

Lesson two, beliefs. There are those in the industry who support much, if not all, of what's taught here in the mentorship. Now, it's important for you to hear that and to also hear what they believe because it supports the one goal of this class, and that is how to think on your own. Now, I want you to directly hear the truths from those who have been at this work much longer than me and who have been my own mentors along the way. Their voices bring consistent and supportive thoughts to all you will continue to learn and from all the areas in your world that will supply this learning. Now, gauging the truth and what makes sense is a key part to what you keep and what you discard as you filter it through.

So don't take all your learning at face value. Test it. Confirm it. Ask if it fits and if not, why? The first person I want to talk about is Dr. Bill Rawls and creating the perfect environment for healing. Now, Dr. Rawls has made it his life's mission to work on Lyme disease. You've heard me speak about Lyme disease several times throughout the live classrooms and through the different modules here in the mentorship. So I want to get really down into the information, not about teaching how to cure Lyme disease, but I want you to hear his perspective. Listen less to the Lyme disease and more about the perspective that floats above everything that he is saying.

So, Dr. Rawls says, more than anything else, chronic Lyme disease is a breakdown of the body's ability to fight off everyday threats and to heal itself. It isn't as much the microbes themselves as it is that the microbes are no longer constrained by a strong immune system. I had likely harbored *Borrelia* and other stealth microbes long before I got sick. Everyone harbors some stealth microbes in the grand mix of their microbiome. For me, years of rigorous night call, eating on the run, and other bad health habits weakened my immune system enough to allow the microbes to flourish. Creating a healing environment within my body was essential for my recovery. I recognized that I also had to curb the habits that contributed to my immune dysfunction in the first place.

I want to stop right there and I just want to interject. Again, we have to create this environment for healing. We have to create conditions for change. This is what he's saying. He said, I had to curb the habits that contributed to my immune dysfunction in the first place. He goes on to say, even before starting herbal therapy, I had given up night call by necessity. Adequate restorative sleep is essential for overcoming any chronic illness. Sleep was so disrupted, however, that it took a lot of effort for me to restore normal sleep. Poor eating habits and antibiotics had made a mess out of my intestinal tract. I also knew that I needed to make some drastic changes in my diet.

Admittedly, it was a challenge at first. I grew up in the middle of the fast food generation, but with time, eating healthy became the new norm. cleaner diet, all the digestive issues cleared, including leaky gut. Stress didn't go away. In fact, the process of changing my life added some new stress, but I learned how to manage it. I took control of my life. Being proactive about your own situation is essential for success. from treating an illness to supporting wellness.

Let's say that again. Shifting from treating an illness to supporting wellness. Then specific diagnoses and conditions do not matter as much. Well, we've talked about that before here in the modules. So the solution is breaking the vicious cycle of dysfunction and creating a healing environment within the body. This is done by taking pressure off of the healing systems of the body by reducing stress factors. Very wise words, very wise man.

Now you notice that even though he's talking about how we treat the body, how we support the body, and the things that must be in place for change to happen. Dr. Neil Nathan and Dr. Robert Navio have been mentors of mine for many years. thoughtful dissertations and their approach to wellness and to healing and what the capabilities are of the body. I appreciate the wisdom and the thoughts of both of them. Let's start with Dr. Neil Nathan. He said specifically in an interview recently, Speaking of the immune system, I don't really work in that area of Th1 or Th2. To me, that's a secondary event, meaning my job is to identify the cause and treat it, and the body will

usually heal itself once I do.

So I don't even have to think about Th1 and Th2 because the body will reboot itself. I have a whole chapter in my new book, Toxic, on what's called the cell danger response, which is the brilliant work of Bob Navio, who has understood that the body will right itself biochemically once you have convinced it that it's not in danger anymore. It's not threatened. And so my approach is a step back from the th1 th2 into how do I know how do I convince the body that it's safe that it's okay that we've got this. Dr. Nathan goes on to talk a little bit about methylation and I found it exceptionally wise and why I included it here. Methylation is an extremely important biochemical process. It's important for generating energy, for detoxification, for healing DNA when it becomes damaged, and it's become a buzzword often in the way that I'm not sure is correct.

For example, the genetics of methylation isn't really a method for knowing what you need or what you don't need, meaning that you can't just decide, okay, if this person is not methylating or if they have high homocysteine, oh, let's give them some B vitamins and fully. You can measure the chemistry of methylation, which is way more accurate, and for really sensitive patients, they just can't do it. Meaning when they get better, when they get less toxic, then they can start methylating. But if you attempt to give methylation materials to someone who is already behind the eight ball, you're going to make them worse. And unfortunately, I see that happening a lot. And sometimes I'd have patients say, well, I couldn't even take a small amount of 5-methylfolate, so they tripled it. And I'm saying to them, why would you do that? So as in everything in moderation, it's important that people who are helping people to methylate understand the limitations of their patient so that they can orchestrate that appropriately.

So he is flying in the face of treating a symptom with a supplement. He is saying look beyond the methylation. What else is happening in the body? Yes, we can see that methylation is not working, but quit trying to fix it. What is the body itself trying to do? We have to understand that. We have to see that. And that is what we are doing here in this mentorship. We are going through this entire process. Dr. Nathan goes on to say, it's important that people understand the cell danger response, which we mentioned before is a protective mechanism by which the cell attempts to hold off an invader.

And when you get infected by a virus, for example, the cell intentionally shuts down methylation. This is key right here. So all of my patients don't methylate well. And that's part of the deal. Now viruses can't replicate unless they can hijack our methylation biochemistry. So this is not an attempt to hurt us, but an attempt to prevent what is infecting us from just going crazy.

And it's important that practitioners and patients understand that you're not methylating because your body doesn't want you to methylate. This is something that we have talked about time and time and time again. Why is your body choosing to do the thing it's doing? If cortisol is low, is it because cortisol production is high and the body itself is clearing it out of the tissue quickly to keep you from being injured? And then we have practitioners coming right behind this saying, oh, cortisol is low, let me raise it up. And I'm saying, ask what the body is doing. You can't make that determination without exploration and research and investigation. Dr. Nathan also had some points that I wanna bring up from a talk that he gave.

And both of these sources, the interview and the points from this talk are both going to be put below the module. I want them right there for you to be able to read. And he says that many times you may need to treat MCAS and limbic system dysfunction before you move forward. Well I thought that that was important to include here because again this is the whole body. We have to understand is this person not healing because they feel under threat their body feels like it's under threat and we need to know that you can give someone a lot of supplements and if they're extremely sensitive to them it might be because they don't feel safe they still feel their body feels under threat here's a very basic

statement but it's gigantic in our world. And that statement is, it's important to understand what each person needs and what they need first. Work on the cause or the causes, not the downstream effects or symptoms. All patients have mitochondrial dysfunction and methylation issues, but treating these first may not be the right thing.

When is important. Dr. Nathan also cautioned against taking glutathione exogenously as it can shut down endogenous glutathione production and slow methylation. Dr. Robert Navio made many points during this particular session and this is actually from the ISEAI, which is the International Society of Environmentally Acquired Illness.

This was the conference that was held last year, May of 2019. And I wanted to bring out several of the points that he made. Ability to treat is not what makes disease different, but what makes it similar to other chronic complex disorders. This is the new window into treatment. Do not see healing as the reversal of the path that led to disease, but as the activation of the path that leads you to recovery.

When something is acute, you treat the injury. When the illness is chronic, you unblock the process of healing. Cells have to use internal energy, internal materials, and internal analysis to create a healing cycle. Metabokines are signaling molecules that control progression through the healing cycle. Extracellular ATP is a metabokine. It's one of hundreds. All neurotransmitters are metabolites. As a side note there, I wanted to add that extracellular ATP is the voice that is calling out that there is a threat. That is what alerts the body that there is a problem. And it's the prevention of calming these ATP voices crying out that prevents healing from actually happening. We'll cover this much more as we get more involved in to cell danger response. Injury provides the fuel and stimulus for the healing cycle to occur. If there were no injury, there would not be a healing cycle. When the body is under siege, organ systems begin to disconnect and can be in different stages of healing. The pathway to illness is not the same as the pathway out. All life, including plants, has a similar signal that leads to a danger response. All stressed cells leak ATP. Health is the use of metabolic pathways for growth and healing instead of for defense. So when we look at somebody who is chronically ill, we have to stop and say they're defending. Their body is doing all the defense work. There may need to be only a handful of treatments to help many different illnesses. We've covered that quite a bit here in the mentorship because we're looking at the basics and that can eliminate many different things. All right, Annie Hopper. She also attended this conference and spoke on the brain chronic illness and limbic system rehabilitation. There is much that she shared here and again you'll be able to see the resource below this video. The limbic system in the brain, it categorizes safe versus unsafe and it assigns a threat level, meaning how much or how bad you will respond to stimulus.

With limbic system impairment, the filtering process becomes impaired. There are many causes for limbic system impairment, which include trauma that we know, you know, first and foremost, but outside of that, it can be bacteria or mold or toxins, viruses. It's important to ensure that the home and the limbic system is not a psychological illness. It's not in the client's head. This is a body that has fearful reactions. Limbic system impairment is like having a highly sensitive security system that has gone awry. The longer your brain is stuck in fight flight or freeze, structural changes occur in the brain. I think about that. This isn't an emotional change.

Notice that she says, if we're stuck in sympathetic mode, actual structural changes occur in the brain. And we have the power to reverse these. The initial trauma activates inflammation and impairs the limbic system, leading to a protective and distorted stimulus. This leads to more stress hormones and limbic system priming, meaning that less and less stimuli are needed in order to provoke the same level of reaction. The vagus nerve takes cues from higher up about the level of safety that exists. She also brought the cell danger response into her talk and so there's a feedback loop between the limbic system and cell danger response. This is the brain and the body. When you

have a limbic system issue, touch, taste, smell, light, and sound all of a sudden all become triggers for these huge reactions that we see in clients. We have an exaggerated negativity bias, including negative thoughts. The focus becomes safety and survival. There's a preoccupation with real or perceived threats. That's what happens to us. Those ruminations in our head. This is something that I found very interesting and also very true. Talk therapy reinforces the trauma loop. So if we're talking about symptoms all the time, we are then helping to keep that client in that same loop. This is why language is important.

She says what we feed the brain will grow. She also delivers five pillars of DNRS, which include recognition of the limbic system impairment, identify and interrupt pathways of the past, do complete full rounds of the exercises for one hour a day. There is incremental training. It's a form of neural shaping, and you have to elevate your emotional state. and concerns and questions and insight of these four people. There are many more I could choose from. But the fact is, we have a lot to learn. We have a wonderful foundation right now that we can stand on and move forward with helping clients.

We don't have to be fearful. We don't have to guess. We step through it. And it involves practice. Every single one of you here in the mentorship, this is what we're learning. It's about practice. And this is what we do. Always keep in mind that there is so much more to learn and so much more to apply.