids typically you don't see a rash of any kind and so you have to be kind of suspicious of you.

A lot of times it is neuropsychiatric or oppositional defiant disorder or these kids that have massive meltdowns and temper tantrums that are like you've never seen anything like it.

So yeah, Houston, quite a few people and then, you know, deer ticks are everywhere in Texas. Yes, for sure. So, yeah. And so you can just be the Lone Star tick and it just has to kind of, it's, Lyme is called the great imitator and all four of my kids had vector borne illness.

Wow. It's like, crazy. So ozone was a great, IV ozone, was how they got better. No way. Yeah. So it just, you know, it showed up various ways, so yeah.

You're not running a Quest or CPL Lime panel, right? Like you're running the more functional medicine, broader Yeah, you know, I've tried. It's really difficult to get, it's called serology negative, or you have to be very suspicious because these bugs like to hide.

So sometimes you to provoke, trying to, get these out using some herbals and things. Cause if you've had it for a long time, using antibiotics doesn't typically cut the mustard.

And so just You know, some special training through ILADS, the International Lyme and Associated Diseases Society. But, you know a lot of our providers too have also dealt with vector borne in their own children.

And so, it's kind of like stinking deja vu, but when we've dealt it with our own kids, It's just like a light comes on and you have to be suspicious about it.

Right. Yeah, but people can recover. They can recovery and they can thrive. So, kids are resilient. Yeah, you know, that was one of my favorite parts about kiddos.

I guess the other downside, one other reason I didn't choose pediatrics or OB-GYN as my primary specialty is just because when things are great, they're great.

When they are bad, the're really bad. Right? Like it's just, to see a sick kiddo, a kid with cancer, or a kids, just can't get well. It's so frustrating because 90% of them feel like they just You couldn't hurt them if you tried, you know, they're just, so resilient and fun and sweet.

And then, I think the more we've seen, tell me more about sort of, as we get into all this neurodegeneration, autism, do you feel like that is a lot of autoimmune mediated stuff early on?

Like, where is that coming from? Well, you know, it's interesting. I mentioned that we've got the company, one of the companies I work with, they allowed us to make our own little panel and we call it our blueprint.

And, and, um, It's. Interesting. You've. Got adults on one side that have neurodegeneration and their genetics are almost identical to children with neurodevelopmental challenges.

Hmm. there's some themes that kind of run through meaning that they're inflammatory genetic markers, which We all talk about how you can modify your genes, but some of these are non-epigenetically modifiable.

They're hardwired and they have a certain amount that, you know, can produce. Either it works or it doesn't work. Anyway, we modify the immune system.

So those inflammatory markers using things that you probably use in adults like low-dose naltrexone. Yep. We give that topically for kids. Really? Yeah.

And we've also got real clean CBD that doesn't have THC in it that we put on topically.

Working with parents and selecting patients

And then some other little wonderful things that if they need it, and of course fish oil and D3 with K2, but then a big thing is delivering energy into the cells.

So we call that autophagy and everybody and their brothers talking about intermittent fasting. Well, kids already do intermittent fast when they sleep 10 hours at night.

12 hours at night, but what if, and this is what we see very commonly as we compare autism to neurodegeneration, is that this ability to take sugar from your bloodstream, healthy sugar, glucose, pull it into the cell to give you energy is impaired.

So we use a specific supplement that modulates the insulin receptor and it's so cool to watch when you start giving these kids energy their cells energy they start to talk and so yeah so it's really it so cool to see.

Then another big factor is mitochondria you know autism inflammation autophagy mitochondrion but finding where in the mitochondrial system, they're missing juice, like they can't make enough juice.

So what can we give them? So we've got like special vitamins that are like multis on steroids that fuel the mitochondria for kids. Beautiful. Yeah. And then proper methylation.

The right amount, the right time, right way. You just have to do it in a sequence. I met with a family today that came to us late last year. So let me see, it's March.

Yeah, bye bye. Late last fall and they had done genetics and he wasn't speaking very much. We got him on all these things and tested and looked at the deficiencies.

Were balancing out copper, zinc and all this other stuff. He's potty training, he's speaking, and it's amazing. So it was like, yeah. When a parent's never heard their child say, I love you, or talk to them, it is gold.

We take so much for granted, but it so cool to see it. But I was reflecting back that even with the massive crisis and in our nation, I only know of three kids in the almost 11 years that we've been open that had been diagnosed with autism.

And those kids didn't have their precision genetics done initially. So they weren't giving them what they needed.

That is unheard of. I thought, gosh, you need a grad student to come in and do some statistics or something.

And, uh, it's, well, especially considering to some extent you're, you've got a selection bias toward kiddos showing those tendencies, right? Like you should have at least as many as average in the Houston area, if not double, because these are the folks that are frustrated and, and the kids not hitting their milestones and they're getting desperate and their pediatricians are just, they don't have much to offer.

And so. There's no way. I'm so encouraged that you can start plugging the holes in the genetics and the micronutrients and methylation and, and in, the processes that their body needs.

NAD is super hot. We have some N. A. D. here. My shot for the week today. Does that play a role in kiddos? I mean, I always think of it as like, you use it all up.

You're old and you're tired. But you are talking a lot of mitochondrial processes here, Yeah, so for NAD, you know, the thing is with peeds is you've got to find stuff that tastes good.

Yeah. Or you can squirt up the nose, or you could apply to the skin. But we use a lot of Quicksilver N. A. D. Platinum. You know there's some other things available but there is a really, yeah, that's part of it.

It's interesting too is that You've probably used this. It's a compounded medication, but it's used for brain injuries. But one of the things we see is neurotropic factors and it is called SYN-1.

And so synapsin has NAD, RG3, ginkgo biloba, and you can do it orally and squirt it up the nose. if these kids have that homozygous SYN1 genetic thing, it's kind of like, had one mom tell me, she said, I don't know, because we do regenerative medicine in kids too, you know.

There's ways that you can say things, but extracellular vesicles and Wharton's jelly, human cellular tissues and products, we have to be careful what we say.

Yeah, right. We give it IV. And I had a little—little boy, yeah. We got—I got PD nurses, we've got ultrasound and all that stuff. So if I have to schnocker him to get a line, will do it.

The parents don't have go to Mexico or another state. They can get healthy, clean, tracked and screen product here. But one little boy when he started using that synapsin up his schnoz, He was about eight at the time.

His mom said he took a tube of toothpaste and a toothbrush and he said, mom, you need to go to the store and get more of this. And he was porting to toothpaste.

So I can do this and it's like, she said.

Lyme, PANDAS, and hard-to-diagnose kids

He's never had that critical thinking where he could put it all together and tell me. and so it, it cool. Now he's. He's in his teens now, he's like, you know, 12, 13, 14, but that was, that, was cool.

And so, yeah. So NAD, synapsin, and we love leadosynaltrexone to bind to those toll-like receptors too. LDN has been, I don't know. It feels like this untapped or limitless.

resource for neuro, autoimmune, anything in that sort of like outside the box spectrum. I got a couple of, I've got couple episodes of transverse myelitis on myself, you know, which made me start wondering about MS and different things like that.

And I was like, yeah. Our step, step number one was, well, you know, find anything inflammatory, go gluten free, do that stuff. But it was start, start low dose naltrexone.

Yeah. And, it's crazy what it, what can do. It's been quite a, fun. I don't think of using it enough. Really should, I've got a couple of people in mind right now, now that you mention it.

Wouldn't have thought of it for this and that's great. I typically don't use it unless I've got evidence because it's hard to convince people for certain genetic markers that it modulates.

But like you were saying, autoimmunity, and you're right, Clint, we do see a lot of auto immunity that can lurk around with autism. You know, there's other things you look at, like there is a medical standard of care and a of these kids get a sign that's diagnosed by the school district.

or a psychologist. And they come to me and it's been years and they've never had an MRI of their brain. We don't know if they have a corpus callosum. It's just all the normal things like check their hearing, check Yeah.

Do they have a profound tongue tie? Do the have tethered oral tissues? do they sleep apnea? Are they a mouth breather? Did they snore? did they drool on the pillow?

It's like all the normal functional medicine things you look at that they're getting ignored even at their regular pediatrician. Of course. Yeah, so functional peds, we're kind of looking at the gamut there, just all kinds of stuff.

I mean, between, I know we've spent a lot of time talking about, you know, Panda and autism and some of this other, it's sort of. some autoimmune, but I mean, like from an auto immune standpoint, you're looking at, eczema and allergies and just the way these kids are just asthma.

I got two kiddos with peanut allergies, a couple kiddows with maybe all three with some, reactive airway, various levels. There's all the, this just seems like.

You know, when I was growing up, there was like a kid in my class who had an inhaler and no one was allergic to anything that we knew of. Right? Yeah.

And then it's not been that long that everyone's allergic, to something and you know the eczema and the allergy and all the things. So functional medicine, functional Peds is, I mean, obviously, and, the functional Medicine guys and gals that are not pediatricians are pretty good at recognizing the functional approach to those kinds of things as well and are willing to help it.

I imagine you see a lot of all of that stuff. Yeah. You know, it's capturing the hearts and minds of the parents and it is convincing them that, listen, you guys, You have to create a sanctuary at your home.

you can't be a short order cook for one kid. That's not life. And, It's how you frame it. It is like, Oh, I can have that. No, look at all the things you have.

The name of our practice is hope for healing. we're all about the delivery and it's like trying to work with the parents and when they come and they're so sad and broken and then they've got like a vaccine injured kid or you know they have no idea that vaccine played anything to it because you don't know some of them do dump but like you said the immune systems on fire you got eczema you've allergies out the kazoo and it's this immune system that is just so explosive.

And so food is our biggest leverage for that. So a lot of it is education and everything that all of us as functional medicine people do. It's like whole foods.

You're eating fruits and vegetables and poultry and fish and You're doing the dirty dozen and the clean 15 and then you're creating an atmosphere of routine.

You are removing the screens before an hour before bed, you know, so you don't keep that brain on. We have our talks with our teenagers about don´t sleep with your phone in your bed and put it under the bed to start out with and, then, put about six or eight feet away from you, and just all those things.

It's interesting what you said, too, about why you chose family practice. Where I went to med school, the dean said smokers and boosers are losers in his Spanish accent in San Antonio.

But it's true, there's so much resiliency in kids, and even when they're sick, it's all about spinning it positively that, hey, things may be really bad right now, but we're going to be with you and this is collaborative.

Autism, inflammation, and genetic root causes

You give us your gut, you tell us what you don't understand and then we are going unpack it for you, and walk along the way. And then I've got an amazing compounding pharmacist up the road that does a great job explaining to parents.

She's like A4M certified and IFM-certified and I'm like, I am so glad you're around. Yeah. Because she's seen all these kids through the years too and so she can give story after story, after the story to the parents and that helps too.

And having a team approach, I mean, even within your clinic and then obviously your partners outside of your. You know, one of the 12 rules for life from Jordan Peterson is treat yourself like you're someone that you are in charge of caring for.

Right. And so we were just joking on a previous podcast with an adult about how he loves. taking care of these kiddos because the adults would never do anything he said, but the adult would make sure that the kid followed through with the plan.

And I was like, think how good they could feel if they would just treat themselves like they were their own kids. You know, if you can get these parents to see it and understand it, and just be like, listen, I don't know.

Goldfish are easy and fast and your kid likes them, but they're out, right? Like that's not food. We're going to, your kids are going, you all will do better if those are out of the house type talk.

And it's like you said, it is not what you cannot have, its what can have. And kids get that quick, it's the parents that are mourning the loss of the quick fix, just go to the pantry, grab something, plus they like it.

But I imagine there's a lot of parents who feel like they're just doing this for their kiddos and then they look back 30 days later and they feel better.

Yes. Yeah. Weights come off. They didn't try and it's like, and they're sleeping better. I had one guy that an adult, he took a struggle with anxiety and insomnia by removing dairy.

And we're fine with butter and ghee, grass-fed butter, ghee. Nice. Some kids that it is called cerebral folate deficiency, they'll that will be something they don't do well on at least with the butter so we may take it out but um because there are tiny particles of casein in there but one of the proteins in the in milk and stuff but Yeah he went off dairy and he started sleeping an hour and a half more every night and his anxiety it just went way down and we're like yeah it causes brain inflammation it's addictive it binds to opioid receptors and and the food industry knows it that's why they put it with bluebell with the sugar in the fat and you would just want more of it oh yeah maybe yeah and yeah I had a love-hate relationship with food too.

I mean, I was a food addict and I'm like, am I ever going to be able to enjoy food again? And it's like your taste buds change. They really do. So it is like I am a dark chocolate freak.

But, you know, I have my square at night and I enjoy it. I don't crave the Twix anymore, or the Reese's peanut butter cups, because they were a staple in my food plan and diet coke.

And it's like, oh my gosh, i was killing myself. No wonder I felt like crap. But gosh they taste good. There's an act of faith and, and there's certainly an amount, there is certainly, you see a, almost an, amount of religious fervor when

people kind of get past that point.

Like they're like, yes, but I'm, I could never go back because yeah, it tastes good. But once I. Once I accumulated enough faith to do it and I saw life on the other side, it's like, of course I'm not going back.

I can't go back, that would be crazy talk. And I feel so much better. Reese's cups are unbelievable and I don't want one. Right? Right. Yeah. And it's, I think you have to do it with people who love you because you know, if, If, you got to have people on your side.

My husband thought I was a whack job when I started rubbing a red methylation cream on my skin. You know, and I started and losing weight, he's like, okay, you know she's done every diet under the sun.

It's, like then the weight started coming off again. And, it was like okay. I've done. Every food plan under this sun, I mean. But anyway, now he's like this fervor dude.

He's a field artillery officer in the army. Went to West Point and he went through the functional medicine coaching academy and now, he is a coach on our team.

No way. His attorney by trade and does health coaching. Gosh, she's a biohacker and he's like, Hey, you know, so I'm like I never would have thought that.

Cause when I was throwing out the flower and the Tupperware and plastic. Yeah. My family could have killed me. They're like you have lost your freaking mind.

Nope. Have not. So what are we going to put our stuff in man? Come on.

NAD, LDN, and mitochondrial support

Glass and silicone doesn't kill you. Yeah, go figure. Yeah. No, that's awesome. Well, I think your clinic is appropriately named. I hope is a big part of what you guys prescribe around there.

You're dealing with tough situations, very hopeless feeling for a parent with a kid that nobody knows how to help, who clearly needs help that whether it be you know, any of what we talked about today or more.

And the parent would do literally anything. Like I said, like when we talk about mom guilt, when you were talking about feeling bad about not breastfeeding that fourth one, it's like, hey, there is no stronger force in the universe than mom-guilt.

All those little like forces that hold molecules together and all of that stuff, that doesn't compare to mom guilty. You can accomplish anything and really to be able to say, Hey, You're going to, you're gonna have to let all of that go and we have a plan for you and you can start taking care of your kid.

That is the most, the best. prescription you could possibly give someone in a state of just, I would do anything to help my child. That's a very sweet place to be.

I kind of wish I had known you guys when my kids were young or I'd have known functional medicine when our, my kid's were gone because they could have used some of it.

Probably could use some it, obviously they can use it now, but now that they're Almost 15, 20, and 18. Yeah, it's a different level and God's grace has been good and they've grown out of a lot of it and there they're coming around in a lotta ways and their gonna be fun adults.

We've just been blessed, but it would have been, man, It would've been when they were little. Yeah, I know. It's like I was a totally different mom to my first two kids versus my last two kid.

And we kind of talk about this now that three out of the four have drunk the Kool-Aid. You know, it's all about relationship and it is all keeping that together.

Now, like i said, i'm doing the grandma thing. We are the functional medicine grandma and grandpa. My grandson goes, is that poison beemaw? And I'm like, yeah, it sure is.

He calls me Beema. And yeah. That's what his mommy has taught him. You know, that food's going to make you sick. he's got a lot of those things too, but he was living in a water damaged building and it finally got out, Yeah, the immune system goes wacky too.

It goes crazy with that. There's a mold and who knows what else? Yeah. Absolutely. Well, you know, it's time-honored tradition of grandparents bringing a bunch of sugar and junk and hyping their kids up and leaving, but you're going to be the cool Memaw that brings in healthy stuff and makes them feel even better.

Share my dark chocolate with him. That's right, baby. Clean, dark, chocolate. Or the coconut yogurt. Yeah. Coconut milk yogurt. Dr. Paula, thank you so much for coming on.

What a sweet message that is. And I don't know why I hadn't really thought about functional pediatrics really much until now, but I guess it was just applicable to all humans, which is still true.

But I think there's just some nuance. bits too, but one thing they do teach in medical school is pediatrics are not just small adults. There's a lot of other stuff going on and having you in the game and in that area has got to be super encouraging.

I'd like to say thanks for all that y'all are doing over there. Yeah, thank you. You know, it's a joy to partner with families and we just really emphasize that, you know start with that foundation of if they do testing, we have them do that proprietary panel, but all the life modifications and creating a healthy sanctuary at their home and then if something rears its ugly head, we just cross that bridge when we come to it.

Thank you for that. I have some families up in the Tyler area and next time I talk to them, I'll let them know about you. It's just nice knowing another Texan.

Been here since I think 81 in Texas. So it's like been here a long time and great place to be. We have a lot of medical freedom here. And it's fun to be able to kind of do what we feel like the right thing is.

And you may have to get out of the system to do it, of course, but it still, it is fun. For those in the greater Houston area and beyond, how can they reach out if this sounds like something they desperately need?

Yeah, we offer a free discovery call. Our website is gettotheroot.com with the number two. And in the upper right hand corner or left-hand corner, there's a schedule a free welcome call.

Family lifestyle changes and closing remarks

And or if they just want to blow and go or they'd just wanna do genetics, people can be anywhere in world to do the virtual genetic consultation. Our nutritionist does that and another genetic expert, you know, just to inquire and see who's on our team.

We have two nurse practitioners, pediatric nurse practitioner and another MD that's family practice. And we just love the whole family and we have a lot.

We've got grandparents, we've the parents and the grand babies. Everybody's on the same thing. Do you experience that too? It's great. As a direct primary care practice, we've got functional stuff and we got a functional provider, but we're kind of, you're the pilot, where the co-pilot.

We're getting more and more functional. And we are pushing harder and harder that way because it's what makes

the difference so often. What's fun is when you just.

The generation starts stacking up and it's not always I treated the grandparents first. Sometimes I'm treating the younger and then they tell their folks and they start coming and the cousin comes.

It's fun being truly a family medicine practice around here. Yeah. Yeah, I met with a dad today who's like one and a half year old, sees us and then his wife is 12 weeks pregnant.

And it's, like, she just signed up and it is like seeing him for cardiovascular disease and its like wow, you've done so much already. But what I love is they come really, really crunchy and they're like I'm doing this.

I am doing that. doing this, I'm eating this way." And it's like, okay, let's streamline and decide what and do this in an intelligence sequence. A lot of people like to jump straight to the bow hacking because it is cool.

You got a lot a basics to work on first, actually. And so do we all, but still. Those are fun cases though, because you've got believers on your hand.

Yeah, they're invested. Well, Clint, thank you so much for having me on your podcast and kind of spreading the word about pediatrics. I see adults too, but I can't be their PCP, I love my wheelhouse and being able to help.

Well, I'm glad you're there. I am glad that you are doing it. We'll spread the word and thanks for what we just all learned today and I'll be able to apply to my practice tomorrow.

So it's been great. Thank you so much for coming on and we look forward to talking soon. All right, well, thank you so much. Thanks for joining me today on My MD Unscripted.

I hope today's conversation opened your mind and inspired you to imagine a better path for your health and therefore life. If you found value in this episode, be sure to subscribe, leave a review, and share it with someone passionate about transforming healthcare.

Real change starts with real conversation, so let's keep on going. Until next time, stay well. Stay curious and never stop pushing for better.