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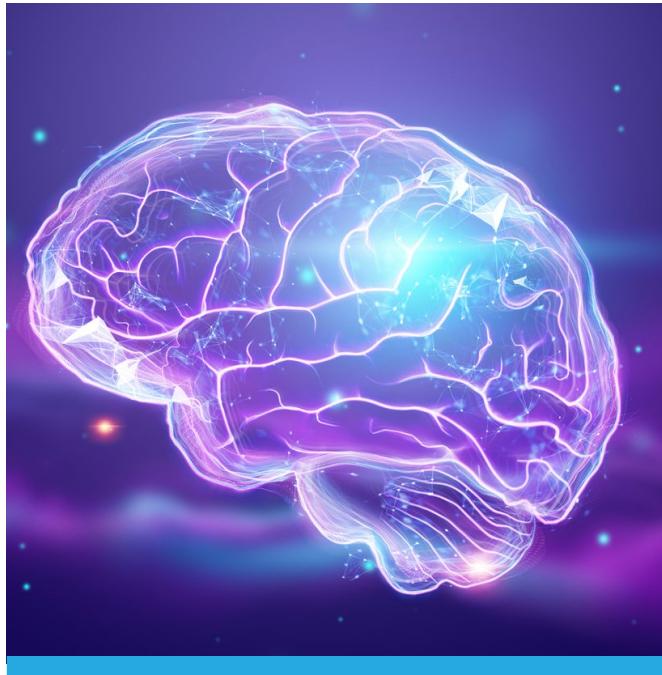
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 **Leaky Brain: Causes and Case Studies, Pt. 1** from Ryan Wohlfert, DC, CCSP and Elena Villanueva, DC  
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From the entire Leaky Brain Summit team, thank you for downloading these transcripts -- we hope you learn a lot from them!



# Leaky Brain: Causes and Case Studies, Pt. 1

Ryan Wohlfert, DC, CCSP &  
Elena Villanueva, DC

**Dr. Villanueva:** Welcome to the Leaky Brain Summit, where we will provide up to date information from leading brain health experts around the globe on the leaky brain, and how it affects mental health disorders and neurodegenerative disease.

I'm your co-host, Dr. Elena Villanueva, and together with Dr. Ryan Wohlfert, we invite you to sit back, grab your favorite hot beverage or herbal tea, and take some notes as we reveal how to uncover the root causes of the most common mental health disorders and brain diseases and what solutions you can take to heal your leaky brain.

**Dr. Wohlfert:** Hello there. Dr. Ryan Wohlfert and—

**Dr. Villanueva:** Dr. Elena Villanueva.

**Dr. Wohlfert:** And Holy cow, we want to welcome you to the Leaky Brain Summit. This is basically our intro because the leaky brain is a relatively new concept, probably for you, but it has such far-reaching effects. It's either the cause of or tied to so many mental health issues like anxiety, depression, even all the way up to neurodegeneration with Alzheimer's, dementia, autoimmune disorders.

So I mean, we are so excited because we want to start with this because it's going to set the tone. It's going to show you — basically, that's the best way to say it's going to set the tone for the rest of the summit. So that's why it's so important to watch this fully. Dr. Elena and I are going to be

sharing case studies. We're going to be sharing our screen with you with these case studies, with visuals to help you understand what the heck is that we're talking about, how it affects you, how it affects your family, how it affects this world. So Dr. Elena, anything you want to add before you share your screen?

**Dr. Villanueva:** Yeah, I'm really excited to have all of you here. All of you who are registered and all of you who are watching. It's very likely that either you are struggling yourself with a mental health disorder or some sort of brain degeneration disease issue, or you have a family member who is struggling, and that's why you're here watching this.

And I know what it's like. I have been there myself. Some of you may know my story, some of you may not, but just trust me when I tell you I have been there. I had been very sick, and I was very fortunate to be able to — with my background in medicine — figure out what the root causes were and be able to show myself that I wasn't broken, and there was nothing wrong with me.

And that's what we're going to be showing you is that you're not broken. There are answers, and there are solutions, and every day over the course of this summit, we're going to take a few minutes to go over some of these underlying causes. We're going to show you the science behind it, and we're going to dive into some real case studies of clients of ours. So we're super excited to have you joining us.



**Dr. Wohlfert:** Nice. Oh man, this is going to be good because we'll get into the stats too of why this is so rampant, these mental health numbers and disorders. And I know it's the only one, the current model of mental health, that uses symptoms. Okay, you go to the doctor, you feel sad or depressed, here's a medication for it. There's not really any testing. That's why it's so important to watch this first one. But then all the other ones too where we talk to, oh jeez, so many experts. We have 30 experts lined up. And this is going to be very new and exciting for everybody to watch.

**Dr. Villanueva:** Yeah, and you're going to get to hear from all these different experts. Their take on the different types of underlying causes, and what they've seen clinically, and what they've seen through their studies and their research as well. So, super excited to get started. Let me go ahead and pull up some slides for you guys.

**Dr. Wohlfert:** There you go — understanding leaky brain, case studies, causes. And so, what is a leaky brain? So what I want you guys to imagine, the listener, is we have this protective barrier around our brain that limits the crap getting in — for lack of a better word — the toxins, infections that we're going to cover today especially, but then also heavy metals, EMF, other particles that shouldn't be in there that can cause inflammation that Dr. Tom O'Bryan talks about, that Dr. Jockers talks about, that Dr. Rudy Mueller talks about. So these environmental toxins.

So leaky brain is when we have a breach of the blood-brain barrier. That's a leaky brain. It's not like you hit your head, and your brain's leaking out. Sorry to get graphic on you, but these are the symptoms that it's directly tied to Alzheimer's, dementia, Parkinson's, autism, ADD, anxiety, bipolar, schizophrenia. I mean, Dr. Torrie Thompson talks about her story and recovery from these issues: insomnia, anxiety, fatigue, brain fog, depression. So we have one side of the coin, brain if you will. It's the neurodegeneration.

Then we have the other side that we're going to talk about, which is the mental health issues. So Elena, anything you want to add?

**Dr. Villanueva:** No, I think we've covered that pretty well. We can jump into this slide. So today, we're going to go over some cases involving environmental toxins and how they cause some different issues like Parkinson's-type symptoms and suicide ideation and some other things like that.

**Dr. Wohlfert:** Now, let me say something about this, Elena, is just even like as an overview because this is the first one that they're watching is if you see that list, they're environmental toxins. Like Dr. Elena said, we're covering that today: infections, foods, and toxic mold, parasites, Lyme disease, prescription drugs, genetics, emotion, thoughts, and mindset. We are going to cover these throughout the week in our brain mastery sessions. That's what we're calling these. So yes, definitely watch those every single day.

**Dr. Villanueva:** Absolutely. Because there's going to be some really interesting case studies, you guys are not going to want to miss this. Like I said, not only are we going to be showing you the case studies, but we're going to be showing you all of the science behind it.

**Dr. Wohlfert:** Environmental toxins, Holy cow. Now, these toxins could range from — I'm going to leave the infection somewhere because we're going to talk about that later. Is that right, Elena?

**Dr. Villanueva:** Yes.

**Dr. Wohlfert:** Okay, because the toxins are more of the environmental toxins. Glyphosate, I know we have a case study about that and especially how that affects the blood-brain barrier causing leaky brain. 1.2 billion pounds of toxic chemicals are being released into the water and air in the USA every year. Toxins are present everywhere in the industrialized world, everywhere. So you can have the best diet; you can have the best skin care products, but we're still exposed to them.



And whether you think they are affecting you or not, maybe you have brain issues, and maybe you don't, but eventually, toxins have become the primary drivers of neurodegeneration in brain chemistry imbalances. The lab testing that people get, Dr. Elena — I mean, you know this. The lab testing that I know with clients and patients because they've had their CVC done or standard medical blood tests, they think, oh, I've already had all that testing done, but it lags behind what? 15, 20 years what it takes medicine or the medical system to catch up because they have to go through all this standardized testing to see if it's this and that.

**Dr. Villanueva:** Exactly. And many of you may be familiar with what Dr. Ryan is saying. A lot of you may have been struggling with some sort of health issues, and you go to the doctor, and the doctor runs his standard tests. He comes back and says, "Well, there's nothing wrong with you." Well, are you sure the doctor that it's not my thyroid? My hair is falling out, and I'm gaining weight, and my periods are off, and I'm just not feeling well. No, your thyroid looks fine. That's just one of the many examples that we can give you where people go to the doctor, and they come back home, and they tell their spouse, or they tell their parents, well, the doctor said all my blood work looks fine.

But the reality is that you're feeling really bad. And so, that's the problem with the standard laboratory tests. Let me jump into the next slide. Environmental toxins are not just a problem in the US. This map shows the actual deaths from environmental toxins worldwide, with the US being one of the countries that has alarmingly high rates of lethal environmental toxin exposure.

**Dr. Wohlfert:** Yeah, because what? How many chemicals have been introduced over the last 50 years? 80,000 to 100,000.

**Dr. Villanueva:** They have been hundreds of chemicals, and they're not being regulated. And that's the big problem. This map is showing

statistics of the number of people worldwide with mental health disorders, excluding drug and alcohol-related disorders, okay? So, as you can see, the US is one of the highest-ranking nations. Let's just go back and let's look back and forth a couple of times, and let's look at these two maps. So you can see the correlation here. Environmental toxins, look at the darker colors. And then mental health disorders. Again, look at the darker colors: one more time, environmental toxins, mental health disorders.

**Dr. Wohlfert:** Is that a coincidence? I don't know. Probably not. It definitely is a correlation at a minimum or even causation. Is it the only cause? No, and that's why this isn't a one-day summit. This isn't a one brain mastery session. This is part of it.

**Dr. Villanueva:** Exactly. Now, let's just go back into the US itself, and let's look a little deeper at statistics. This is pretty scary, guys. This is serious stuff. This is why I'm so passionate. This is why Dr. Ryan is so passionate about bringing this information to you because this is a serious problem, not just in the US but around the world. But we're just dialing in on the US for right now with this slide.

Suicide rate increase from 1999 to 2015, I mean, the numbers are absolutely staggering. This is per 100,000 residences, or per 100,000, I'm sorry, people over age 10. And so, you can see that the numbers are just staggering. And that's for the suicide rate increase. Look at the mental health disorders how they have increased as a whole.

**Dr. Wohlfert:** Let me share this is from 1997 to 2016 for just prescriptions in general, not just antidepressants, not just anti-anxiety, the number of prescriptions in the US, let's just take in the US went from was it 2.4 billion to 4.4 billion? That's an increase of 85% in that 20-year period, but the population only increased by 21%. Obviously, something isn't working. There's these correlations that just keep popping up. And for the listener you might — Elena has seen it. I've



seen it with my patients and clients is it creeps up.

You might start off with, man, I'm starting to lose my memory, or I can't remember things as well. I get tired by the end of the day, and you're in your forties, your fifties, and you think that's normal. You think, well, my doctor said this, and I saw this. My neighbor had the same thing, or even my family had this. My mom and dad did. My grandma she died of dementia. Does that mean that I am going to get it, or I'm going to contract but get that or allow my brain to do that? No. Again, this is why Dr. Elena and I are doing this Leaky Brain Summit to bring this out of the shadows so you can do something about it and understand. I love how she puts it all the time, as we are not broken. You are not broken. There are solutions and answers.

**Dr. Villanueva:** Exactly. That's so well said. And that ties into a case study that I want to go over with you. These types of disorders when it comes to brain disorders or mental health disorders and even many other chronic diseases, it takes many years for these things to unfold. It doesn't happen overnight. So if you find that you're struggling with symptoms of Parkinson's or early onset of dementia — which is scary that people are seeing these things in their fifties now — realize that this probably started when you were in your teens or your twenties, okay? It didn't start five years before. And so, that leads me into this case study that I want to show you. This is just such a wonderful, heartwarming story. This young male, Tyler, 21-years-old when he came to see us. This is his symptom sheet.

When he came to see us, he was struggling with suicide ideation, anxiety, depression, some severe OCD that he was actually seeing a psychiatrist for this. And he had fatigue and brain fog. He was having like just a really difficult time with his memory as well. And when we started seeing him, it was about April of 2019. And you can see on his symptom sheet, ten is the worst and zero means that there's no more symptoms. There's

zero symptoms. And you can see that he started out with some symptoms of anxiety, depression, OCD, and so forth. And you can see that over the course of the months that we worked with him, you can see how his symptoms dissipated to almost nothing.

Now, I want to mention: most guys; most men will underrate their symptoms either because they've been feeling this way for so long that they don't remember what it felt like to be good — like what it actually felt like to feel good. Or they just don't want to put a higher number. Women will just come right out and say, I'm like a 20. Out of zero to 10, I'm a freaking 20. I feel terrible. Guys try to like keep it on the down-low.

And as you're going to get to hear from his testimonial, his video testimonial in just a few minutes, he was feeling pretty bad. I would say he was probably at like 9s and 10s, but I just wanted to show you this. Now, when we first started with him, and we got his history, and we saw what was going on, we ordered a lot of different labs for him. This is where the field of mental health is going.

The field of mental health is the only specialty in medicine that currently is not a data-driven system. It's not evidence-based. And what we do that's very different and many of the speakers who you're going to get to listen to, they also use evidence-based systems. And so, we ordered a lot of testing from genetics to looking at his gut function, looking for underlying chemical toxins, mold infections. We were looking at everything. We were looking at the whole gamut. And let me just show you what we found that really stuck out.

**Dr. Wohlfert:** And let me say this. A couple of things that Dr. Elena touched on with us men, and I agree. I found that as well with myself. We tend to underestimate or minimize or downplay that. You will even hear that with Dr. Eric Zielinski and his story. You'll hear that with even Dr. Jack Wolfson in a sense, and how he kind of blows the lid off of what he used to believe.



He's a cardiologist. He's like a world-renowned cardiologist. And like in Arizona, he was the top cardiologist for three years, but then realized that the system wasn't working for him and how heart issues lead to brain issues. Again, I'm getting off-topic there, but these are the speakers that came to mind, including me, when Dr. Elena mentioned that about guys.

**Dr. Villanueva:** Yeah, so let's take a look at this. Look at what we found. In regards to chemical toxicities, he was off the charts with a couple of different toxins. One of them being a propylene oxide derivative. And the other one being in the ethylbenzene or styrene family, both of which are known to cause major impacts to the nervous system. So we're thinking brain. And they also are known carcinogens, so they are known to cause cancer as well.

And you can see here that his numbers were just off the charts. He's off into the red, very high numbers. I want to fast forward here, and I want to show you his after. So we started working with him to get the toxins out. We used information from his genetics. We used information from his history and other ancillary data to really understand how to best open up his detox pathways so that we could get these toxins out of his body. And this is where we were afterward. That's a huge difference.

So let me go back so that you can see, and if you have anything to add in here, Dr. Wohlfert, we go back here. You can see he was at 1,032 and 1,092, or if you just want to look at the bar, you can see that he was like off the charts on the top one and in the 95th percentile on the bottom. And then take a look here. Look at that.

**Dr. Wohlfert:** The testing is one thing, right? And tell me who can relate here listening is you have been to the doctor, and the tests come back normal, and you still have the brain fog. You still have low energy. You still have your memory loss: your OCD and the anxiety, depression. Like, what the heck is wrong with me? Well, I guess this is

just the way it's going to be. So yes, this data is important, but we want to see how it correlates to how it makes you feel. How it can improve as these numbers or as these values markers, get better and more in that normal range. How does that equate with how you feel?

**Dr. Villanueva:** Exactly. And Tyler didn't think that there was anyone out there who could help him. He thought he was going to be like this for his entire life. I mean, he's sweet as 21, remember, and he had started with medications at the age of like 10 or 11 years old. He really didn't believe that anybody was going to help him. When he saw this, and he saw this next slide here, which is another toxin that we found, he started to have hope that, oh my gosh, here are some things that Dr. V is explaining to me that can actually be a cause of why I'm feeling so bad.

So this was another toxin that we found, and it's called a mycotoxin. Now, mycotoxins are toxic molds. And some people will consider them environmental toxins. Some people consider them infections. Really, they're kind of both. And so, this is the other toxin that we found, and we've got some speakers who are going to be talking about that, correct?

**Dr. Wohlfert:** Oh, yeah. We have Dr. Jay Davidson, Dr. Todd Watts, Dr. Christine Schaffner. Even Dr. Greg Eckel talks about that as well, and how it affects and causes brain degeneration. So that's going to be really interesting to listen to.

**Dr. Villanueva:** Yeah, that's going to be great. So as you can see here, his numbers again were off the charts with this particular strain of mold. And let's take a look at where he was after. Well, look at them. That's amazing, right? That's absolutely amazing. And let's just take one more look at his symptom sheet. So you got a chance to look at the crazy environmental toxins that he had and the amount of it and how we detox that. Then you got to see the super high toxic mold that he had, and then you got to see how he detoxed that.



And let's just take one more look and finish it up by looking at his symptom sheet again. So how he felt correlated with the symptoms. I mean, with the findings on the lab. We were able to really see that as we started pulling these toxins out of his body that are known to cause brain issues, his symptoms went away. Super amazing.

**Dr. Wohlfert:** I know we're going to get into it, but I want to say it here, if you're thinking listening to this, well, I got to get all this testing done. I love when we — basically, we talk about that in our interviews with our experts, but Dr. Elena especially does a great job pinning people down. She's the data-driven queen. She loves data, but she wanted to give you the listener because maybe you can't get all the testing to really fast forward this.

Maybe you do need it, but maybe you just can't right now. And we understand that. So like with Dr. John Dempster, with Dr. Edward Group, we're like, all right, so what can people do at home? Or even Bridgit Danner too. I remember you did that with her as what can people do at home to get started now? Because maybe they can only do one test. What can they tell their doctor? What can they ask their doctor? How can they get started? So we give these protocols and recipes to get started now as well.

**Dr. Villanueva:** Yeah. And definitely pay attention to what everybody is saying because whether you could do the testing or not, the common denominators of why people are struggling with mental health and neurodegenerative disease, the common denominators are the same. It's all of the things that Dr. Ryan and I are going to be going over with you in our little mini masterclass each day.

And then you're going to hear all of these different speakers really dial in on these different aspects. And so, if you can't do the testing, it's okay. Just start to take steps in the right direction with all of the advice that we're going to be sharing. So let's jump into this video. Dr. Ryan,

what do you think? This is just so awesome.

Hi, Tyler. I am so excited to have you talk to us about your story, your amazing results. Your turnout has just been amazing. So start by telling us kind of where you were before, what your symptoms were, and walk us through what was going on before you started working with us.

**Tyler:** Before I started working with you guys, I was in a depressive and anxious state constantly. I never felt very good. I was always lethargic and felt like I never got as much rest as I should have.

**Dr. Villanueva:** Yeah, I remember you were pretty down, and just you had a little life in you. There was so much you can tell. There was so much work we could do and really get you enjoying life again and really thriving. And if I remember right, you were kind of skeptical of working with us.

**Tyler:** I was very skeptical.

**Dr. Villanueva:** Yes, with your mom, right? Then it kind of pushed you to working with us.

**Tyler:** Yes. Because she's been the holistic person for the entire family, so I officially became the second one, though, in the entire family now.

**Dr. Villanueva:** Absolutely love to hear. So we did it. I went to testing on you, and we found a lot of toxins, a lot of infections, and really started working on kind of clearing out your gut and getting rid of the infections and then started slowly working towards rebuilding and over the last three months, we've seen a huge improvement. So kind of walk me through where your symptoms are now. Do you have any? How are you feeling now?

**Tyler:** I definitely don't feel down, apparently. I'm not anxious anymore. I don't stress as easily. I do get adequate sleep, and I always wake up feeling refreshed, and for the most part, I actually enjoy life right now.

**Dr. Villanueva:** That's huge. I mean, you can't buy that.



**Tyler:** No, you can't.

**Dr. Villanueva:** And had you gone the medical route and tried any sort of drugs beforehand or was this kind of your first—

**Tyler:** No, antidepressants for about 10 years. And I was starting to see that they weren't completely fixing the problem. They were only covering some of the problems, but not solving them.

**Dr. Villanueva:** Exactly. And that's what we love to do is figure out exactly what's going on. With you, it was toxicity. It was infections and a lot of gut stuff and some brain chemistry stuff. And really, we've kind of just started with you and a lot more said that we can keep going, but just the life you have, and it was amazing to see, and it's awesome to watch. Do you have any advice for anyone that's kind of struggling with being skeptical or is a little bit leery of starting holistic medicine?

**Tyler:** I would say if you're skeptical, you have every right to be because I was in the same boat, and the proof is in the results. The basic thing is you have to try it. You can't just knock it and not try it because I used to be the biggest skeptic. I tried it. It is the best decision I've ever made in my entire life. I will continue to follow the protocol.

**Dr. Villanueva:** That's amazing. After you're done, do you think you're going to stick with — we've given you a lot of diet and a lot of nutrition advice. Do you think you're going to stick with that? Or what does the future look like for you?

**Tyler:** I'm sticking with it. I'm not going back to the person that I used to be. I worked too hard.

**Dr. Villanueva:** That's what we love to hear. So we're so excited to watch you and be part of your journey. So thank you so much for sharing your story.

**Tyler:** Absolutely. Thank you.

**Dr. Wohlfert:** That's pretty amazing. I love that, Dr. Elena. And I want the listener to really take home — again, the point that I've taken home with

Tyler is, one, this can happen in your twenties, and if he hadn't done something about it, like holistically, naturally — because I believe that we can with our food, our fitness, and exercise, and the essential oils that Dr. Eric Zielinski is going to be talking about. With detox that we're talking about here that so many of our other speakers and experts have talked about.

Brian Vaszily shares his story and how he came — like even the stuff that we put on our skin seeps into causing leaky brain and leads to these symptoms that we're having. And it's insidious. It doesn't happen overnight. It happens with these cumulative effects. So I appreciate you sharing that, Dr. Elena.

**Dr. Villanueva:** Yeah, absolutely. Dr. Torrie, I was so excited to interview with him. And you guys are all going to get to listen to Dr. Torrie because we are also interviewing her this week where she's going to be discussing some really interesting science behind and some cases behind Lyme disease and co-infections and how people can become misdiagnosed with some severe mental health disorders when in fact the underlying cause was a combination of infections. So I can't wait for you guys to hear that.

Let's jump into pesticides. So we're going to jump into pesticides and some other chemical toxins as well. And as you can see here on these slides, there is a lot of science showing the effects of pesticides on psychiatric disorders like suicide and depression and aggression and things like that. And I just want to show you how glyphosate, in particular, affects humans.

So there are many people who say, well, you know what? I don't use Roundup in my garden anymore. Like I'm not exposing myself. But if you're not eating organic and if you're not drinking clean water, you actually — when I say clean, I'm talking purified water. You actually are exposing yourself. And let me just kind of show you a little bit of how you're getting concentrated amounts of glyphosate in your food and in your



water sources, especially in your food if you're not eating organic.

The glyphosate doesn't wash away. So when it's sprayed on the crops, there is a cumulative effect like many layers. Like when you're putting nail polish on your nails, and you just keep putting layers and layers on, think of glyphosate the same way. It doesn't wash away. And then, when the grains become milled — so all of the grains get cut from the field, and then they go through the milling process. They become four times concentrated in glyphosate when they go through the milling process. So you're having a huge amount of chemical toxin buildup that then you're consuming that in the final food product that you're buying, like Cheerios, for example. We give our kids Cheerios, right? I know I gave my kids Cheerios as one of his first foods.

I had no idea that it is one of the foods that is highest in the concentration of glyphosate out there. So we really want to be careful what we're putting into our mouth — these chemical toxin buildups or this cumulative effect that we then have in our body — because our bodies don't just pee this stuff out. What makes this even more toxic is that it gets into our bodies, and our bodies cannot get it out. So it just sits there, and it accumulates and accumulates and accumulates, and it leads to issues like brain disorders, cancers, cellular damage, inflammation.

And this isn't just affecting humans. This is affecting animals as well. And farmers and ranchers are actually keeping statistics on this. In fact, it's so bad that farmers who are raising animals like chickens and cows and such, they actually lose a lot of money because their animals get sick and they underproduce like milk, for example, or they underproduce making eggs, and they end up dying with the disease — the same thing that is happening with humans. And the farmers actually have this data. And if I had to go over this with you, I could actually show you this actual data, but I'm just going to tell you about

it for now. I've got another slide that I know Dr. Ryan's going to want to talk about here.

**Dr. Wohlfert:** And I also want to, and I think, well, Dr. Greg Eckel talks about this, how it affects Parkinson's and neurodegeneration. Dr. Jay Davidson really gets into it, and how you want to drain your brain basically to get rid of these glyphosates, to get rid of these herbicides and pesticides. Not just get rid of them, but why we want to get rid of them? Why they have such an effect in causing anxiety and depression, and well, even bipolar, schizophrenia.

These things that you've been taught that it's just the way it is, or it's dramatic, or it's age. Well, we know it's not age because we see teenagers with it. So if it's age, then how do they have ADD. That's not really an older person's disease or diagnosis that somebody who's younger, but the same thing. Well, this is Parkinson's. How many of these cases of Parkinson's already had brain issues, that maybe had ADHD when they were younger? Right, Dr. Elena?

**Dr. Villanueva:** Exactly. And we have seen so many different cases in the last couple of years where people have come to us having already been diagnosed with Parkinson's. And I can tell you that it was a misdiagnosis. I mean, they may have had the symptoms of Parkinson's like tremors and the inability to be able to walk and like move their limbs and having issues with their thought processes and their cognitive function, but once we identified toxins — and I'm getting ready to take you through another case study here that I think you're going to find fascinating — these symptoms actually went away. And I think we can't stress this enough, and we're going to show you all kinds of graphs and charts over the next week. But this one right here is — yeah, do you want to go over it?

**Dr. Wohlfert:** Yeah. Look at that. 1979, how low was it then. Again, it's not a coincidence. That's all I wanted to say about it. And you're going to see that over and over again with these graphs



and charts with Alzheimer's, with dementia, other degeneration, MS. You're going to see that with even anxiety, depression. We already went over how the suicide rates had shot up over the last 20 years. Again, it correlates with more toxins in our bodies, more even medications, and prescription drugs in our bodies.

**Dr. Villanueva:** Exactly. And we've seen a lot of the cases that we have are right around my age group, so they're like the late forties to — forties to the sixties. So right in there where they're having a lot of cognitive deficits, symptoms of dementia, symptoms of Parkinson's, symptoms of Alzheimer's. And I ask this question and get almost the same answer from everybody. Back in the seventies and the early eighties, crop dusters are still used, but they're used mainly for crops. You don't see them like flying through the neighborhoods spraying mosquito spray everywhere and other types of chemicals. Well, I remember when these airplanes would fly over the neighborhoods to help control the mosquitoes. And then, after that, it went from the little crop duster planes to the trucks, and they would go up and down the streets.

We used to run behind them. We used to wave at the planes. We used to go behind these trucks spraying all these chemicals, and we thought, oh yeah, we're going to keep all the bugs off of us. I was a little kid running behind, inhaling this stuff. And the people that I talk to, when I get their history, they remember the same thing happening to them. We were exposing ourselves when we were like, seven, eight, nine, 10, 15 years old, in that time range. We were riding our bikes and running, and we're just all — we were just exposing ourselves. And we had no idea the concentration or the damage that it was going to do to us. Take a look at this one. Glyphosate plotted against dementia — same thing. Take a look at that. Interesting. It's hard to deny the correlations here.

Let's take a look at this one. And this isn't people

that are diagnosed; these are people that are dying from it. What about all the people that are diagnosed that haven't died yet? That number is even greater. So these are deaths from advanced issues with these different disease processes. This is Cheryl, a 54-year-old female, and when she came to us back in August of 2019, she was exhibiting a severity of a lot of different symptoms, as you can see here.

Remember that 10 is the worst, and zero means zero symptoms. And you can see over the course of time we had some incredible success with her. She was exhibiting symptoms relating to Parkinson's or late onset of dementia. And so, she was having a lot of brain fog, decreased concentration. She was also having tremors. She was having issues with IBS, like pretty severely. So she was going back and forth from like having uncontrollable diarrhea issues and a lot of bloating to constipation. She was having a lot of gut pain, and she couldn't seem to take off any weight.

Allow me to point something out there if I could, Dr. Elena, is like IBS and stomach and gut and intestinal issues, constipation, that's not a brain symptom, but what you're going to learn from us, from our other experts like Dr. Jockers, Dr. Nandi, they're going to show you that gut-brain connection. Dr. Peter Kan does a great job of showing you the gut-immune system-brain connection, or I guess we'll switch at the BIG, brain-immune-gut system because it's that big idea of how those are all related. And when you have leaky gut, the immune system doesn't work, causing leaky brain as well.

But I wanted to point that out as some people might think, well, my family member has this brain fog and that's why they signed up for this. Or they're losing their memory, or they have dementia and Alzheimer's. Well, I don't have that, but I do have this IBS and diarrhea and constipation, gas, and now they're seeing this in a new light as well.



**Dr. Villanueva:** Exactly. That's really good to point that out. So when we got lab results back, and we did a ton of different labs with her. We looked at her genetics. We were looking at her gut function. We were looking for underlying infections, mycotoxins, chemical toxins. We were looking at her reactivity to different foods that can cause some major mental health issues, which we're going to be talking about that a lot this week, and so are our different experts that we're going to be interviewing.

So we looked at everything. We uncovered every stone so that we can figure out what combination of root causes that she has. And there's a couple of things that really stood out in this one. And glyphosate was one of them. So you can take a look here. When she was first tested in August, you can see that her glyphosate levels were fairly high. And then when we retested her in December, we had almost like a 50% decrease. So around 40% decrease. But this is a really good example also to show you that this doesn't happen in 30 days. This takes time, and it takes lifestyle changes so that you don't keep re-exposing yourself.

And this is the other toxin that we found in super high levels. In fact, she was off the charts high with this industrial chemical called 2HIB. And this is known to cause major brain and nervous system issues. This is a significant and really bad neurotoxin. It's also known to cause genetic damage. It also damages your kidneys, and it's a known carcinogen, meaning it can cause cancer. And you can see that — again when we tested her in August, she was off the charts high. And she was at 8,970 as her unit of measurement showing there. Just a few months later, in December, she was down by 50% down to 4,113. And so, yeah, we identified toxins as one of her major issues here.

**Dr. Wohlfert:** It's definitely nice to be able to see this. So if you're just listening to this, which is totally fine, I would say go back and watch it because it's definitely nice to see how these

improvements happen; how the data correlates with their symptoms; how these graphs go up like this; glyphosate exposure with Parkinson's and Alzheimer's and dementia.

And I want to double back on what Dr. Elena said that this takes time, especially when we're talking brain-related issues. And not even brain-related, but especially if it's reached the point where it's causing memory loss and brain fog and fatigue and low brain endurance, or even like anxiety and depression. That's a sign that it's progressed, and now it's affecting your brain, and there's a process involved in getting the toxins out. And I'll say this one thing just to finish up my part, and then Dr. Elena is going to keep going is you might be wondering, okay, what is the solution then? What do I do? You're just showing me all these things, and we're saying, oh, they got great success.

Remember, this is the introduction. This is to get you acclimated to what we are going to be talking about during the seven days, what Dr. Elena and I are going to be covering in our mastermind sessions. What Dr. Nandi, Dr. Jockers, jeez, our 30-plus experts are going to be talking about and putting all these pieces together for you so you can implement them with the strategies and protocols that they're going to go over. So I just wanted to disarm the alarm right there if you're wondering, okay, what is my solution now? This takes time. We have to present it in a certain way that we know will allow you to get the best success possible.

**Dr. Villanueva:** Yeah, that's so well said. These things take time. Again, you can't expect a big change in doing a 30-day challenge or a 90-day challenge. There's no such thing when you're talking about this type of stuff.

**Dr. Wohlfert:** It's starting with lifestyle changes, sustainability.

**Dr. Villanueva:** Exactly. It takes time, and you got to stop exposing yourself. Let's take a look at one other thing. When she came to see us,



when Cheryl came to see us, she thought that one of her issues was candida because she had seen somebody else, and they told her that she had candida, and that was like the cause of all of her problems. So I'm not going to dispute that candida is a problem. Candida can really cause some neurological shifts. It can cause a lot of gut issues. It can make you feel tired and brain fog and fatigue. I mean, yes, it can do that.

But our bodies normally do have some candida. It's like a part of our ecosystem. And so, candida is not necessarily the enemy here. What we have to take a look at is, why is the candida overgrowing? There are many people who will make the mistake of always going straight for the candida. Let me just do these antifungals. Let me do this anti-candida diet. Well, you're going to yo-yo for the rest of your life wondering why it keeps coming back.

I'll tell you why it keeps coming back. It's because you've got other toxins and possibly other infections going on in your body that are allowing the weeds to grow out of control. Once you fix that problem, once you fix the other underlying issues, you're not going to have a problem with the overgrowth of the candida or the overgrowth of the weeds, so to speak.

And so, when we tested her, yes, we did see that she had markers that were indicating high levels of candida. But as we started working on getting rid of these environmental toxins and re-establishing the microbiome of her body and her gut — the microbiome of her gut is really important, but your entire body has an ecosystem. As we started working and getting her body back in balance, the candida levels went down right back into the normal range. And

so, I just wanted to show you that this is a great example of I didn't go after the candida. I went after all the other stuff, and once I did that, the body was able to get the candida back under control where it needed to be.

**Dr. Wohlfert:** And that's a perfect — it's a great analogy right there that the cause that so many people think is the cause is maybe a symptom of a bigger cause. And as you increase the health of your brain and body and the cells and the organs, your body knows how to get back to a state of balance and homeostasis. And that's what we're doing here with the Leaky Brain Summit.

**Dr. Villanueva:** Exactly. And let's just finish it off with this. We're just finishing off so that you can see one more time where she started and then where she was just a few months later. I hope that this inspired you today. We've got so much more to show you that is going to just inspire you, and you're going to hear from other experts, not just in the US, but other experts around the world that are going to jump in and show you what they know, teach you what they know that actually works. Because all of us that are on this Leaky Brain Summit, we all have the same goals and desires in mind, and that's to help you.

**Dr. Wohlfert:** If this resonates with you so far, I highly encourage you to just own it right now, especially, you'll have these slides; you'll have all the speakers, the 30 plus speakers in your library, so you can learn from it forever. Because this can get overwhelming, and if you try to implement everything that you're going to learn over these next seven days into your life, it's going to cause stress and overwhelm, and you're not going to be able to sustain it. So if this resonates with you, I highly encourage you to own it now.



## Hidden Causes of Neurodegeneration

Christine Schaffner, ND

**Dr. Wohlfert:** Hi. This is Dr. Ryan Wohlfert.

**Dr. Villanueva:** And this is Dr. Elena Villanueva.

**Dr. Wohlfert:** We want to thank you for joining us on the Leaky Brain Summit with our expert guest, Dr. Christine Schaffner. She's a board-certified naturopathic physician and clinic director of the Sophia Health Institute that she co-created with a brilliant mentor of hers, Dr. Dietrich Klinghardt. Welcome, Dr. Schaffner. I love that you're here, and you're going to contribute so much to our summit.

**Dr. Schaffner:** Oh, well, thank you so much for the invitation, and I'm really excited to be here.

**Dr. Villanueva:** Yeah, we're just so excited, especially because you actively see patients through your practices in Washington and in California. And I know you're just super busy between the two practices. And so, before we get started, I just wanted to say thank you so much for taking the time to share your brilliance and your knowledge. I know that you're helping so many people. And so, for us to reach out to you to ask if you would share means the world to us because our mission is to help people and to give them hope and let them know that there are answers and solutions.

**Dr. Schaffner:** Thank you for saying that. And as I sit with my patients, and as I meet so many amazing people in my practice, it's just a big passion of mine of how we can get this education out to more people. And really, I mean, I'm sure

you all see this as well. How can we shorten the time where people get a proper diagnosis on really a healing path? Because I see patients who, unfortunately, have been sick for way too long, and of course, we get them better and have a lot of tools, but it takes a while at times. And so, if we can start this sooner for people, I feel like that's a big part of my passion and my mission.

**Dr. Villanueva:** It certainly is such a big passion of ours also. And this approach that you have that it's not a one-size-fits-all approach. This is the approach of the future. This is the approach that all of the really successful, highly successful practitioners out there are using. Can you tell us more about that?

**Dr. Schaffner:** Yeah, absolutely. And I've been doing this about 10 years now, and I have — it's like the old saying: the more you know, the more you realize how much you want to learn. And I feel so grateful. I started working right out of medical school with Dr. Klinghardt, and he's taught me so much. He's almost 70, and I think he has been practicing 46 years.

So I feel like his gift and teaching is really distilling a lot of his knowledge that he learned over the years and really training us to think and see patterns and see really the root cause of why people are sick. That's really why I went to naturopathic medical school is not to just give people prescriptions or palliative care where there's, of course, a place for that, but to really go to the underlying cause of why people are sick.



And so, I have another mentor that taught me while I was in school, who — she always said, "Nothing's random." And that stuck with me when I'm always doing my new patient intake, but I feel like you said, Elena, that we're in this paradigm shift, and I think we're in this crosshair of a paradigm shift.

And I think that really to treat chronic illness we need this multifactorial approach. Looking at this multi-systemic approach and really looking at the root cause. And I always, when I'm sharing our work with patients and how we work, is that this is not a linear path where we're getting from point A to point B and the smooth straight line. This is a dynamic process where we're making progress, and things are kind of going in this wave pattern that I see when I treat people.

And what we're really doing is we're trying to look at — again, this is what our patients have taught us that when people have a chronic illness — And then again, I see patients who tend to have more chronic illnesses that are the more neurological range of conditions.

So yes, we see people with diagnoses like multiple sclerosis and Parkinson's, even ALS, but we also see just the chronic fatigue patient. The patient that has fibromyalgia, has seen 20 to 30 doctors, has not gotten results that we want for them. And we look at things of why are they sick, right? So we're looking at their immune system, of course. And we look at this whole world of stealth pathogens, I would say, or their ecosystem and their body.

So looking at Lyme and co-infections. We're looking at viral and retroviral infections, fungal, and mold infections. We're looking at parasitic infections — a class of infection that is widely underdiagnosed and undertreated in our country today. And so, we're looking at that whole system and how that affects each individual. And then we're looking at environmental factors. And that is a big part of what I feel is one of the things why we see so many sick people today.

I think that our immune system is supposed to engage with our environment. We're meant to engage with a lot of these infections and not be taken down for a decade. And what has shifted, I think, so much in the last 10, 20, 30 years is really the environmental toxicants soup that we're all inundated with. Dr. Puzoria, who's a naturopathic physician and founder of Best Year, he always said one plus one doesn't equal two, right?

So we're in this world of — maybe if it was just lime or just mold, but then we have aluminum, electrosmog, and persistent organic pollutants, and the 286 chemicals that are in cord blood when new children are born today. So we're just in this new time. And I think our bodies are amazingly resilient and amazingly have so much ability to repair and regenerate, but we're just — our cup is full. So our job is to really figure out and identify where there is stress and how to offload that stress so the body can self-regulate and heal.

And to that point, I just want to also acknowledge we, of course, look at trauma and the emotional, spiritual impacts of health because that is also a big factor of the human experience and how we feel in our body. So those are like the big buckets that we are looking at, and everyone has something in each bucket to look at. And that's why this is not a one-size-fits-all or a linear process.

And that's why people really need this multifactorial approach and really comprehensive protocol. Our patients work very hard. They do a lot to get better. And I'm, of course, open to it being easier. But for what we know, today, it just takes looking at all of these things to recover one's health.

**Dr. Wohlfert:** And I like how you put multifactorial because I know sometimes, I get stuck when a patient says, "Why is this happening to me? Why do I have this symptom?" And I've definitely over the last 20 years gotten a lot better at not just saying here, try this, but actually finding out what that cause is. Because usually it's a simple



answer, but it's not simple. It's not one thing. It's multifactorial.

And I liked the other thing you said is our bodies are resilient. They can heal. That's one of my favorite words. Our brains are resilient. Our body is, but now it's just overloaded with physical stress, chemical stress, mental, and emotional stress. So, obviously, because it's not just here do this one thing and you're going to be fine for the rest of your life. That's not the way it is. Or cut out this one toxin, and you're going to be completely fine. Here take this one vitamin and that brain fog is going to be gone; your leaky brain is going to be healed. Your anxiety and depression is going to go away.

So because of that, it takes more education. And that's why, again, this isn't a one-size-fits-all where it's like here, you have this symptom, take this. Or you have this malady, do this. So because you take this multifactorial approach, how do you educate your patients about like toxins that they're exposed to or deficiencies that they have, and especially the mental health issues that they have that I know you see because more than likely, you've seen an increase over the last 10 years, especially since what is it now? One, I think, in five Americans are on an antidepressant, or it might even be more than one in four.

So, obviously, it's become rampant from 40 to 59 years old outside of antibiotics — sorry, antidepressants are the most prescribed in that age group. So tell us, one, how are you educating these patients that are coming through your doors?

**Dr. Schaffner:** Yeah, that's a great question. And by the time people come to see us, we have a very self-selected patient population because often patients have to travel. This is out-of-pocket. We don't take insurance. There's a high level of commitment that patients come by the time they come to see us. And so, with that being said, they're highly committed and highly educated. I find when I am even doing these talks or even

talks within our community, we're talking to the educated patient and the practitioner, and there's a really fine line.

Our patients could have medical degrees with how much they know and what they've been through in their own bodies. So I feel like we're a little unique in that way, but I think kind of sharing another insight into this question is that what is maybe overlooked in these patients that just having a gluten-free dairy, free diet, is not enough, or doing some things that they've tried is not enough.

And what are the things that we see that are often overlooked? And there's a concept in Neural Therapy called an interference field. So Neural Therapy is a German injection technique that Dr. Klinghardt trained myself and our staff in, and it's a wonderful therapy that we can use to treat scars. We can use to treat different ganglia and the autonomic nervous system to flush out toxicity or infection. Or we can do segmental therapy that helps to bring blood flow or circulation to an organ. I call that acupuncture and steroids because it works so well.

So in the concept of Neural Therapy, this idea of interference field is this just like it's said, where there is an interference in the body that's preventing the body's autonomic nervous system to be able to repair, self-regulate, and heal. And what we find often is that it can be actually a physical scar. So a scar from the surgical site. A scar from trauma can affect actually the fascia and the lymphatics in that area so that can create stagnation in that area, but it also can have emotional trauma if it's, for instance, an emergency C-section or an emergency appendectomy. There can be unprocessed emotions in that scar.

There could also be — in Neural Therapy, they talk about the abnormal cell membrane potential in a traumatized scar. And so, the injection helps to reset that membrane potential in the cells and the scar to help decrease that stress signal



to the autonomic nervous system. So scars can be an area that seems small but can be very profound and opening up fascia lymphatics, releasing emotional trauma, opening up the Meridian system. So that can be something that is important — also, the dental connection. I think there's so much awareness even in my 10 years of doing this of dental health and how that affects our brain and our nervous system and the rest of our body.

So we're always screening people to see if they have amalgam fillings. So there, again, has been a lot of education, but some patients still come to us that still have amalgam fillings. And that is one of the first things that we have them remove in a safe way. And amalgams, for those of you who don't know, that's an amalgam of metal in the mouth as a dental filling to cure cavities. The primary metals is mercury, and those amalgams in mercury is a known neurotoxin, and it can basically attract our cranial nerves, our brain, our lymphatics. That can be very toxic to our bodies over time.

We look at root canal fillings. So root canals can be — they're dead teeth essentially. So when you have a root canal, it's a dead tooth that the dentist takes out the root and then fills the tooth with non-biocompatible material that essentially can breed bacteria over time. And that can be a focal infection in the body. We know that even cardiologists know heart health is very intertwined to our oral health. So if you have a growing root canal bacteria in your mouth, that can affect you systemically.

We look at wisdom teeth cavitation. So sometimes the wisdom teeth are taken out, and that bone never heals properly. And so, there can be an area of necrotic bone in that wisdom tooth site, and that can affect the lymphatics, the vagus nerve. Every tooth sits on an acupuncture meridian. So if there's an amalgam or a root canal or some other infection in the mouth that can affect that meridian system or that organ system, we look at

that. Those are like very common things that are overlooked.

The other focal infections can be in the tonsils. They can be in the sinuses. They can be in the appendix. They can be in these kinds of hidden areas in the body that the body can't clear on its own. So we're always identifying that for people. And then I feel like our approach, too, is that we're not just the Lyme doctors or the mold doctors or the heavy metal doctors. We look at this in combination and really look at — when recovering someone's health, we're looking at all of those things in a comprehensive way. So our protocol addresses all of that at the same time, which can really help with people minimize side effects or any aggravations during treatment.

**Dr. Villanueva:** Wow, that's incredible. That is the approach that needs to be taken, though. And I hope for all of you that are listening to Christine today; she just gave a lot of really important information. If you didn't catch that, you need to own this so that you can come back and listen again to what she was saying because what she said was so important. She just gave an entire list of so many of the contributing issues, many that are overlooked perhaps because they're not understood by the traditional practitioners, that can really affect mental health and cause neurodegenerative issues. And only by unturning all of the stones are you going to be able to find what the multitude of contributing factors are?

Because just like Dr. Schaffner, excuse me, said earlier, it's rarely ever one thing. There's always a combination of different things going on. So whenever you find combinations of things going on and you adapt this multifactorial approach, how do you triage so to speak? Like, how do you guys decide what's the most important thing or things that you're going to work on first, right?

Because whenever we're going over labs with our patients, and we're going over all their findings, and we're going through their history, and we're looking at traumas, we're looking at their



biochemistry and their genetics, and we're looking at everything, we find a lot of stuff. And then we have to explain to them like, okay, we're going to work on these things first. And as we work on these, it may help some of the things here, but we need to work on this first before we can work on this. So kind of can you kind of walk us through your approach with that?

**Dr. Schaffner:** Absolutely. And again, every patient, even though we have concepts and thoughts around this, we treat everyone very individually. And so, some of those, what I'm going to say, goes out the door for some people because of just where people are. Just to also share with the listeners, one of the modalities we use at Sophi is called autonomic response testing. Dr. Klinghardt developed this form. Essentially, it's a biofeedback exam to really evaluate where there's stress in the body and what will alleviate the stress. So it's a sophisticated form of — muscle testing is not the right word — but if you want to envision what we're doing, we're working with principles of light and looking at the nervous system.

And what we're finding is that helps us to prioritize for a patient. So that really is a tool that is — I don't know how I would practice without it. But if you don't have a tool like that — I mean, I honestly if you are out there treating complex chronic illness, I think having some type of energetic tool, whether it's a physical tool like ART or a bio-resonance tool or some type of energetic tool, I think is just such a wonderful aid to help you prioritize because this is complex. And we only know what we know. And so, this can really help really individualize your treatments better.

With that being said, Elena, I think I'd like to oversimplify sometimes things for patients. And one of the things that I think that we really need to support people with is this concept of flow in their bodies. So, where can we create more flow? And so, often when I see a patient for the first time, yes, we'll treat their scars. But we'll also look

at their lymphatic system and this being the Leaky Brain Summit, looking at their lymphatic system, so looking in the lymph system in their brain. So how do we support that? Also, looking at the bile flow.

Bile flow, I think, is really important to elimination and, of course, digestion, but also elimination. So you're looking at those two systems. And so, one of the foundational parts of our protocol are these binders and binders help to bind what is coming out of the bio and help that to be eliminated in the stool rather than potentially recirculated. So all that hard work the liver did to eliminate things like an endogenous waste to mycotoxins to heavy metals to biotoxins, a lot of that gets shuttled out of the body via the bile, via the stool.

And if you don't have good digestion or not a lot of elimination, or you are having more recirculation, you could be not getting rid of that in the rate that you need to feel better. So we use things like Chlorella. We use a zeolite powder or modified citrus pectin. In acute cases, charcoal. We'll use silica-based binders as well. There's also brown orchids. We use a lot of different fulvic and Humic acids. There's just a lot of different binders that help to bind different things. So that's a real foundational piece of the protocol. And then, as I mentioned, one of my favorite systems to talk about is the lymphatic system because I think it's one of the most overlooked systems in the body.

And this is a huge piece of recovery in women's health as the lymphatic system is a waste removal system. And it's also an immune surveillance system. So it's essentially helping us to get rid of our toxins as well as support our immune system. And so, there's a lot of different herbs we use. We'll also use different topicals. There's a lot of wonderful strategies where you can go and see a manual lymphatic drainage therapist where they'll either use hands-on techniques, or they'll use specialized equipment. So I think that's really important.

And then we'll use — when we're thinking about



the brain, we often think about, of course, the glymphatic system. For people who don't know what that is, is how our brain naturally detoxifies at bedtime. So our brain actually shrinks about 60% in size at night to make room for the flow of lymph. So the lymph is coming and bringing nutrients in and removing waste out, and that's flowing out of the brain at night alongside the veins. And if you have stagnation in the cervical lymph nodes, that can create stagnation.

And drainage in the brain, we have people do the self-lymphatic drainage massage, and we have a cream we created that we have people put on their neck, and that helps to open things up. And then again, the brain won't drain that only if this is stagnant, so the cervical lymph node region, but also if you have lymph stagnation on the rest of the body. So we work on — of course, there's a lot of lymph that doesn't drain in the abdomen. And if someone has a lot of chronic dysbiosis or a lot of chronic digestive issues, you could have pulling of lymph in the abdomen.

So castor oil packs are manual lymphatic drainage massage, or even coffee enemas can be really helpful in that. So all of those, what I just shared, are setting the stage when want to treat parasitic infections or fungal infections or Lyme and co-infections or viral infections. And we use a lot of herbs. So we use a lot of liposomal herbs. So liposomal herbs are going to be better absorbed, and they can get into the brain and get into the cell a lot better.

We'll use medications in a supportive way when needed. So we'll use that. And then, of course, we'll use everything from natural compounds to detoxify the body to chelation to help remove heavy metals. And so, when we start using those things, it's hopefully, in the backdrop in supporting people's really their organs of elimination first and also, of course, highlighting their lymphatic system and their bio because I think that's just really important in the patients we see.

**Dr. Villanueva:** What can people do at home to help with their lymphatic flow because a lot of people are hearing this, and they're thinking, oh my gosh, I haven't even really heard this before. And they hear a lot about detox. And they hear about detoxification from the GI system. They hear about cellular detox. They hear about liver detox, but a lot of people don't hear about that. And there are a lot of people who do have stagnation because they're toxic, and they're also more sedentary than they used to be. And so, what can people do at home to help with their lymph flow?

**Dr. Schaffner:** It's a great question. And luckily, there's a lot of simple tools. So walking, some movement — movement helps to move our lymphatic system. So moving every day. So walking at a minimum to doing anything you love to exercise, will be very helpful. There is something called a rebounder; some of my patients have, which is like a little trampoline that you can jump up and down on, and that can be helpful. There is the vibration plates as well, that can kind of shake your body, and there's fancy versions to inexpensive versions. And that can be very helpful for lymph. In naturopathic medicine, there's dry skin brushing, which is using a dry skin brush to basically brush very light strokes always towards your heart, around your body.

There's also, in the facial world, like the Jade Rollers and the Gua Sha jade stones to move lymph. There's topicals we use. So I mentioned our flow cream that has a peptide, or it has a probiotic that makes a peptide called macrophage activating factor that helps to decongest lymph nodes. We worked with Dr. Lucero to formulate this. And he showed an ultrasound before and after applying the cream, and it really is wonderful in decongesting the lymph. BioPure also makes herbal deodorant that has a bunch of herbs in it to help move lymph. So I have people use that and like castor oil is also — the castor oil pack. You can, of course, apply it over the liver and the abdomen to help move lymph. But I also



sometimes have people put it on their neck.

On our website, [Sophiah.com](http://Sophiah.com), Dr. Klinghardt has a video where he's doing the self-lymphatic drainage massage. So just using your hands to move the lymph in your neck. So there's a lot of wonderful tools. Hydration's really important, and we need to be really well hydrated to have really good lymph flow as well. So yeah, that's just the — and then, of course, if you have a chronic illness and you need more support, there are — your practitioner can work with certain herbs or even a lymphatic drainage practitioner.

I feel like, honestly, when we're getting someone started to recovery, having a wonderful manual therapist that does lymphatic drainage can really get somebody really moving a lot more quickly than doing these home tools. Again, depending on where people are, but if you have a good lymphatic therapist on your team, that's worth its weight in gold.

**Dr. Wohlfert:** What I love hearing, and you said this minutes ago is — and I don't want the listener to gloss over this — is it's this process. Okay, we're going to do this lymphatic. I mean, those are unbelievable tips. 90% of those, they can just do them at home or go outside and do them — the walking. If they don't have a rebounder, that little trampoline, they can just do jumping jacks, but walking is enough to start if they don't want to jump, but even just little jumps. Just taking a brush and doing the dry skin brushing.

But what I want the listener to understand is let's say you're only going to the bathroom or you are going number two like once every three or four days. Now, I would like to get your take on this, Christine. Let's say that it's all backed up. That lymph flow is backed up. They can feel the lymph nodes and that stagnation that's so bad because they're not — because they're constipated. Because it's not getting that drainage out — they're not going to the bathroom, urinating a lot. So do you make sure that with your patients that they're also — make sure they have regular

bowel movements before you start, or do you do it concurrently?

**Dr. Schaffner:** Typically, concurrently, but that's a great point. People are constipated. That's going to be something that we absolutely want to resolve. Nobody will feel good on any protocol, I mean, if their elimination, especially urination and having proper bowel movements — if you're not doing that, we definitely want to help begin with that.

But again, sometimes the things that we're treating people for create the constipation. So, for instance, chronic parasitic infections or dysbiosis can create constipation in the digestive tract. So we do our best to get that system moving, but to really heal and recover that system, typically, we need these other anti-pathogenic strategies alongside to help really treat the root cause of why people are constipated, to begin with, or have just hydration issue, to begin with.

**Dr. Wohlfert:** Sweet. I mean, that's perfect. And you mentioned the glymphatic system, and I want you to go back to that for a second or more than a second — minutes — and explain that because that's a really new concept over the last like what? Five years, I believe, that they've just identified this new, the brain's own immune system, own lymphatic system. And so, yes, please talk about that and tell the listener how that all works.

**Dr. Schaffner:** Well, absolutely. It's one of my most favorite things to talk about when I'm doing these talks because I think like you said, Ryan, that it's still like widely not well understood or not mainstream yet. And when we're talking about brain health, we have to have a conversation about the glymphatic system because I think it's such a fundamental way to heal and recover one's brain.

And so, again, the system is called the glymphatic system because it's the glial-dependent lymphatic system. So there are these glial cells, specifically astrocytes, in the brain that basically form



neurons that regulate the flow of water or lymph at night. And so, what happens, we need sleep for so many reasons, but we really need sleep because it's critical to having a healthy brain because it's helping remove waste out of the brain.

So our brain shrinks about 60% in size at night. And what happens is this lymphatic flow flows in the brain, and it basically flows along the neurons, and what they've shown, even with deprivation, an increase in amyloid-beta in the brain, meaning that for our glymphatic system to work properly to remove a substance called amyloid-beta, which is a hallmark sign of neurodegeneration — So when the amyloid-beta builds up in the brain, that can create neuronal cell death, so it can kill neurons. It can also affect neuronal communication.

So that can affect, of course, a lot of neuron communication and like manifest a whole host of neurological symptoms. And so, yeah, this is not only, of course, important for removing amyloid-beta, but we've also found this whole role of melatonin and how melatonin absolutely helps restore our brain health.

And so, melatonin is produced by our pineal gland. We also need our gut microbiome to be healthy enough to produce serotonin that also produces melatonin. And I kind of think we in modern life, we're just in a melatonin deficient time. And I laugh when we talk, and we read about melatonin, and we research melatonin. I'm like all roads lead back to melatonin.

So it's one of these really important molecules that when we sleep our pineal gland produces melatonin, and melatonin is not only helpful for us for our circadian rhythm and having a deep sleep, but also melatonin in and of itself is actually a potent neuroprotective antioxidant that actually helps to remove all of these things: viruses, pathogens, heavy metals, waste products from the brain. It's a powerful substance and antioxidant. So I think even nature is so wise that

melatonin has all of these roles in the body.

And so, a lot of the times when we are helping people sleep, we will help them sleep by enhancing their own natural melatonin. And that's also detoxifying the pineal gland. So we know the pineal gland is affected by electrosmog, by fluoride, by aluminum, by, I'm sure, many other things. Then our melatonin production decreases as we age and as we get sick.

And so, we don't only supplement with melatonin, which we do, but we try to also detoxify the pineal gland. I got sidetracked in melatonin, but the glymphatic system, going back to that, and just the other key points that I want to make about that is that we need good — our neck is kind of a highway in and out of our brain, right? So we need blood flow in the brain, but we also need blood flow out of the brain.

And the blood flow out of the brain is really important because the lymph also flows out of the brain alongside the veins. So if there's stagnation or stenosis or all sorts of things that can happen in the venous system, then that's going to affect lymph drainage. And so, that's another reason why also the self-lymphatic drainage massage and just doing all the things that we know in the neck is important. So a good night's sleep has more than just feeling good and refreshed in the morning. It's really critical to our brain health.

**Dr. Villanueva:** What are you doing to help support the pineal gland? Because you did talk about that. And now I know that people are going to be asking about that. Well, gosh, what do I do? And you already talked about how it can be affected from the different chemicals, but what can we do to get that activated and working like it should?

**Dr. Schaffner:** It's a great question. And so, as far as two parts, right? So how can we enhance our pineal glands' production of melatonin? The pineal gland is very sensitive to light. And so, there's so much awareness right now about our circadian



rhythm and our circadian biology. And I've talked to wonderful people who are getting into the realm of circadian lighting and how we can have even our lights mimic nature. And so, what we do now is blue light. We need blue light in the morning to wake up. But when we have blue light at night, that tells our brain it's not bedtime. So it confuses our pineal glands production of melatonin. So we actually —

Darkness or you've seen the blue-blocking glasses that people are wearing, and that helps to tell the brain it's now bedtime and to secrete melatonin. So light is a big part of enhancing melatonin production. And then the things that we think about are fluoride, aluminum, and glyphosate to detoxify the pineal gland. So nobody should be drinking fluoridated water. So a water filter that removes fluoride is important.

There is a paper that shows that melatonin actually helps to remove fluoride from the pineal gland. So I thought that was interesting. And then, aluminum. So a big part of our protocols are aluminum detoxification. So we know that neurological diseases linked to aluminum in the brain — Chris Exley has done studies to show. He looked at the postmortem of the brains of children with autism and also in patients who died of Alzheimer's. In both populations, he found a statistically significant amount of aluminum in both sets of brains, which aluminum has no biological role. It shouldn't be in the brain.

And so, a lot of our protocols rather help detoxify aluminum, we use silica primarily to help do that. So silica binds to aluminum and helps get that out of the body. And so, we'll use silicone-based products to silica. Mineral water can be very helpful. Silicon-based binders can be helpful. We use also higher doses of melatonin to push aluminum out of the brain. And then there are chelation strategies for removing aluminum. We also will use cilantro. We've also used the footbath, sweating, all of these things can help enhance aluminum detoxification. And then

glyphosate, of course, in the US, we don't label our genetically modified foods.

So we are all overexposed just with the wide use of glyphosate. Even my patients who do everything right, we do a glyphosate test, and they're still positive, so it's just ubiquitous in our environment. And so, we'll use a lot of humic and fulvic acid. We use a product from BioPure called Matrix Minerals that is really wonderful for that. And then we'll do things to support PON1 upregulation, which is an enzyme that helps us to naturally detoxify organophosphates and pesticides. So we'll use different antioxidants like vitamin C and selenium and vitamin E and [inaudible] pomegranate, all of that to help naturally remove glyphosate.

So we're looking at all of it, but all of that is important to detoxify all those. As all roads lead back to melatonin, if your detox protocol addresses glyphosate, aluminum, fluoride, you're well ahead of the curve.

**Dr. Wohlfert:** And I liked that — here's the thing is the listener might be overwhelmed, like, jeez, oh, pizz, you just gave so many different tips there. And I love it. And I know in the past I would have been like, where do I start? But here's where I want the listener to just start where you are. I want to go back to the aluminum thing because that just resonated with me and how we are exposed to aluminum without even knowing it like putting aluminum foil while we're baking or using aluminum sheets while we're baking.

I should say this, can you give some alternatives to how people can get just that simple little thing, take it from using aluminum foil or baking and other sources that they find aluminum, other sources that they're maybe not thinking of. I'm looking at my notes here like fluoride that they're exposed to rather than just in the water or their toothpaste. Is it other places? So, where are those that you're finding, again, overlooked places that are toxic? Everybody, they're doing everything right, but yet they don't know they're exposing



themselves to those types of toxins.

**Dr. Schaffner:** Great question. I mean, I think just start out with the most proactive thing to do is to get a good water filter because fluoride can be in the water, and then aluminum can also be in the water. Some municipalities use aluminum sulfate basically as a way to remove bacteria that they can't filter out. And so, when you have aluminum and fluoride in your water, they can combine and form these aluminum fluoride complexes that actually are very hard on the brain.

So getting a great water filter. I often recommend just the Berkey filter because it removes fluoride, and it does remove heavy metals. So I feel like that's a great start. It's affordable, and you don't have to reconfigure your kitchen and all of that. And even the travel one is even cheaper. So you can just start putting your water in there and drinking out of that.

So, Ryan, I think that's a great place to start. And as you said, like avoidance is, of course, going to be the number one route to help support your body. So thinking about fluoride and removing it from your water. And then of course not choosing toothpaste that have fluoride. That's easy to do. Now, you can go to the health food store, and there's all sorts of fluoride-free toothpaste that works. And so, that would be important. And then aluminum is very ubiquitous in our environment. So it's in our food, it's in our water, it's in our personal care products, it's in our medications, it's in new vaccines. And so, again, really looking at labels I think is really important. I would say deodorant would be a really important high yield benefit to use an aluminum-free deodorant. Just think about all that.

I just said about the lymphatic system today. And if you're putting aluminum in your armpits, that's a very lymphatic rich area in the body. And so, they've shown connections with aluminum and breast cancer and women having basically — our breasts are lymphatic tissue. So if we're putting aluminum deodorant in our armpits where it's

highly inundated with lymph nodes and the connection with breast tissue, there's just play it safe. So again, it's a wonderful time where I think the natural products have gotten so much better, and there are natural deodorants that are aluminum-free that work. If you know, find the one that works for you, but those would be the big ones I think.

And then yeah, I feel like with aluminum again, checking labels because aluminum could be hidden in things that you don't realize. Probably if you're listening to this, you're not eating things with food coloring, but the aluminum linked dyes or the food coloring is aluminum-based. And then sometimes you need medication. That is just the way it works, but there are a lot of medications that have aluminum as an ingredient. So just again, being mindful and aware, I think it's the first step.

**Dr. Villanueva:** Yeah. Interesting to note that some of the psychotropic drugs on the market are fluoride-based, or they are fluoride derivatives, which it's hard to even really understand that knowing that it's a big neurotoxin, but let's jump into another topic. You mentioned — I don't remember the term that you said, electrical smog, or what was the term that you used?

**Dr. Schaffner:** Electromagnetic smog.

**Dr. Villanueva:** So this is something else that a lot of people don't think about. And talk to us a little bit about that because again, it's understanding where we're getting exposures so that we can minimize the exposures of these different things that are ultimately causing our brain health issues.

**Dr. Schaffner:** Absolutely. So electromagnetic smog is kind of that wide — it's an umbrella term to really highlight those things that are just — we're all overexposed to. So it's the combination of cell phones and Wi-Fi routers and smart meters and dirty electricity. And these things have electromagnetic fields.



And so, to take a step back, many of you probably understand that we not only have our physical body, but we have an electromagnetic nature to our bodies. So our heart has a very strong electromagnetic field that is measurable that conventional medicine uses. All sorts of diagnostic tools to actually measure that field because it's an indicator of the functioning of the heart. And then we know that our brain has brainwaves and that's measured through EEG. So we know that we not only have our physical body, but we have this whole electromagnetic body.

And I did a summit last year called The Body Electric Summit, where I talked a lot about this. There's a term that Beverly Rubik uses, and it's called the bio-field. So that's kind of the summation of this low light emissions and frequency that is emitted from our physical body. So this is not an esoteric concept. It's grounded and a physics concept. And so, that is something that I always like to educate and learn about myself. I'm constantly still learning about this.

And so, when we think about this, we know a big part of our work is healing the brain and the nervous system. And we have shown that — there are studies with cell phones and Wi-Fi routers especially, that they have a multitude of effects from —

Especially for this summit, we know that even low-frequency EMF can actually increase permeability in the blood-brain barrier. Dr. Klinghardt, I think he was half-joking, but he wanted an IV to get into someone's brain. And he's like, well, hold your cell phone up to your brain for like five minutes and then do the IV and your brain's going to be more permeable so we can get the gas in there. And I just say that as kind of a joke, but it's the truth. So we're really big, going back to the glymphatic system, on creating a safe, sleeping location because, as you know, Elena, this is just time-oriented. It's very hard to mitigate and control our environment. So how can we feel empowered and control what we can?

And so, I have people start with their sleeping location and try to really mitigate EMF sources, and they're in their bedroom. And so, that would be, not only having a dark room because that's important for your pineal gland but not having anything plugged in, not bringing your smartphones or your devices into your bedroom. Turning the Wi-Fi router off. Dr. Klinghardt has all of our patients not have Wi-Fi. For some people that's too drastic to step in, what you can do is — again, this is cumulative exposure over time. So turning off your Wi-Fi router when you're not using it, or at least at bedtime, is a great start, and that is important. Looking at dirty electricity, that is something — that's the electric field that comes out of the wiring in the house.

And so, you can actually measure them through different meters to see if you're having — I kind of think of it as like this disharmonic field that's coming out of the electrical outlet. So think of like if you have dirty electricity or outlets by your head around your bed, those would be the first ones to check. And then, you can get these filters called Stetzer filters or Greenwave filters that you can plug into the amount that's in that house to harmonize the field.

So again, this is an emerging area of science. I think there's so much information now about it. This is a lot of research. We are trying to study this, educate people, and using the precautionary principle. We're in a time where we really don't know the biological long-term effects this type of constant inundation of light radiation, and obviously, with 5G around the corner, there's a lot of people who want to just stop and say, let's look at this. Let's test this. Let's have more of a dialogue than just, all of a sudden, we wake up, and that's our reality.

And so, I have seen this to be very important in a lot of my patients' health — insomnia. If you have insomnia and you've tried everything, try this and try to turn off your Wi-Fi router, create a dark room, and keep devices out of your bedroom.



And you'd be surprised how many people that is so impactful for. So yeah, that's probably a whole summit. There are summits that are on this block, and there's many books, and Dr. Mercola just came out with a book that's really good. And there's really wonderful leading scientists sharing information. And I think this is again, a place where it becomes completely overwhelming at first.

It can be very hard to digest, and really you have to think about life and physics when you're looking at these things. So it can feel very overwhelming, but just start with maybe your bedroom and start just educating yourself and being mindful of this and think of again, cumulative exposure over time. So do you need to have your cellphone on your body all the time? No. So put it where it needs to be, and when you need it, turn it on and don't put it near your head. So just common-sense things I think are a place to start.

And then again, if you're suffering from a neurological illness — like Dr. Klinghardt has all of our patients not have Wi-Fi. He has people turn off their fuses at bedtime so they can really restore their sleep. So there's ways to take this up a notch depending on your health level.

**Dr. Wohlfert:** And I think the simplest point there is, like where to start, this is what we do, is I have a timer like where my router is plugged into that and at 11 o'clock or whatever, 10:30, it goes off. And then at 5:30 or 6 o'clock, it turns back on — same thing with our TVs. I mean, I'm not to the point yet, but that is definitely on my radar is shutting the fuses off, especially going to our room because you're right. That definitely affects the brain.

**Dr. Schaffner:** There's somebody I'm meaning to connect with who's created a kill switch or demand switch that basically, there's just one switch where you go off to before bed, and it turns off your fuses so making it easier. So people are thinking about creative solutions to make this

an easier lifestyle choice than such a hassle and headache. So it's exciting.

**Dr. Wohlfert:** One other thing that you said is the research is still coming out. It's really a relatively new concept. We don't know what it does. I think we know enough. Again, in our world we do, but I think back to before this is airing, like at the time we're doing this interview, we're in a time where we don't know what a certain virus is doing or if it's contagious or how it can affect us. I mean, I've had patients tell me I'm doing this because I don't know what it's going to do to my health.

So if you're that for that situation, this is the same thing it is like you don't know what that cellphone up against your head is doing. So why even do that? You don't know what it's doing sitting next to your nightstand when you sleep. So then just take it away. If you're not sure or you need some sort of research, I love how you say it's disharmonizing the body. Our body is electricity; it's energy. And if those wavelengths don't match, it's going to have this interference, this combativeness that we're going to have to pay for, well, either now or later.

**Dr. Villanueva:** Yeah, and there really is a lot of research. My husband is an aerospace engineer, and so he has been doing some research on frequencies and looking at things from an engineering standpoint. And there is mounting evidence, and it keeps coming out every month. And the evidence is being put out from engineers and scientists all over the world. And it's really caught the attention of some governments around the world as well who are now having concern over the upcoming big changes that we're seeing.

And I really hope that our government will pay more attention to that as well. But if not, that's up to us, and here the United States, that's up to us if we don't see them making the changes to go ahead and push for that. But my point is that there is a reason for concern. And so, for those of you who haven't done your research yet, go online, do your research. You're going to see a



lot of research. And again, it's not just here in the United States. You're seeing resources being compiled by engineers and scientists all around the world in many different countries. And Europe is getting a lot of attention right now.

**Dr. Wohlfert:** And I guess I should preface that by saying what the research that most people are exposed to through mass media sources is not there. Again, we know it's there, but it's not coming out in like these media sources that normally a lot of people pay attention to.

**Dr. Schaffner:** Yeah, you have to look a little harder for the truth these days.

**Dr. Wohlfert:** And that's why we're doing this summit, right, Elena? The Leaky Brain Summit. I mean, this has been — I don't know if Christine can give really any more unbelievable, not just education and information like she does with her patients that — so we're happy she brings her world to us because you might not be able to see her. Well, more than likely, I bet you can. You can find her. You can contact other speakers on this summit.

We wanted to bring the best of the best. And that's why we wanted Christine on here because just with her wealth of experience and knowledge and her practices in Washington, California, people all over the world coming to see her, yes, she presented ways to avoid and limit these

toxicities, these infections, but then also how to detox your body, how to get the glymphatic system going. Your lymphatic system going and give you actionable tips.

So definitely go back through. Either watch this again, or if you don't have time for that, you want to see the other presenters, just own it. It's a small investment. So I highly recommend that. Dr. Elena, is there anything else you want to say? I just want to say thank you, Christine, for being here.

**Dr. Villanueva:** Yeah. Now, the information was amazing. Christine, thank you so much. We're super happy that you're sharing this with our listeners getting to hear from experts around the world who are focused on helping people with chronic diseases and mental health disorders and neurodegenerative diseases. I think it's really good for everyone to get to hear it from a little bit of a different viewpoint because some people's explanations are going to be easier to understand than others. And you just did a phenomenal job today. Thank you so much.

**Dr. Schaffner:** Thank you so much for having me. And I know this summit is going to help a lot of people. So thank you for putting this on. I know how much work this is. So yeah, I thank you.



## Maximize Brain Health, Minimize Leaky Brain

Greg Eckel, ND, LAc

**Dr. Wohlfert:** Hi. This is Dr. Ryan Wohlfert.

**Dr. Villanueva:** And this is Dr. Elena Villanueva.

**Dr. Wohlfert:** We want to thank you for joining us on the Leaky Brain Summit with our special brain expert, Dr. Greg Eckel, who spent the last 20 years developing and refining his unique approach to chronic neurological conditions. He combines naturopathic and Chinese medicine — so cool. Dr. Elena and I are so happy you're joining us to learn from Dr. Eckel, and how you can maximize your brain health and minimize leaky brain. Thank you so much for joining us, Dr. Eckel.

**Dr. Eckel:** You are so welcome. Thanks for having me on.

**Dr. Villanueva:** I just want to dive in with this personal connection that you have with a chronic neurological disease with your wife having passed away with a neurological condition. She was told that there was no cure for that. What are you finding with regards to the state of care for patients with neurodegeneration?

**Dr. Eckel:** Yeah, for sure. I had been in practice. I started in med school in 1996, graduated in 2001, and I'd been in practice for 17 years. And you can be a provider physician, and you've got a ton of patients under your care. It's a little bit different when it's your wife. And we discovered Shariah was this amazing being on the planet. She passed three years ago to this incurable neurologic condition called Creutzfeldt-Jakob disease. And it's a very rare disorder. It's one in a million

people get it — about 300 cases a year in North America. And I knew the healthcare system was fractionated as with all of my patients and with the needs of folks coming in. It's like, wow, we have like pieces and parts system.

But then going through it, this Creutzfeldt-Jakob disease is nothing like I'd ever seen before. It was rapidly progressing dementia. Basically, Shariah was in the clinic. She was an OBGYN practitioner, graduated top of her class from Oregon Health Sciences University. Women would come out of her GYN room kind of singing a little song and doing a little jig. You never see that coming out of a gynecologist's office. So just an amazing provider, and she was super sharp. She graduated top of her class and all of a sudden, over a couple of months, we started staying later and later as she's doing her charts and like, hey, honey, what's going on here? And she's like, oh, I've got some really tough cases I'm charting diligently. Get off my back. And I'm like, okay.

But it became evident like, well, wait a minute. No, she's looping, like, she's starting to develop dementia signs, and it's like we look to the early things of what happened? What would a 43-year-old — how would they start losing their memory? And it's like, well, is it perimenopause? Is it hormonal? No. Is it molds? Is it mycotoxins? And I know you have people talking about all of these facets on the Leaky Brain Summit. And no, it wasn't molds. I had my clinic tested. My home tested. We'd had her body tested, really worked



up. I did over \$2000 worth of labs and workups. And then it was like, gosh, I've never seen anything like this in 17 years of practice. I'm going to get some support.

So I went into conventional practices, and I just got the most horrible responses of like, oh, well, clearly this is a psychotic break and blah, blah, blah. I'm like that, no, this is not that. So I would not settle for any of the answers that I was getting. And so, I dug deeper and deeper into the research, and what I uncovered or what I'm sharing with the world are Sharia's gifts. It's my FAN-C approach to brain regeneration, which we're going to talk about today. It gave me even more empathy for my patients and just folks suffering with their health conditions. I know firsthand it can be very isolating, overwhelming. You feel kind of just out there like what in the world's going on, especially with neurodegeneration.

And so, I took it as maybe the mission. I'm planting the flag in the ground, kind of turning my personal tragedy into some wins for thousands of people. Because I really uncovered some really amazing techniques and therapies and kind of assembled them all in. In addition, it gave me such — it kind of ripped me open as a human being of just surrendering to our human status and state on the planet. I came to a realization we are all one pretending to be separate in this reality, and we are treating people as family members.

I'm always honored when folks entrust me with their care. And so, that's why I'm writing about it. I'm educating about it, really talking to everybody I can about these Sharia's gifts. Just in honor of her, in honor of the process. But also, there's some really amazing therapies that aren't being put out into the world right now that really people need to know about.

**Dr. Wohlfert:** We can dig deeper into that too because I'm interested in your studies because, again, I know this is a very rare disease. In your research, did you find anything that — again,

because it's such a rare disease, I want to say the tips that you're going to be showing today and helping people with today, would that have helped Shariah and will that help someone in a very similar situation where they have these unexplained dementia symptoms? For example, like what questions because you went through it, too. Shariah is going to these neurologists, going to all these doctors, and I know you're going to be able to help the listener out there even if they don't have this one in a million disease.

**Dr. Eckel:** For sure, yeah. And so, the overlap why I started there is that's kind of what led me in on the research. And one of the things, so one of the main causative agents, for Creutzfeldt-Jakob are prions. These are misfolded proteins. So I have the second edition of the prionic diseases out there. Well, guess what's in there? We have Parkinson's with alphas and nucleon. We have dementia. We have Alzheimer's. We have multiple sclerosis. We have possibly anxiety as well linked to prionic activity.

So that's coming out of a lab in UCSF. So we have a lot of neurodegenerative states that may be as a causative agent, these misfolded proteins, which when you look at neurodegeneration in general, there's been no major breakthroughs. And so, why? Maybe we're looking at the wrong things, and maybe these prions or misfolded proteins are an underlying source of the dysfunction.

So that is one. The second component — so that's the linking as to well, right, docs. This is a great interview, but I don't have that, and it's very rare. Why do I need to listen to this guy? Well, here that's a very big underlying component. And then on top of that, you have questions to ask your neurologist. So what I see every day in my practice is folks come in, they get their diagnosis, let's say it's Parkinson's, and they get parked in the motor neuron disorders or even anxiety. And so, here's the meds. Now you're parked there. And then that's basically your label. Sorry, there's nothing we can do for you. You're either biochemically



imbalanced that you need this drug and anxiety or for Parkinson's, you need carbidopa-levodopa, but it does nothing to address the underlying root cause.

So questions that I am asking and I'm kind of educating people is well ask your neurologist. Do they have a plan for your nutrition? Food is our best medicine. It is the information coming in for our bodies to heal themselves. So we need to really address diet and nutrition to get complete care. The second one is your neurologist recommending any exercises? Exercise increases your circulation, gets blood flow flowing. Well, what travels in the blood? The healing properties of your body.

And there is clear research in Parkinson's in particular around exercises slowing the progression of that disease. So those are two main questions that I say, hey, you got to ask your neurologist and if your neurologist doesn't have a plan, like, oh, the diet has no influence, exercise there's no evidence, well, they're not up to date on the research. Basically, I want to provide some hope and let people know, let your listeners and viewers know like there are things that you can do now that you may have not implemented yet to really help move the needle for you to get back to wellville or have your body heal itself because I am seeing it day in and day out in my clinic.

**Dr. Wohlfert:** And I'll follow up with this as you said if your doctor isn't up to date on the research, on a diet, and exercise and all the other lifestyle healthy habits that we can have that will help our brain health — sometimes it's even not up to date on the research. I'll flat out say, I mean, just common sense. We know we got to sleep. We know sleep is important. We know healthy organic food is better than chemical-laced stuff that they intentionally put in it and stuff that's sprayed on it inside the processed carbs and processed fats.

So it's more of if your doctor says that, again, that's fine. They won't say that's fine. They're not trained in that. That's why we're doing

this summit. That's why you've done the Brain Degeneration Summit to help bring awareness so we can help bring this to everybody out there. To hundreds and thousands of people. So yes, we want to have common sense as well as the research.

**Dr. Eckel:** Right. Totally.

**Dr. Villanueva:** And implementing and teaching this different type of approach, which all three of us do, why don't you give a comparison to the listener of what a typical assessment is in the traditional model versus what type of assessment that they're getting when they see a functional specialist who works with brain disorders.

**Dr. Eckel:** Yeah. In regards, so a lot of the neurologic or neurodegenerative states, there is no laboratory testing. There's not imaging. So for Parkinson's, for instance, it's a clinical diagnosis. So there are some criteria. In particular, you're looking for the tail-tail signs of dyskinesia slowing of the movements, one-sided — it's not at the central — one-sided tremor. And some speech difficulty can also be put in there and then the stutter-step gait or walk.

And if somebody comes in, usually, it's a tremor that starts it. Occasionally, you'll hear about the story of Alan Alda of MASH Fame. He went in after reading an article about Parkinson's. He woke up kind of hitting his wife with his pillow. And he was in dream state thinking it was a sack of potatoes and he was getting some invader he was kind of fighting against.

It was his wife in bed. He had his pillow. He said, "That's odd. I've never done that before." It's a kind of recurrent theme for him. He went in and got checked out. And actually, that can be a really early sign of Parkinson's. Also, the sense of loss of smell sometimes can take people into the neurologist. So it's cranial nerve one, the olfactory nerve, it can show if you're not smelling properly and there are some smell tests that you can do now that are early screening measurements for



neurodegeneration. It means like your brain is actually not functioning well, and you're losing brain cells because you lost your sense of smell. Now, there are some other causes of it, like a zinc deficiency along those lines. So it doesn't have to be this life sentence of neurodegeneration, but that's an earlier sign as well.

And then the third early sign is constipation. So super common in our society, but it can also be an underlying issue around neurodegeneration — up to two decades before you develop any central nervous system degradation. So that in a traditional realm or conventional land, those three early signs are just coming on board, but then it's a clinical diagnosis. And then once they get diagnosed, here's your carbidopa-levodopa.

If that drug worked to limit or calm your tremor down, well, then by golly, you have Parkinson's disease. That's the diagnosis as if the drug — and the drug doesn't cure it. It's just a symptom-based approach that typically will wear off about five to seven, eight years after use, and leaving people in a much harder spot to get out of, at least I've seen clinically. Much harder to get them out after the drug therapies have worn off.

To then this new approach, which is a functional medicine approach, which is we treat whole people moving through time and space. I like to say we treat heart-centered beings moving through time and space. Well, what does that mean? Well, we're assessing all of the different facets of what it means to be human. So, in particular, for any neurodegenerative state, heavy metal testing is essential.

I have actually a patient coming in this week, Dennis, his wife, proclaimed two weeks ago, "I have my husband back." He had early MCI, mild cognitive impairment, early signs of dementia. We found he had a heavy metal burden. We started chelation therapy, and he's able to hold conversations longer. His memory has improved. He's more witty, more sharp. This is coming from his wife. So she really loves him. And so, having

that she's like, I have my husband back.

There's such excitement because otherwise, it was just this death sentence right into dementia or Alzheimer's, like basically losing your loved one where they don't remember you. And it's just not the same. You still love him, but it's just not the same relationship that you can have. Heavy metal testing, all of us in North America, have a heavy metal burden in our bodies. Is it causing you your health issue?

And so, anybody with brain dysfunction, neurodegeneration, I got to put that in there because that's a stone we could turn that over and really make a major impact for people. The second area of testing that I really think everybody should get with a neurodegenerative state is stool analysis with checking the microbiome. There's so much research coming out on the microbiome — our gut bacteria. If we remove that, we'd have like four to seven pounds of aerobic and anaerobic bacteria.

It's a little bit gross when you put it that way. Like that's like a small baby of bacterium, that's the visual. But it's very important for your health and your neurotransmitters. We know our stomach, our guts are the second brain, so all of our neurotransmitters are being manufactured there. So that's very important for brain health. And then the third area that I really think everybody they're missing is on hormone testing and looking at your stress hormones, estrogen, progesterone, and testosterone for men and women. So for both genders, looking at that because those get balanced at the hypothalamus level, a very high functioning component in the brain looking for the homeostasis imbalance in the body.

So those are three big areas of testing and assessment that I think everybody with neurodegeneration should get because then you can really start to balance out the being. That dynamic being moving through time and space, we can get a lot of information.



**Dr. Wohlfert:** I mean, I think you'd probably recommend this for even early signs, but definitely if they're in a state of neurodegeneration, they've been to multiple doctors, multiple neurologists, haven't seen any results. Would you do something else and like, for example, if maybe they decide not to do it? I would think at that point, all right, we're going to do everything we can. Alzheimer's, dementia, Parkinson's, all these things scare the crap out of me. I want to make sure I don't end up in that position.

But let's say they're having early signs of just memory loss, that brain endurance isn't there. They can't think as clear. If there's one of those that you're like, all right, let's do that test, or they say, well, I can't even do that, do you have them start on the FAN-C approach, which we'll get to as more of therapy because underlying we know more than likely there is some level of heavy metal toxicity? There's some level of infections or dysfunction of the microbiome.

**Dr. Eckel:** Yeah. Well, two components in that. One is that statement of get used to it. You're getting old. When we lecture, and we talk to people out there, there's such that pervasive like, oh, it's just a senior moment. Or we kind of joke about it, but it's like, no, that's not normal. That is not normal aging, and that should not be occurring. So what happens, and what we've done societally and why the numbers for Alzheimer's are freaking through — one in two people by the age of 65? That's a criminal number.

And we know levels of toxicity are definitely adding into that because we can actually pull people out of that. We've had cases of significant Alzheimer's to women getting their driver's license back. From clinical diagnosis of severe significant Alzheimer's back to getting their driver — That's not supposed to happen, right?

But if you go just conventional route, that's what happens. You get parked, and we're going to watch you decline either quickly or slowly. So

that's where these testing come in and really, I stress like it, test don't guess. I totally get it. Like a lot of times, people are like, well, how much does all that testing cost? But how much does it cost you not to have your brain? Like we're talking about our health, our functioning, and our — basically, everything.

And so, without that, it's a very small investment. People are spending more on their TVs than on what that level of testing is. And so, the TV is mindless entertainment, but it's entertaining this brain. So if you don't have your brain, you really don't have anything. And so, when the numbers are 50% by the age of 65, so this is like the 30s, and 40-year old's really listen up. Like this is the time to get your act together. 60, 70, 80-year old's, it's not too late.

I have 90-year-olds that over a decade of care from 80 to 90, they say they're in better shape at 90 than they were at 80. So do not limit your body's healing ability because your mindset says, well, I'm old. It's just like this. I saw my parents were like that. Now I'm like it. So to get on, testing really is crucial. Like, yes, I'm going to share on end is the nerve health and nutrients and things like that. However, they're not as effective. If you have metals in there, you got to take care of that because it doesn't matter what kind of FAN-C new therapeutic we put on top of that. You're just building on quicksand.

And so, really finding and uncovering the underlying imbalance is really crucial. So that assessment really is a very essential piece of this thing because you can be taking some supplements that you're just either throwing fuel on the fire or two, it's just going to quicksand. You're just not able to move. And then I see those people too that they've taken well-researched supplementation. These are all the great nutrients for my brain, but nothing's happened. It didn't work. It's like, well, let's test you. And it's like, oh look; you have an opportunistic bacteria in your gut.



You don't have gas or bloating or digestive issues, but you have an imbalance of your bowel. Have you ever taken antibiotics in your life? Oh, you had ear infections as a kid, and you were put on multiple rounds of antibiotics. Well, that screwed up your whole microbiome for the next three or four decades. You built your palace on really rocky ground, or I'll just stick with the quicksand analogy.

**Dr. Villanueva:** Yeah. The segment of mental healthcare is the only specialty in medicine that is not systems-based. It's not evidence-based. There's no data-driven methodology behind it. And people who have mistakenly bought into the lie and the deceit that, oh, well, this is a part of aging my mom had it, my dad had it. Or I'm 49 like I guess this is a part of it. I'm just going downhill from now. It's BS, people. Like, wake up. There are answers, and there are solutions, and there is a lot of testing that can be done so that you can see and even at a much earlier onset before it's gotten really bad.

So that you can see what road you're heading down, start to understand, oh, this is why I've got some of these symptoms. And then you can start taking appropriate measures so that you can actually fix the problem. I'm so glad that you're talking about these different tests because Dr. Wohlfert and I are talking all the time about the different tests out there and what they're looking at and why we like to order so many different labs so that we can uncover all of the stones and find all the possible variables that could be contributing and compounding on top of one another to actually lead to these issues. They're totally reversible.

**Dr. Eckel:** Yeah, I love it.

**Dr. Wohlfert:** And I think that leads perfectly into when we get the results of these tests. I know I have a system. I've shared that with both of you — the six-pack of healthy longevity. I know Dr. Elena has a system. Well, we're here to learn about your FAN-C system. And the first time I heard it, I had

to see it spelled out. I'll let you explain it because it's fancy. So go ahead. Go over that.

**Dr. Eckel:** Yes, fancy. Super fancy. So the F is for functional medicine, which is what we've been talking about. The A was the assessment. The N is on nerve health. So we're going to cover some nutrients specific for nerve health. And then it's a dash C. The C is for cellular and regenerative medicine. So the stem cell therapies, exosomes, neuropeptides, et cetera.

And also, we've got hyperbaric oxygen and Photobiomodulation. Say that five times real quick. But we'll talk about nerve health to start. So the N in the FAN-C approach. One, when I went to medical school, we did not even know this system existed, which is the endocannabinoid system. And one of my heroes is Professor Mechoulam. He's the gentleman in Israel that named the system. He named the different anandamide and the cannabidiol, the CBD oils, which people are seeing now all over the place. It's like in the grocery store now.

In Portland, Oregon, we have a whole shelf of CBD-infused products. Who knew? But there are more receptors in our brains for cannabidiol, CBD1, cannabidiol-1 receptors than all of the other neurotransmitters put together. And when I started learning about this, it was like, oh, this is a whole system that's maybe the foundation underlying our hormones because I was doing a lot of functional medicine around bio-identical hormones and looking at the endocannabinoid system and responses to stress, resiliency, and brain function. And so, that is one that we definitely want to look at is CBD oils. They're not all created equal. I would highly recommend to know your source — the old hippy adage of knowing your source. And so, looking at that, that is one thing to consider for sure.

Of course, we've got the B vitamins. B12 in particular for mood, for energy, for clear thinking. B12, you never want to take it by itself, though. You'll always want to take it with folic acid, or I



like the methylated folate or activated vitamins in general because that can mimic or mask other neurologic deficiencies. So you never want to take it by itself. You can measure that as well in the blood. I look at the mean corpuscular volume, that kind of the size of the red blood cell. 92 is the number that I have so people can look at their blood work.

You can also measure methylmalonic acid, which is the breakdown product of B12 in your urine. So you can look at do you need B vitamins in particular in neurodegeneration and in mental health components? I would say yes, you do. So those are two big ones. We also look at specific to the individual. We'll put in homeopathic for mood disorders. We'll put in other nutrients. Like vitamin D is a big player. I think it's misnamed as a vitamin. It really is a pre-hormone precursor and does a lot more behind the scenes, heavy lifting for folks, especially with brain health. So there's a couple right off the top.

**Dr. Wohlfert:** Nice, man. I think we are done. Just kidding. You got to give more.

**Dr. Villanueva:** Now, that was for the nerve health part, right?

**Dr. Eckel:** Yes.

**Dr. Villanueva:** And so, let's now move into the C portion of your FAN-C approach, which is cellular regeneration. Talk to us a little bit about that.

**Dr. Eckel:** Yeah. So this was one of the — never in a million years would I think when I went to medical school that I'd be talking about stem cell therapies. So this was one of the biggest finds with Sharia's gifts. I was looking; I was like, how do we get information into her brain? That's where this thing is happening. We're getting this differential down into some really significant degeneration. And I came across a mountain of research on the peer-reviewed journals. We've been put behind the curve here in the United States. In 1991, they stopped research on regenerative therapies for religious and political

reasons. And so, the rest of the world, though, continued to research stem cells. And these are not from aborted fetuses. This is very ethically derived. That's a big question that people ask me.

I use mesenchymal stem cells. They're from the placenta and amniotic tissue. This used to be just tossed away after birth. Maybe some people will save their cords and plant rhododendrons over them or things like that. But that's very few and far between. Usually, they're just discarded as if okay, that served as purpose. Well, it's a rich source of exosomes and stem cells. And stem cells for your viewers, listeners, there's a lot of talk of that, but I want you to know what they are.

You have them in your body. They're in your fat. They're in your bone marrow. They are called pericytes or next to yourselves until they get activated. Well, what activates your own stem cells is an injury. Injury sends up a little cytokine signaling saying, hey, pay attention to me. Pay attention to me. I'm out of balance. Then your body releases those stem cells, and they can turn into your nervous tissue.

So for your brain that can turn into the brain; they can turn into muscle, tendons, cartilage, bone, the epithelial lining of your gut, cardiac tissue for your heart, liver tissue. So they're called pluripotent. They'll help all of these different tissue types heal. In particular, what I'm using them for is really healing the brain. So what they do, they secrete an exosome. Exo is out of some of the cell. So anti-inflammatory cytokines, growth factors, basically the fountain of youth. It will donate pieces and parts to your innate healing ability, your own intelligence to heal itself. So the analogy I give people is like you get a new conductor to your innate immune system, which is your symphony. Just when you're in a dysfunctional state, your symphony is playing the wrong tune.

So these come in, and you get a new conductor. You get the hot shot coming in, and they come in and reorganizes your healing ability. These things are showing — I've had patients tremors go away,



halt to reverse to no evidence of disease. I've had patients; their speech comes back. Their gait, they get very fluid gait walking. Currently, I've seen it around the immune system and autoimmune conditions as well. Helping people heal autoimmune conditions. For multiple sclerosis, there were 100 cases of relapsing-remitting multiple sclerosis out of England that showed no evidence of disease on MRI after this procedure.

Irritable bowel and inflammatory gut disorders because of the epithelial lining of the gut, these cells will help repair that. So they're not a penny CA cure-all, be-all, end-all. However, it is one of the biggest levers that we can push on people right now today to help their bodies heal themselves.

Now, a lot of times, my patients are saying, well, why isn't my neurologist, or can I talk to my neurologist about this? And I said, okay, what do you think they're going to say? And they say, "Well, I did talk to one, and he said that there wasn't enough evidence." And I thought, okay, he is true. In the United States, we do not have enough evidence for that.

So we haven't had the research because we've had a 30-year lag time. Now there are boatloads coming out. Every week I've got my internet bots searching for new regenerative stem cell research. So it is a growing amount of evidence, but to have the cohorts that the medical establishment needs, we're talking about 30 years. The people right today do not have 30 years to wait for that research. So the first tenant of medicine is to do no harm.

There is sufficient evidence. There's been over 100,000 procedures done using the cell line that I use from a certain company — so again, you want to know your source — with no adverse responses. That's number one. So do no harm. These I have put into my own brain. So I learned about this. I have my wife kind of disappeared into dementia land, and I'm thinking, I got to get these into her brain. I have a bunch of patients in

my clinic with Parkinson's disease.

First patient, I brought it up. I said, hey, there's this exciting new research that came out of the international conference for Perinatal stem cell discoveries. They were treating children that had a stroke in utero. So before they were born, they had a stroke in their mom's belly. Now, these kids were coming out neuro-developmental disabled and dying young as you can imagine having a stroke at that early age. So they haven't really fully developed.

They took the stem cells right from the amniotic tissue, did an intranasal procedure on these children. And low and behold, they improved. They were hitting their milestones. They had full cognition, full thinking capabilities. Like nothing less than a miracle if you ask me. So I took that research. I was like, hey, let's extrapolate that. Let's try it out with some people. First patient said, "Hey, that sounds amazing, doctor. Have you had it done?" I thought, well, you're right. I have not had it done. I need to go get it done. And I do these therapies on myself anyways because I want to know. I want to experience them, and I had to learn the procedure. So it's a flexible catheter that we do intranasally, and we do one unit, about 3 million cells.

And what the research shows is within 10 minutes, those cells are circulating around the brain and the cerebral spinal fluid of the brain. And then they go systemically throughout the body. Well, I had it done. I was hoping, for me, middle-aged vision loss. I wear readers. I have hearing AIDS from a genetic disorder in my family for the man. I was thinking, well, maybe it'll help with these things. At the same time, I had 10 years of chronic hip pain from inner tubing in Colorado with my then six-year-old boy. We went over a little waterfall. Papa instincts are grab the boy. I'm holding onto him, and my hip hit the rock at the bottom of the river. And I'm in the industry. I was doing everything. I was getting chiropractic, prolotherapy, trigger point therapy, physical



therapy, massage therapy, acupuncture, you name it, but for a decade, chronic hip pain.

In less than 24 hours, that hip pain was gone. Like it has not come back. And even my hands, I do this when I tell that story. It's like I didn't even realize that they were swollen until the absence of that inflammation was gone. It was like, Holy cow. So that went into my brain, out through the brain, through the glymphatic and then systemically throughout my body. But then I could come back, and I told Mark. I said, okay, I had a done. Here are my results. I didn't die. You want to do it? And he said, "Sure, hook me up, doc." Now, that's one piece of it. So the stem cell regenerative therapy just by itself is rather potent. But then I was drawing all of these other lines in.

So hyperbaric oxygen therapy, HBOT, you go into a container; you pump it full of pressure, and you breathe 95% pure oxygen. And what that does is it drives oxygen from then the environment into the brain. Now, we have some great SPECT analysis. So these very colorful images of the brain and before treatments they'll be very wholly, very patchy, not lit up, not full brain color. And after a series of hyperbaric, they come back. So this is for traumatic brain injuries. This is for a stroke. This is for Parkinson's. This is for multiple sclerosis. Really a lot of these central nervous system disorders. Hyperbaric oxygen really should be part of the care. I put it in with this my FAN-C approach because oxygen is a great substrate for those cells, those mesenchymal stem cells to do their work.

In addition to that, then we're also doing Photobiomodulation. That's just a fun one to say. That's the pulse electromagnetic frequency, the PEMF, and the low-level laser therapy, the LLLT. It's another red-light therapy. We've seen those out there — great research coming out of Germany on those. There's a cool study down in Tanzania called the bucket head challenge. They're putting LED lights in a paint bucket. It looks very silly. That's just how they are down

there, I guess.

But they're showing some benefits. So that research isn't done. However, there is some really compelling smaller trials going on for different gears that you can put on and use red lights directly to the brain for healing. And then I also include acupuncture because that's near and dear to my heart. That's the framework that I use with everybody — is the Chinese medicine framework. It's one system of care that has been on the planet for so long. We get some phenomenal results with that. So that was a mountain of info.

**Dr. Villanueva:** I was wondering about peptides.

**Dr. Eckel:** Yes. So then there are peptides. Yes, there's more, but wait, there's more. Peptides right now, there's a lot of evidence. I put them in the exosome category. These neuropeptides come out of the exosomes, out of stem cells, et cetera. And so, depending on — there's some nasal inhalers that we can do. We can do injections. We can put those in IV as well. And there's a different array depending on kind of the genetic platform of somebody coming in, what's been going on with their family history, and then what their current symptomatology is. We'll put those in as well.

**Dr. Wohlfert:** Wow, Holy cow. I'm going to have to re-listen to this one too. That's okay. That was amazing because yeah, stem cells it's a buzz term, a buzz therapy, that's over the last couple of years — athletes going overseas to get stem cell therapy and coming back good as new. And one question I have is, okay, you do the stem cell therapy. You regenerate the tissue.

Now, I'm assuming you still — let's say you go back and you only do that. They still have heavy metals. They still have toxicities. I don't want to say how long will that last, but have you seen, one, people who have changed their lifestyle, their sleep, their nutrition, their exercise, or at least on that path and journey, are they responding better than if you just did the stem cell, or do you



only do the stem cell if you're like you have to be committed to the rest of the plan?

**Dr. Eckel:** I only do it that way because it's really doing a disservice to people. There are plenty of clinics that will just inject people and say, see you later. And I get into those conversations with patients all of the time, like, look, you can go to their clinic. Yeah, it's not as much of an investment, but they're not in it for the long haul here. Like, I want your body to heal itself. So that's all of the facets. And that's where, again, I go back to the assessment. We got to take care of that stuff because if they're a smoker, I'm not going to do a regenerative stem cell therapy because the smoke is going to damage that. That's the biggest needle you can move for your health to stop smoking. We'll help support you there.

If you have uncontrolled diabetes, that's not a starting spot. We got to get diabetes under control, especially for brain health, because those sugar imbalances and insulin spikes are damaging to the brain. We call Alzheimer's kind type three diabetes at this point because of the sugar influence is on our brain health. I will work with somebody. It's not just my way or the highway, but they've got to be in the game working on it.

And if they don't get that, the value of doing that, then I've done a poor job of educating because it really is on me to let people know like, no, we got to take care of this underlying foundational stuff like diet, sleep, hydration — the non-sexy stuff. But it really is that essential for all of the rest of this. Again, I'll go back to the quicksand. It's like we could give you this FAN-C really cutting-edge therapy of stem cells, and it not work very well because your body was just not receptive. That's why your body wasn't healing in the first place.

**Dr. Villanueva:** No, that's absolutely true. I work with many practitioners around the country who do stem cell therapy as well, and we've had many discussions around how important it is to take care of the foundational issues because if you don't remove the environmental toxins,

the heavy metals, change your lifestyle, and do things that are beneficial for your body's healing abilities, then you're totally wasting your money to do anything with stem cells. And so, I feel like any doctor out there who's really wanting to help their patients, they're not going to just do stem cell, but unless they make sure and ensure that that individual is taking the steps that they need to take so that they can get the best benefit from that.

**Dr. Eckel:** Yeah. All too often in the orthopedic world because the orthopedic docs are doing these procedures, but they're not trained in nutrition. They're not trained in functional integrative medicine. And so, they kind of poo-poo it and discount it and it's like, all right, well, let's just look at the numbers of what's the results I'm getting out of my clinic versus out of your clinic?

Because I'm seeing the patients that they've done some either PRP or stem cell procedures on, and then they're coming to Nature Cures Clinic to actually get the full deal because they know these cells are supposed to work. So what was the limiting factor? Well, they didn't have any of the other foundational work in there to really set the stage for success.

**Dr. Wohlfert:** Yeah, and I mean, you've given so much already, so I thank you for that. And one of those foundational things that I want for like an action step, I want you to take our listeners through if you can, and us as well is this limbic breathing technique because that helps with stress. It's a form of meditation. Just breathing in general. I would love you to give that foundational technique strategy that you do with your patients if you can do that.

**Dr. Eckel:** Yeah, so this is one on our fight or flight stress response. So a lot of times on the hormone testing and not a lot of times. I would say a majority of the time, there is a cortisol imbalance of stress fight or flight stress response. And so, the limbic breathing is one of those techniques that I've discovered that can really just slow down



our whole process.

So I'm going to pull it up here, so I don't botch it on for viewers and listeners. But it just involves like — it's a therapy that you can put in today no matter what's going on. If you have stress, anxiety, depression, chronic pain, et cetera, this is like a great technique that you can put in. So do you want me to walk it through, like talk it through now, or do kind of an abbreviated version?

**Dr. Wohlfert:** I leave it up to you.

**Dr. Eckel:** I think we can do it, too. Well, we can all do it together here. Yeah, so here it is. So limbic breathing. So go ahead and sit comfortably in a chair with your spine straight and your feet flat on the floor. Place both of your hands on your belly and imagine filling your abdomen with air rather than your lungs. So as you breathe in, your hands will go out off of your belly. Now, when we were kids, we used to do that all the time. When you watch little kids breathe, but now adults, we all kind of hold our core. So we don't want to show our belly or our guts, but nobody's looking, I promise. I can't see through here.

So do that. Your hands should rise and fall, and only your belly should be breathing or should be moving during the inhalation and exhalation. So draw your attention inward. Listen to the sounds around you. So as you breathe in, hands are rising. Breathe out; hands are going down. Maybe you hear the air passing through your nose and just start slowing your breathing down about three to four breaths in and out.

Now, try to achieve an inhalation that lasts five seconds. So we're going to do it in one, 1000; two, 1000; three, 1000; four, 1000; five, 1000. Hold your breath for two seconds, and then breathe out. You're going to go to 10: one, 1000; two, 1000; three, 1000; four, 1000; five, 1000; six, 1000; seven, 1000; eight, 1000; nine, 1000; ten. So then you're going to keep doing that. So breath in of five seconds, hold your breath for two, and then out for 10. So longer on the exhale.

What that longer exhale does — basically, when you're doing that deep belly breathing, you're pulling on the diaphragm, which pulls on cranial nerve 10, which is your parasympathetic activity, putting your body in a deep state of relaxation. And that one, I would say do it at least twice a day is a great start on that one, but it will — Did you notice any changes in your state while — we only just did three breaths, but did you guys notice anything with that?

**Dr. Villanueva:** Oh, absolutely. I totally noticed it. When I opened my eyes, I just felt a lot quieter. Just everything was just like came down a couple of —

**Dr. Eckel:** Yeah, just everything down here. That was just kind of going up there. Now we're like, oh, we're actually way more grounded. We're calmer. We pulled on that cranial nerve 10 and really put our system at rest, a regenerative state. So that's a great way for our bodies to heal.

**Dr. Wohlfert:** So I get two tips there. Let's say you can't get to that five and 10 right now because you haven't done that in a while. You forgot how to breathe essentially. Don't let that be a reason to not do this. It doesn't take any time, or it takes a minimal amount of time. It takes no money to do it, start it, four and eight or three and six.

**Dr. Eckel:** Yeah, whatever those are.

**Dr. Wohlfert:** And one other tip is sometimes sitting down or standing up is harder to do it, so either lay on your back. I mean, I found that easier to do as well. Lay on your back, put your hands on your stomach, just like Dr. Eckel said, and you can feel better. And then the exhale is easier as well because it's bringing it down. So those are just little techniques that I've found over time that help to get that deeper breath.

**Dr. Eckel:** I love it. Yeah, that's great.

**Dr. Wohlfert:** Man, I tell you. You went over a lot here. Holy cow. I hope the listener can go back through this. I know you can go back through this.



Dr. Greg is just a — I mean, I just think he's light. That's what I think of — just a light of a person where I love talking to him. I love being in his presence because it just lifts me up because he has done something. He's taken a tragedy and created something great out of it. We can all do that.

I don't know how many times the listener you have had what you'd call a tragedy in your life. Sometimes we think it is. We think it's something tragic, but actually, it turns out to be a blessing — just like he calls it Sharia's gift. That's what she's given to him. I can't thank him enough for being here. I know Dr. Elena can't thank you enough for helping the listener with not just information, but actionable steps, especially that limbic breathing, anybody can do. Talking how important the FAN-C approach is.

Functional, Assessment — Assessment is key to find out what is your body — what is inside your brain? Is it chemicals? Is it pesticides, herbicides? We didn't even talk about that. Is it heavy metals? Is it all of them? Is it infections because that's going to limit your ability for your nerves to heal for those therapies that he described to actually provide the benefit because you want that foundation? So thank you so much, Dr. Greg. This is going to be great for our listeners, and we love having you here.

**Dr. Eckel:** Awesome. Thank you, guys.

