

## Radical Remedy - Dr Nasha Winters

0:00:00 - Chloe

Hey guys, it's Dr Chloe and you're listening to the Radical Remedy Podcast. Today's episode was truly a dream come true for me. It is a conversation with the one and only Dr Nasha Winters. So Dr Nasha is truly a force to be reckoned with. She is a global healthcare authority in integrative oncology and a pioneer in personalized medicine.

With over 30 years of experience in the medical field, Dr Nasha has dedicated her career to transforming the way that we treat cancer. She is the co-author of the bestselling book *The Metabolic Approach to Cancer*, and she has been instrumental in educating both patients and practitioners on the power of a holistic, systems-based approach to health. Truly, her work is beyond brilliant, and so is her energy, enthusiasm and drive, and it was such an incredible honor for me to get to have her on the podcast and share her wisdom with you. Please let me know what you think of the episode. Please share with somebody that you love. We all know people who are dealing with a cancer diagnosis right now, as the rates are just absolutely skyrocketing, so please share this episode. I think it brings a lot of hope and possibility and potential for joy and lessons in this journey to anybody who is going to listen to it. Let me know what you think.

Please like, share and comment and leave us a review. It means the world to me, Thanks so much. And comment and leave us a review. It means the world to me, Thanks so much. All right, everybody. I am so incredibly excited and honored to have Dr Nasha Winters here today. She is one of the most badass practitioners out there. She's changing the face of oncology and it is so needed, so necessary and so incredibly great. So thank you so much for joining me today, Dr Nasha.

0:01:47 - Nasha

Oh my gosh, what an absolute joy. I think it's. We were talking about offline here. Badass-y, both directions, so bi-directional, badass. Really fun to be here with you and your listeners. So thank you.

0:01:59 - Chloe

Bi-directional badassery. I love it. So I mean, cancer obviously is such a huge conversation and such has one of the greatest impacts on our society and our mental health of any disease and illness that I can think of. I actually got into Chinese medicine because my best friend's mom had had metastatic cancer and she took me to get acupuncture to quit smoking cigarettes when I was in high school, and she took me to get acupuncture to quit smoking cigarettes when I was in high school, and so she had used acupuncture and Chinese medicine to support her journey through cancer and she lived for like 10 years with incredibly good health and fought such a wonderful, beautiful fight and brought so much love and light to the world for the entire time. And then, once I started studying Chinese medicine, learning about it, I was like I want to do an integrative oncology clinic, and so I've studied cancer for quite a while.

Life took me in a different direction with my son in terms of what my focus is medically. But, man, is it such a complex and necessary thing for us to be diving into the underlying foundations of how we are developing cancer at such increasing rates? I would love to hear a little bit about your story. I know you've shared it so many times, so I'm going to try and not have you repeat everything you've said on so many podcasts, because, if you're listening, dr Nasha has been educating and empowering people for years, so please look up all of her other podcasts as well as her podcast, which is phenomenal. But I would just love to share a little bit of your background, because it's quite a remarkable story.

0:03:30 - Nasha

Well, thank you, and you know I think that's I mean. None of us are here. You and I aren't here having these conversations because we thought this seems like a really interesting career choice. That's not how we landed here, right? Life took us on this journey, life took us on this path and, as cliché as it sounds, it's a good pain to purpose story here. And so I don't even know like, when I talk about this story, I think people go oh, you were diagnosed with cancer at a very young age.

I was, but my health issues started in vitro. Like I, it started long before that. My mom had a stillbirth right before she got pregnant with me. Imagine just being bathed in the trauma and the loss and the grief and the fear of that, of carrying a baby to full term and then knowing in the last few days, weeks of that that something was terribly wrong and everyone ignoring her right and she knowing something's not right. And so you know, I had to be forced to give a natural delivery to my sister, who made it all the way through until the last window, and so to get pregnant again with me. There's already an essence there, you know, and I know you being in the Chinese medicine background, you understand sort of the kidney essence, the kidney jing, all the things that were impacting that, fear being one of the biggest areas that affects the kidney. So I was like stewed in the fear of that plus stewed in the fear of the whole trauma of my living situation Lots and lots of trauma, addictions et cetera there.

So when I talk about my health it didn't like start like I went to bed one night, woke up at almost 20 years old with cancer. It started long before that and I had many health issues. So by the time I was actually diagnosed they'd missed it for many, many months because they thought it was just more of the same. They thought it was just worsening of my IBS, worsening of my endometriosis, worsening of my polycystic ovarian system, worsening of my juvenile mid-toyed arthritis, worsening of my polycystic acne, worsening of my chronic pain patterns, chronic digestive issues. The pediatrician told my mom when I was an infant and a toddler that me pooping once a month was normal, because it was just my pattern, like just to give you examples of how normalizing being sick is today and was. Even back then I didn't think I was sick and I just went through a whole list of all of my diagnoses and the pharmaceuticals that were thrown at it, starting at nine Well, actually before that they put me on gas, sex pills and things as a toddler, and then on birth control pills at nine because I started menstruating at nine. Stronger pills at 11 because of my severe endometriosis diagnosed with all these other things. I just kept layer caking it.

So by the time I ended up in the hospital, a roommate brought me in near death. That's when they finally did the proper workup, instead of thinking it was more of the same or that I was just a histrionic teenager. And lo and behold, I was in end-stage organ failure with stage four end-stage ovarian cancer, a grapefruit-sized tumor in my right ovary liver, metastasis, peritoneal implants, carcinomatosis everywhere, full, full belly of ascites, which is a malignant fluid in the abdomen, concerning nodules in my lungs, full-on fluid around my heart and lungs, so into a whole cardiac tapenade place, 100% bowel blockage. Extreme, extreme, extreme malnourishment. How the F do you miss that right? And so instead, for months leading up to that, I kept going to the every other week just saying help me, help me, help me. And they just kept writing more scripts for anxiolytics and antibiotics and antifungals because of the crazy yeast infections that the antibiotics caused, and just the things right, it was just the layer cake.

So there we are. That's where it all began, and I was given. When they finally figured it out. This was in the few months or a few weeks before my 20th birthday in 1991. The official diagnosis didn't come in until October 21st of 1991. So it just took that long in small town America to get biopsy results and information back. But they knew on imaging, they knew on CA-125s, they had a pretty good idea of what was going on, and so by the time it was official though, October 20, October 1991 was my official diagnosis. So here we are, nearly 33 years out from a terminal diagnosis. They didn't think I'd get to see 1992 come to be, so here we are.

0:07:50 - Chloe

Wow. It's incredible and it taps into the reality that so many people are not being listened to by their doctors, and this is something I'm sure you and I hear all of the time. And I'm starting to step. I just launched a new line for women's health and regulating women's hormones with Chinese medicine, and so I've been diving into women's health and hormones and all I see are all these stories of women who are going to their doctors and being dismissed as histrionic. Also, as a mom of a child with special needs, all I hear are other moms going to their doctor saying there's something wrong with my kid. Also, as a mom of a child with special needs, all I hear are other moms going to their doctor saying there's something wrong with my kid and the doctors are like oh no, it's just a histrionic woman. Get rid of them. You're just like freaking out and it's just mind-boggling.

So I always tell my patients I'm like whatever you tell me is going on in your body, I will believe you like point blank. I might not have the answer, but I believe that what you say is happening in your fucking body is fucking happening, like it's just so heartbreaking to me and it leads to such a catastrophic event like what you dealt with, wow, I. So now you have gone all over the world and have been teaching people about your Terrain 10. So tell me a little bit about how you've sort of developed this system and what you're bringing forward and what some of these things in the Terrain 10 are like. Which one's the first one that you looked at?

0:09:21 - Nasha

Perfect. Well, you know one of the things that was happening for me back at that time of my diagnosis I was pre-med. Perfect. Well, you know one of the things that was happening for me back at that time of my diagnosis I was pre-med. So I was starting my sophomore year in college when I was diagnosed and I was really, really fascinated already with medicine, biology in general. But at the time of my diagnosis I actually switched my major from biology and chemistry to biology and psychology because something in me knew, something in me knew that the trauma of my childhood had to have played a role in this.

And I don't even know how to explain that, because back in 1991, that was not a conversation that was being had it's barely a conversation being had today, but something deeply intuitive spoke to me about that, and so the first book I picked up after I was sent home to die was a book by a very unknown person at the time, this crazy guy named Deepak Chopra, a book called Quantum Healing right. And I sat down and inhaled that book, which took me on a journey of looking into the work of people like Robert Ader, Candice Pert, Bruce Lipton Now Bruce Lipton's name is almost a household name today, but his book did not come out until 2011. But his research had been happening since the 70s and 80s and I stumbled apart his research, Candice Pert's research and others in a field known as at that time coined by Dr Robert Ader psychoneuroimmunology, and so I switched my major from a biology chemistry to a psychology major with a biology minor into basically a self-constructed psychoneuroimmunology. Somehow I knew my trauma played a role in this and that put me into a deep level of curiosity of maintaining that. So that was one big step. That I learned along the way is don't underestimate the power of our emotions and our traumas and how they impact our health. If I'd started my book with that the Metabolic Approach to Cancer with that conversation, people would have closed that book and put it down and never picked it up. So that's why it's the 10th drop in the bucket, because it was the. To me still after 33 years, it's still the most important drop in the bucket. But for a lot of people you have to navigate towards that very delicately, very carefully, and so the tangibles are where we like to start, and so the tangibles for me back at that time were things around this metabolic nature.

So because I had a bowel blockage. I couldn't eat, and my diet leading up to my cancer was beyond atrocious. It was full-on college ramen noodle. I was about to say a cup of noodle,

easy mad, gluten on gluten. It would still take me a few years to learn that I was celiac. It would still take me more years to learn of my other genetics that played a role into this.

But like then and then before that, all through junior high and high school, I worked at hot dog on a stick, and I was. I came from extreme poverty and so my square meals were hot dog on a stick and cheese sticks. When I became vegetarian at 16. Great, I just stopped eating fried corn dogs and just ate fries, cheese, fried cheese sticks instead and gallons of cherry lemonade. So sugar on sugar on sugar. So it was basically diabetic at 19.

And this accidental fast I had to do for two and a half months I couldn't eat because of a bowel blockage. That was probably one of the first strategies that saved my life, and it's also one of the most powerful strategies we have in oncology today. And we can even look back to data as early as 1909 from Dr Moreschi, who showed that fasting alone could debulk tumors faster than just about anything. And so here we are, a therapy that is free and available and accessible by all, and I accidentally stumbled upon it.

So there was a tangible right, and then some of the other tangibles was just starting to learn about the patterns in my body, to start to learn oh, it wasn't normal to poop once a month.

Oh, it wasn't normal to have chronic pain. Oh, it wasn't normal to have skin flares and all kinds of these other and digestive woes. And so that's what started curiosity of eliminating things from my diet and from my lifestyle and starting to learn more about what was going on with me. So these are the stories that led to me starting to understand for myself patterns that were driving my process, which then taught me, as I later ended up in medical school and later in private practice, to look at other patterns that accumulated for other people's process, and that's what culminated in this Terrain, 10. And that's you know there could be more than those or less than those, depending how you look at it, but for me that filter was through these 10 major drops in the bucket that impact whether we have health or disease. And so the first one of the drops, if you want. Do you want me to launch in there or do you want me to take a breath?

0:13:52 - Chloe

No, go on it, Like don't breathe, Don't keep going on it girl.

0:13:56 - Nasha

Drop number one is epigenetics, so above the genes. So these are things that were passed down from generations, but they're not genes that are stuck in cement. Okay, they're dynamic and they are 100% dependent on our personal input. Our diet, our lifestyle, even our thoughts impact how these genes express. So that's one of the big drops.

So understanding where you came from is important, but understanding that you have the power to do something about it is just as important, if not even more so. So what if everyone in your family had cancer or cardiovascular disease or mental illness or addictions or whatever the label is? You can change it, you can override it, you can change how it expresses, right? So that was one of the biggest things I learned right away in my own process was to understand there were patterns at play here that went back long before I ever was even an apple in someone's eye, right. And then, as I've gotten older and learned even more and more about my family of origin holy God, I mean it's just incredible what repeats itself. Generational trauma is real and you can be the person where it ends, and that's how it's been for me.

And so the second one is the metabolic drop, which is what do you fuel yourself with? You know? Are you giving yourself, you know, good quality, clean, high octane stuff? Are you giving yourself the cheap, you know high lead containing gas in your gas tank of your body? And so that was the first. You know we were poor so we lived on basically the most cheapest, most

processed food imaginable. I worked in fast food for years. That was my main intake. I was on lots of pharmaceuticals that impacted my nutritional uptake. You know birth control pills are one of the most harmful to our methylating nutrients out there.

0:15:54 - Chloe

And your microbiome too, as well as depleting multiple different vitamins and minerals which nobody ever tells anybody about.

0:16:02 - Nasha

Well, whatever tells me, and of course, these layers, layers, layers of antibiotics, antifungals and all things have just destroyed it even further. So that fuel source. What are you feeding your body? And most of us are giving ourselves too many carbohydrates. So, as an example, we evolved from about in the 1850s, before the industrial food revolution, we were averaging about five pounds of sugar per person per year. Today, depending on the studies you look at, we're ingesting between 145 and 175 pounds of sugar per person per year. That's a big jump in a very short period of time, and our bodies haven't adapted well to that. Right, that's putting it mildly.

The third drop in the bucket is environmental. I mean, this is what you and I were talking about offline, when everyone's scratching their head saying gosh, I don't understand why. I know four people right now with kids with genetic disorders, or every other person on the planet today. Literally one in two people will have cancer in their lifetime. How is no one saying why? And they are saying why, but they're making things up like oh, it's just because we're doing better earlier diagnostics. No, no, we're not. That's not the problem, or you know, or it's just genetics.

0:17:12 - Chloe

I'm always like do you understand how genetics work?

0:17:16 - Nasha

Crazy. It's crazy, making so the world we live in today. It's no longer. If you have toxicity, it's how bad is it and how does it interface with all of the other drops in your own bucket? We all have very different thresholds. My husband loves the smell of diesel. I get immediately nauseous and a horrible headache at the smell of diesel. You know he can walk through and snort the aisle of Home Depot all day long. I can't even walk down the cleaning product aisles of grocery stores without getting violently ill. Like we all have a different threshold, right? I was born without certain glutathione snips, single nucleotide polymorphism. So my body literally does not have the ability to clear out the exposures without me helping it do so. So I'm missing major genes that helped me take out the garbage. So I have to now take out the garbage myself. I have to help my body do that. So the toxicity is a big drop.

The fourth one you already alluded to it the microbiome. A few years ago people were still poo-pooing, and I mean that pun intentionally. Microbiome had anything to do with anything. Today, because we can monetize it by giving people expensive shit implants, we can now talk about the microbiome as something really powerful in the tool of all types of treatments of chronic illness, including cancer. We now understand that our pharmaceuticals will only work with a certain microbiome fingerprint. We understand that our neurotransmitters will only work with a certain microbiome fingerprint. We understand that our hormonal communications and endocrine function will only work with a certain microbiome little fingerprint.

It's people like Hippocrates who said all along, the father of modern medicine, saying all disease starts and ends in the gut. Well, it's the gut specifically, it's the microbiome. And the microbiome goes beyond our gut. Even organs of the body, even tumors, have their own microbiome. The breast tissue has its own microbiome, the breast ducts have their own microbiome, the vaginal canal has its own microbiome, the skin, the lymphatic system, like.

We're learning now that this guy is a pretty big player and we spent the last 70 years or so destroying the microbiome of the planet, which in turn destroys the microbiome of us. We have monocropped the planet which has monocropped us, and diversity in our microbiome is the fountain of youth. It is our resilience to all things disease centric and it is a key player to a lot of these conditions, such as autism, neurodivergence, genetic expressions. So we're learning that it's a key player.

The other drop in the buckets include things like the immune system. If you've lived under a rock for the last few years, you might have learned that we had this pandemic. No one's taking a look at that. We don't have functioning immune systems anymore. We've been suppressing fevers for the past 75 years, which is our first, first line of defense of really tuning up, toning up our immune system to function properly, and we've taken that powerful tool away from our body by suppressing it. And we use suppressive drugs like acetaminophen, which is the worst mitochondrial disruptor on the planet and it's available like M&Ms over the counter everywhere. It's the first thing we tell parents to do to our most vulnerable population to immediately lower their fevers. And yet in doing so, you have now set these kids up for studies showing much higher incidence of things like leukemia lymphomas if kids are put on these fever suppressing medications before the age of two. The over cleanliness there's, that microbiome.

Discussion again of our environments, all the handy wipes that we've done, all the things here. This has impacted our immune system. Our immune system depends on three things Recognition, so saying hey, there's something weird here. Response, saying I know what to do about it. And remembering, which is I know what to do if I see this again. So if it saw something new, it'll now know what to do with it later.

Most of us are walking around with at least one, if not all three of those not working anymore, and this is what leads to so many of our health conditions today either autoimmune issues on one end of the spectrum or down to extreme cancer processes, which is a complete loss of the three R's at that point and that is the way we actually treat and prevent cancer is through our immune function. Now, on that immune piece just to throw this out, since we're talking a little bit about cancer, the man who got a Nobel Prize for checkpoint inhibitors a few years back in immune treatments for cancer. He was shunned and ridiculed and blackballed for decades from his work on the immune system and cancer. But as soon as they could monetize Keytruda, which is a multi-billion dollar a year drug, now he's the best thing since sliced bread and has won Nobel Prizes for it. The irony of it is just insane to me. We're seeing the same thing in the microbiome land, and so that's coming.

But then the last big ones. Inflammation should kind of go without saying. We are an inflammation nation on the planet today Poor circulation and oxygenation, we're not moving our bodies, we're not breathing, we're not perfusing Hormone modulation, we're swimming in a pool of endocrine disruption. And then we think that our hormone problems are about hormone deficiency. It's hormone dysregulation and poor metabolism and poor methylation, detoxification and utilization, and instead we just keep pouring more hormones into people, telling them that's the secret sauce which then makes for long-term patients Like I have job security for that. So thank you all you bio you have lots of job security. Yep, I got job security for all the bioidentical hormone pushers out there in the world.

I pissed a lot of people off saying that I don't care anymore. I don't care anymore. If you see what I see in my career, you do see the data. It's very clear. So it drives me nuts on that.

And then the last two. We've already alluded to the circadian rhythm stress response. That's a huge drop in the bucket. Thank you to all the screens. That's why I wear these ridiculous blue blocking glasses and have all my devices and my tinfoil hat when you guys aren't seeing me in person. But no, but those are the types of things that we are all disrupted in our circadian

rhythms, living on modern technologies of today, and the mental emotional is the 10th drop in that bucket, which is where this conversation started, so I'll take a breath. I know that was a lot of information, chloe, but I feel like it tells a story and it's those 10 major patterns that I see that we have a questionnaire that you can assess for yourself where your top three are, like your top three drivers of whatever condition you're dealing with. That then gives you an impetus of an area to focus and prioritize so that you can make this ecosystem known as you function at its most optimal.

0:24:14 - Chloe  
I love that.

I think it's such a great synopsis of what you're working on, when you're working with clients and when you're teaching other practitioners, which is something that you do, which is also the first resource that I give to anybody who reaches out to me who has a cancer diagnosis and is looking for support.

I'm like, look, I've studied it, I'm not really practicing that much. Go to Dr Nish's website and check it out, find a practitioner near you that you can work with and keep you posted on how it goes. But yeah, I love the Terrain 10 because it not only addresses oncology and people who are dealing with a cancer diagnosis, but truly I think it's important for every single human to start looking at these different things. And so, if you've been listening to my podcast anybody out there if you want to learn more about MTHFR, check out the episode with Dr Varden from DNA Co. And if you want to learn more about environmental toxicity, check out the episode with Dr Varden from DNA Co. And if you want to learn more about environmental toxicity, check out my other fangirl episode with Stephanie Sennep on glyphosate, which was a highlight of my whole life.

0:25:16 - Nasha  
I've been such a player in so many things.

0:25:22 - Chloe  
Oh my God, the amount of studying I did before the podcast was insane. Then it was just like I do not speak this language but I am going to hang in there with this woman because she is such a beast and it's such an honor. But those are great resources also. But for me, you know, obviously you know that I come from the world of childhood disability and advocating for the health of our children, and I, too, do not give a shit anymore because I'm sick of watching the decimation of our children's health.

We live in the world of, like biohackers in a lot of ways, so like we know all these people who are focused on longevity and optimizing their health and how beautiful can I possibly be? And I'm like, hey, great, it's cool if you could live to 180, awesome. But like we're killing our fucking kids and unless we start changing the time, it really doesn't matter how long I live, because I don't want to watch all of these children sick and dying and unhealthy, which is what's happening. And you know what? In 2018, and I say this all the time there was a study showing that like 54% of kids now have chronic health disorders. That, down the line, very clearly leads to cancer that down the line leads to kids who are now on pharmaceuticals multiple pharmaceuticals for the rest of their lives, and so it's like it's time for us to start waking up and making these shifts all of us before we get to the point where we're diagnosed with end-stage cancer, before we get to these things.

So I want to go into all of it, but what I want to start with, which I probably should have started the podcast with, is you are the best person that I know to describe the terrain, so my understanding is that we all have cancer cells living within our body, and so I'm hoping that we can alleviate a little bit of fear with this, because cancer is an epidemic right now and it is

growing, but also we do all have cancer within our bodies. You, as you say, are a cancer thriver, which I absolutely love, but so how does managing? So what is the terrain and how does that impact our ability to manage the cancer? That is sort of just hopping about Perfect.

0:27:24 - Nasha

Well, I mean, it's beautiful because that's where, kind of giving me the opportunity to speak to these terrain drops in the bucket, these 10 terrain impacts. What that bucket is is the terrain, okay, what that bucket is is the ecosystem of your body and, even more specifically, the ecosystem of the body is broken down further into okay, here's this container, which is what we all see in each other, and then inside of that are the structures, so the skin, the fascia, the bones, like those structures, and even the organs of the body, which skin is actually an organ. But then you're looking at your lungs and your heart and your kidney and your brain and all those things, and then you get down to the cells that make up those organs and tissues of the body, all right. And then within those cells are little organs, within the cells, known as organelles, all right. And these organelles there's a bunch of them, but the one that we are really primarily looking at when we talk about terrain 10, terrain health, terrain management, terrain support is about what's happening at that organelle level known as the mitochondria. Okay, so for me, the terrain is all about these amazing ancient, all these little buggers are so cool. We know we've evolved from this bacteria from over 170 million years ago. That is what is our mitochondria today. All right, and these little guys are the most amazing sensing organs that we have. Their job is to take in information, and that information comes in so many different forms. It can come in the form of food, of water, of light, of darkness and light-dark cycles, of sound, of vibration Okay. It can come in the form of energy, both tangible and intangible. It can come in the form of emotion. It can come in the form of feeling safe or feeling stressed. It can come in the form of a lot of different things. It's information that's being taken into those little organelles that then they translate that information and they send signals out into the system to respond to whatever that informational input is.

We evolved as kind of simple beings. You know, we were very much like into the rhythm of what was going on around us. We were hunter gatherers for the first you know chunk of time, until about 11,000 years ago, and we were 100% dependent on what we could access locally, regionally, seasonally, you know, just whatever was around and available At that time. We were very tuned into the cycles and rhythms of nature, of light and dark cycles. We talk about diversity and microbiome. There was no refrigeration, there was no antibiotics, there were none of the glyphosate, there was none of these things right. And then we evolved into Neolithic farmers, which was one of the biggest changes to our terrain.

Our mitochondria made some really new input information, took in a lot of new information at that time when we started to literally put some roots into the ground and started to put a lot of efforts into creating these little communities, that we stayed less nomadic and more habitual to a region and maybe still some nomadic, you know, maybe moving seasonally, but for the most part started putting down some roots. That's actually when we introduced something known as the HLA gene. The human leukocyte antigen gene first showed up. At that time. That was a major change of information to the mitochondria. That's what made us suddenly become much more vulnerable to viruses, to what we now would call autoimmunity Okay, so changes in our immune reactivity as well as responsiveness to things like mold. That suddenly was like this new information of our bodies were like huh, we've changed something here that we probably should pay attention to. But we didn't have another major shift for almost another 10,500 and some odd years when we moved into the industrial food revolution. So in the 1850s we were basically Neolithic farmers until the Industrial Food Revolution. So our bodies had a good 10,000 years to adapt and figured it out, because then HLA actually became a superpower for other things as well.



Right, the genetics, our body could catch up, but the changes we've made since the 1850s, and even more so of the changes we've made post-World War II and post-1980, are things that have happened so fast. Our bodies can't keep up. Our mitochondria are completely overwhelmed. The input is beyond anything they've ever experienced in almost 200,000 years. So to know that we're up to 175,000, you know pounds of sugar per person per year. To know there's over 80,000 chemicals that are on the market today and growing, with less than you know a thousand of those being well-studied to their impact on us and in only two studies that I know of to date that have even looked at the interactions of those chemicals in our bodies.

And then the change in our farming and animal husbandry practices. We eat super fun sites. Now, right, our foods are made in factories. We are completely like our Neolithic farming relatives are literally turning over in their good soil graves at this point, because we've also destroyed the soil of the planet We've over-tilled. We've changed the micro rhizome, the microbiome. We've changed the communication system of the planet, which is the mycelium that we're the microbiome. We've changed the communication system of the planet, which is the mycelium that were. The net around us, like the internet of our planet has been destroyed, so the communication of our seasons and cycles destroyed since World War II as well. And the other thing that happened post-World War II is we finished up several big wars and we had all this leftover ammunition and we thought, geez, here's a good idea. We're going to put a bunch of the leftover ammo into the pharmaceutical industry and the other leftover ammo into farming. These are changes.

You guys, like when people say, I don't understand why we're sicker than ever, like why is it that my grandfather lived to be 108 and my you know my mom and dad died in their 70s? And now studies show that those born after 1980 were likely not out, will not even meet those ages of their parents, so they're not expected to outlive the ages that their parents are dying. Right? This is what we've changed in a very short period of time, and those signaling, those receivers and those signaling agents, are overwhelmed with all the new information and then think about the layering of the EMFs and all the different things. How can we possibly adapt? How can we possibly adapt? And so knowing this, starting to understand your own rhythms, starting to understand your own terrain, starting to get curious and audit everything you're putting in on and around you including people, okay, is very critical to your very survival, not just prevention of chronic illness, but actual overall survival.

Because what's happening now are we are having people born aged. Their mitochondria are already biologically older than their parents or grandparents. So we are getting diseases of the aged in younger and younger populations. Right, because our mitochondria, you guys, this is where it comes all bringing it all home now. The mitochondria are our longevity organelles. They are what determine your shelf life and your apoptosis.

Taking out the garbage at the cells that are damaged and no longer functioning is also under the rule of mitochondria. So if mitochondria are damaged or confused or overwhelmed or lacking in number and lacking in size and functionality, they're not taking out the garbage appropriately. They're overwhelmed, they're confused, they're sending out mixed signals and they're aging the body faster than we can adapt. So we are getting diseases of our grandparents and great-grandparents into the womb right from the get-go. So this is where the terrain is about.

Assessing this.

The real game starts well before you even consider conception, cleaning terrain, well before you know.

Some say three months.

I say give yourself a good year of doing a full, deep dive in mom and dad, to look into what's going on under their own hood and do the best they can to clean up the environment to give the best opportunity to that next generation, remembering that women are born with the only eggs they will ever have, whereas men are making a whole new set of little sperms every few weeks, right, so they can easily clean up their shit, right, but women can't.

Some of that damage is done permanently, and so we as women need to also start realizing that our grandmothers held three generations their own, their child and the gonads of that child that's inside them. That's three generations right there. And that's why we say we really can change the dynamic that's come down from us upstream by changing how it expresses downstream. So the buck can start or stop with you as the individual. But it takes curiosity, it takes awareness and it takes doing something about it. You don't know what you don't know until you know, and even though some people get overwhelmed and maybe scared by this information, this data. It's information that gives you the ability to get educated and get empowered to do something about it.

0:37:22 - Chloe

I love that. It's also imperative, like you know. Yes, it's overwhelming. I even rereading your book before this was like shit. I should probably up my game a little bit. And I'm pretty psychotic. You know, like I cook everything from scratch. I was like, oh, I better get in that sauna a little bit. And I'm pretty psychotic, you know, like I cook everything from scratch. I was like, oh, I better get in that sauna a little bit more and just work on some of the supplements and whatnot.

But it is essential that we shift this path that we're on, because clearly we are moving in the wrong direction and clearly, especially if you're living in the US, which most of my listeners do, we are not going to get the support that we need from the Western medical system.

They are making a lot of money off of keeping us sick and it's unfortunate.

I do believe that many doctors are or almost all doctors are there because they believe that they're trying to help, but they are indoctrinated into a system that is funded by the pharmaceutical industry and I do not envy them as practitioners in any way, shape or form. They're in a really difficult position. But you know, I love what you were talking about in terms of the train, because we really are a microcosm of the macrocosm, and this is something I talk about a lot in Chinese medicine. But as we are actively killing off the environment and poisoning our lands, poisoning our soil, depleting our soil of nutrients, we are also doing the same thing to ourselves and our bodies, and so unless we look at the whole picture and start taking steps, little steps, day by day, in the direction of health, we are ultimately going to be pushed in the direction of disease. So I think it's so essential. I also heard a rumor that you're working with my homie, Ian Mitchell, on some mito stuff, so I absolutely love that.

0:39:04 - Nasha

Such an amazing human being, so, so brilliant beyond his years. This man, he is like the mitochondria whisperer and has created a lot of really powerful products to help like he's. He's one of our solutions to this right. But he's also the person saying I can give you things to help support your mitochondria, but you still have to do your part too. Our human nature just wants the pill or the potion, which is fine and dandy, but it will do nothing in the prevention and actual like warding off of things. So that's what's really key here is that you know we've all got to come together with all of our resources. We've got to bring the ions of the world together. We've got to bring the people like. I want to get you in touch with people like Beth Lambert from Epidemic Answers. With Shalise Pratt, whose expertise in single nucleus high polymorphisms in kids' genetic disorders. With Richard Fry, who is like the most prolific over

600 publications in autism and the role of mitochondrial dysfunction in autism. Like these are the things we bring together right, like we are all rowing in the same direction. We're all seeing the same things. We all have the same. We might be focused in pediatric care or autism or cancer, but guess what, guys? All the conditions that take our lives today.

Okay, are mitochondrial diseases, and the fifth leading cause of death in the United States is actually a mitochondrial disease as well. And this will surprise folks. The fifth leading cause of death in the United States is the proper prescription drugs. Oh, I thought it was the third. Oh, it could have screwed up At least in the top five. But the reason why I call it a mitochondrial disease is because of the direct impact of those pharmaceuticals on our mitochondria. So, as I mentioned already, tylenol, acetaminophen one of the biggest, biggest assaults to our mitochondria, right up there with glyphosate, right, which you brought these folks on and these are basically dibbled out even by your pediatricians. And first food we want to give kids what is the first food we tell people the pediatricians will tell you, get on rice formula.

0:41:19 - Chloe

What is the first thing we tell people the pediatricians will tell you Get on rice formula, which is lady with arsenic right.

0:41:23 - Nasha

Or lead, which one was it? Arsenic is the one. And then the second thing we do, which you see all the kids snacking on are either the little goldfish or Cheerios, which are little glyphosate dumps. So people sit there and scratch their heads and wonder why their kids are sick. You know, I've gotten because people will hear me on a podcast and two things happen. They'll think I'm blaming them for their own cancer or blaming the parent if their child has cancer. First of all, if that's what you are here, if that's actually what you're hearing from me, that's on you, that's not me.

I am the fucking messenger. Excuse my French, but I get so impassioned about this. I am literally helping you see what you did not see before. You don't know what. You don't know until you know. But once you know, it is your responsibility. But you didn't know until you know. So it's not a blame game. It's about you don't know until you start to get curious and look and learn right, and then you do something different about it. That's number one.

Or the thing is people hear me do podcasts about my trauma and the things that impact on my cancer and then I'll have people come back just angry, like you would not believe the hate mail I get of people saying, well, my child dealing with trauma and all these things, I'll go through that and I'll turn things to myself. Wait a minute. Let's go up three generations. Remember what grandmother was going through and what mother was going through in her womb and what you were going through in the womb of your mother, within your grandmother. So let's look at the lineage there of generational trauma. That is an impicator, right, but also the trauma of the world around us. Like your kids are sponges. They are the most empathic, beautiful, spongy world.

The world around us is pretty scary at times and unless you are really doing your work, constantly trying to manage your own emotional resilience and trauma response, those little kiddos, they are feeling it all, like your animals do my dogs, my cat. They know when my husband and I are not in a good place with each other. They know when I'm having a bad day. They know when somebody's like. They know your kids are the same way. So they may not have their own set of traumas, but they definitely have the set of traumas of what came before them and they have the set of traumas that are just inherently in the world around them today, and so you know that is a role.

It may not be there. When I talk about the terrain 10, it may not be in their top three, right, but there are things like there are what 200 known carcinogens found now in our known chemicals, found in our cord blood alone. So here, when people say I don't understand why kids are having cancer, I'm like I don't understand why more of them aren't in the world, and what's really scary is that this is where it comes back. Have, and what's really scary is that this is where it comes back. We cannot depend on our governments, our healthcare systems, our educational systems, our agricultural systems to do it for us. We have to become our own warriors, we have to become advocates, we have to become activists and we have to become engaged and we have to become aware and we have to do something about it.

Because I can't do it for you, and when I try and do it for people, when I try and tell them, I get so much pushback because this is overwhelming.

But for someone who's alive 33 years after my expiration date, if I depended or believed them, number one, I wouldn't be here, or depended on them to do it for me. I wouldn't be here, and the tens of thousands of patients I've had direct impact on from my clinical practice and hundreds of thousands indirectly, they are very happy for this information. And so, for those who get triggered by this conversation, that is something for you to take a look in yourself and say, okay, what do I need to work on here within me so that I can actually meet this challenge head on and be empowered and be ready and to know my resources and to know who I can lean into for the support to change these outcomes, because it's going to take each and every one of us waking the fuck up to do something about it and banding forces to do something about it, because the powers that be are really not interested. They're just not.

0:45:19 - Chloe

No, it's devastating, and I think that it's. That's the entire reason I'm doing the podcast is because I'm like if we can take radical accountability for ourselves, particularly as moms, and then for our households, and then that can have waves reaching outwards. It's like we can do this, but we can't give our power away to anybody else at this point, because we cannot believe that any party in our government or our you know healthcare complex is going to actively change the tide from what is serving them very, very well. So unless we actively take control of that, we're just going to keep swimming in the filth that we're in and moving in this downward trajectory in terms of our health and our vitality.

And, as you said in the beginning, so many people don't even know what health feels like.

You know you gave that whole litany of diagnoses and that's so common.

I have so many people who are like, oh, my digestion is just always wonky, I'm always tired, I always have headaches.

I never you know never get my period without, you know, 10 days of cramps and you're just like okay, these are all signs from your body that we need to rebalance these things. And I think you know one of the things you talk about is cancer as sort of a learning tool and as a teacher and I know as a mom to a child with a rare genetic disorder, with multiple disabilities. Remy is the greatest, greatest teacher, the greatest honor of my life to be his mom and he has taught me so much and he has built me into a whole new person and I've learned so much through our journey and through his eyes, which are just so different than any of ours. So I would love to hear you talk a little bit about that transformation and how we can look at these diseases as something to really empower us and inspire us to take these actions, and what you've sort of learned from this entire journey, just the past 33 years and, like a little, you know, just a couple of days.

0:47:15 - Nasha

And not just myself, but now with you know, had such I mean, I get to hear these stories every day, these amazing, you know, recoveries or epiphanies or even really powerful deaths for crying out loud. I mean, we're all. There's two things that are guaranteed birth and death right. Everything else in between is like a crapshoot. And so you can even still intentionally have a different experience coming into this world and out of this world, and so those are really powerful pieces here. But I really appreciate you bringing up sort of the reframing of this, because another place where I get a lot of hate mail is when people get mad at me for saying you know, I don't under and for myself. This is speaking for me, right, for me.

I understand cancer is me, I understand that these are cells in me and all of us, all of us have cancer all the time. Does it make sense to me to wage war on myself, to go to battle with myself, to kill or to fuck cancer? It does not make sense to me at all, because it goes completely against the ethos that helps me thrive, which is I want to understand this process. What is it trying to teach me? Where is the compassion for myself and for the process that's happening in my body. What lessons can be gleaned from this? How can I invite these rogue cells back into the fold, back into their natural state of essence or senescence? Right, they can live quietly inside. We can all cohabitate just fine, as long as they're not taken over, right, that's completely fine.

Is there a time and a place for pushback? Absolutely, just like there's a time and a place for setting boundaries with your children. These are just children. You can set some boundaries, and those boundaries might look like battles or surgeries or killings, or, you know, we call them cytotoxic therapies for a reason, but the ethos in which you're going about it is different, you know, and so that's something that a lot of people get upset with me because they're like but it is, it is the devil, it is bad, it is this when we qualify, when we polarize, which our culture is so good at doing. Look at the world around us today. Polarization never heals us, never, ever, ever.

And the more we push against or perceive other, the more we polarize, and, interestingly enough, even in the chemistry and the physics of cancer and I'm not either. I'm not a chemist or a physicist, so forgive me on that. So we'll bring in the physicists to talk about this. But there is this polarization, there is this charge in healthy cells that is different than charges in cancer cells and, given that we're all just energy, we can easily manipulate that charge. But if you continue to provoke and perceive bad charge because you're like I'm against it, I'm against it, I'm against it, it's other, it's other, it's other, I'm going to kill, I'm going to kill, I'm going to kill, you continue that polarization that perpetuates things.

And so my invitation is for folks to maybe sit with this, whether you agree with it or not, but just sit with it and just check in for yourself and see.

Sit with this, whether you agree with it or not, but just sit with it and just check in for yourself and see how might I be attacking myself, how might I be polarizing against myself, how might I not be in integration with my full self, how might I not be listening to my whole self?

Those might be questions that you ask of yourself, in whatever condition or situation you're in, whatever diagnosis you, you know what label hovers above you.

I would just invite you to consider this in a different way, because for me that's been a strategy that's been very powerful for my own process and that for I mean, I can't even tell you how many people have said to me I was really resistant to this nature, I really hated you for saying things like this, but then I got it. I got it, I understood it, and it shifted things drastically where no amount of chemotherapy or no amount of vitamin C, ivs, or no amount of fasting or no amount of juicing or whatever it was they did, didn't touch it. That's why people like Joe Dispenza and people like Bruce Lipton have seen such miracles both at the bench as well as at the bedside and have testimonial after testimonial of these amazing spontaneous healings, just

like people like Dr Kelly Turner has written about in her book Radical Remission and Radical Healing, which shows that the most impressive outcomes come from people working on these non-tangibles.

0:51:56 - Chloe

Well, and it is absolutely possible to reframe these things. I know with Remy's disorder it can be deadly for a lot of the children. It's very challenging in so many ways and for me I look at him as exactly who Remy's supposed to be, whereas a lot of the other moms are looking at it like you know, how do we cure this? How do we change them? And I'm like, change him, he's adult life. Like, change him, he's adult life. Like, yes, I might be changing his diapers, he might not be able to verbalize things.

There are things that are challenging but like you can take even the hardest things that you've ever imagined having to face and reframe them and look at them as a lesson and a blessing and a guide.

And I think that it's so powerful to use cancer as that because, as we've been discussing, we all have it and it's a marker that something is awry and that something is amiss. And I think one thing that's interesting that I see as a practitioner of Chinese medicine I'm sure you see it a lot also is in Chinese medicine each of the organs correlates to a different emotion and so often I'll have patients come in and say, oh, I had testicular cancer and they're that liver channel stagnation, you know, and you're like whew, yes, the liver channel goes right through the testicles and it just could not be more obvious. Once you see that pattern or you know, grief is in the lungs, fear is in the kidneys. So I'd love to hear a little bit more about what you're seeing in terms of these emotions and these traumas and how they're getting trapped in the body and how that's manifesting with a lot of your patients and the patients of your practitioners.

0:53:33 - Nasha

Yeah, this is first. I love that, and because I have a background in Chinese medicine as well, to me it's so just common sense, it's just so part of who we are. It's beautiful and to your point that if you are someone asking the right questions, you will see these patterns reveal themselves over and over. So when you're a practitioner of renal medicine or Ayurveda or some type of a vitalistic medical therapy, you start to see trends and patterns Body is revealing for you, telling you exactly where things are going awry or where energies are stagnant. And so even the side of the body makes a difference. So if something goes up, say in the right breast, I'm like so what was happening with your spouse or your father or some male figure in your life, or something in the left breast? What was going on with your mother, or your own sense of femininity or sensuality or your child? And so suddenly people are like wait what? There's even a very controversial man out there, Dr Hammer, and his work.

German New Medicine, also could show correlations of brain imaging. Where there was a spot in the brain that would correlate to a particular place in the body where cancer was expressing and it would be associated with a very particular trauma. So he's done a lot of work in this field. People like Lawrence Lashan, who just passed away, two years ago, I think, just 100 years old, wrote an amazing book which was pivotal in my own journey, called Cancer as a Turning Point. And in fact it's just, it's timeless. So even though it's been out for decades, at this point it's timeless. There's even a workbook in the back of it. And his research, all of his extensive research, showed that six months to two years prior to a diagnosis of cancer is when some major insult or injury to the emotional body happened. So a major loss, a major life change, a major illness, a major you know event that happened and he was able to correlate that again and again. And then, as I started out the conversation early on about my interest in psychoneuroimmunology in my own journey, we have so much. I mean people could just Google or go to PubMed, for instance, and just type in impact of stress and trauma on cancer diagnoses or adverse childhood events, impact on cancer diagnoses, impact of our

psychoneuroimmunology and the oncology space. You will just go down rabbit hole after rabbit hole on this. But we see physiologic changes from emotional charges. So we see spikes in insulin, spikes in cortisol. These are your growth factors for cancer guys. When you have a spike in cortisol and a spike in insulin, your natural response is an immune suppression. So you see how these return to these feedback loops that perpetuate a problem.

So it's also a problem when someone is terrified of their experience or their diagnosis. It's okay to have an acute terror, like there's a saber-toothed tiger. I have to run to safety. But if you constantly are looking over your shoulder that the saber-toothed tiger is still chasing you, your body moves into a different place. Short-term acute stress, short-term acute inflammation is actually very healing, very hormetic and very resilient building in the body. But chronic, ongoing, unrelenting stress and trauma and inflammation perpetuates extreme derangement of the cellular response and the cellular communication and the impact on the mitochondria, and so that's why it's not even helpful for someone.

I tell people the biggest trauma of cancer is the diagnosis, and even Lawrence Lachan and others will say that that the way you respond to that diagnosis is often very telling. Of course you're going to have an immediate like what the? You're like whoa, a total freak out. But if you stay in that freak out and you're like where's the next thing? I got to keep going. What's going on? I'm going to die. Your body cannot receive any form of healing. We cannot heal in sympathetic nervous system overdrive and stress overdrive. So that means that your amazing acupuncture session or your amazing immune therapy standard of care, immune therapy or your amazing surgery or your amazing off-label drug or your amazing mistletoe or your amazing ketogenic diet or whatever it is, can't land and do its job if you're constantly revving. And so when people say, well, I did everything and it failed, when I hear those stories I look deeper and I start to really look at the trend and the pattern that's coming through, and most of those patients have been. They get labeled as doctor hoppers or protocol chasers and they're constantly looking and seeking things outside when their biggest medicine would have been getting very, still, very quiet and trying to listen intently to what those cells are trying to tell them and starting to become responsive versus reactive to the information and instead of jumping right into a treatment.

It is very rare that a cancer diagnosis is an actual emergency. It can happen. It can show up in important real estate in the body, pushing against vital organs or tissues or vasculatures, but 99% of the time it's not an emergency. That cancer has been brewing in you for at least seven to 10 years to get big enough and loud enough to finally capture your attention fully. And you've got time to take a breath and take a moment and evaluate what your next steps are.

And that next step is so critical. How are you going to face this? How are you going to meet this? How are you going to gather the information to choose the absolute right path for you, because your path will be unique to you. Those are the pieces that patients that I see with much better outcomes, follow that approach, Even if they flipped out and freaked out and did other things at first. You can always regroup. You can always regroup. It's never too late, right, and we all can have grace and compassion for ourselves when we do freak out, right and give ourselves that space but know to come back to that place of stillness and responsiveness versus, you know, anxiety and reactivity. It can be a difference between life and death for many people.

0:59:44 - Chloe

Absolutely, and I think I mean I think the cancer diagnosis in itself, as you're saying, is one of the most traumatic things that you can hear, because we've been fed all of these terrifying images and examples of people who have gone through chemo, who have passed away, and it's just.

It is a fear that I think we all hold to some degree in our society because it's so prevalent. So I love your approach and, as we wrap up, I would love to hear a little bit more about so, as I said, you're the first place that I refer any of my patients or friends or loved ones to start getting some information and start deciding what path that they want to take. And I think we both would agree that, like you know, there are many roads to the top of the mountain and there are a lot of beautiful ways to support your body and your mind as you're going through something that's traumatic and to empower yourself, and what is most important is that you find the path that is right for you. But I would love to hear a little bit about how you start with your patients. I know you're big on testing and assessing, but just sort of a little bit of what that process looks like when somebody is working with you or one of your practitioners.

1:00:53 - Nasha

Sure, sure, well, first is the mantra is always test, assess, address, never guess and then reassess, right, that's kind of the act on at the end, and I personally no longer directly work with patients. I will consult with clinicians on behalf of patients and I now put my energy and focus into educating practitioners and allied healthcare professionals, as well as doing research and writing and speaking about these topics, because it's unique. You know a lot of people don't know about these approaches, so that's where I spend my time. But we have a directory on the Metabolic Terrain Institute of Health website, which is [mtihorg](http://mtihorg.com), which is a directory of our allied health care providers. So nutritionists and physical therapists and nurses you know that realm. We've got a good medical background that can really help you evaluate your terrain 10 and help you get started on some of these. Very easy to do things at home. That low cost and low input and just things to just start to shore up your resources internally and externally Also can be a really great balancing act with your clinician. If you're seeing one of our clinicians or somebody outside of the advocates can be a really helpful addition to your whole team. And then we have our trained clinicians who've gone through more extensive training, who can help you determine what are the tests to run, how to interpret those tests, how to understand your patterns from a physiologic level, biochemical level, epigenetic level, mitochondrial level, metabolic level, to then know precisely what are the tools to address those imbalances or those patterns very specifically for you. So that's where I'd start, but the easiest place to start is get the book, read the book, listen to the book different ways.

The metabolic approach to cancer, though it's been out on the market since May of 2017. It still manages to be in the top 10 cancer selling books on Amazon, and whenever I do a podcast like this there you go or anything, it pops right up to number one. It's now in, I think, nine languages, a few more coming out. It just keeps going. Because it's a manual, it's a reference for clinicians, for advocates, for patients, for their loved ones, for clinicians, all the things right. That's very helpful because then it helps you understand the mindset of the provider that you'll be working with and it helps you start to redirect your own, reframe your own experience to give you a better opportunity to meet this head on in a very different way. So there's that, and then on [mtihorg](http://mtihorg.com) and on [drnashacom](http://drnashacom.com), as you mentioned early on, a ton of free resources. Like you can join up our newsletter, know what we're up to. We always are doing summits, we're always doing podcasts, interviews, all the things, because education is paramount and exposing you to as many of these things as possible, and as many things that are inexpensive or free and accessible as possible, is really key for us, and just helping you start to understand the importance of auditing your own life right, everything you're putting in on and around you and even who, as I mentioned before, is really a starting point for this. So that's really critical and you know we're building out a data platform as a clinical decision tool, making it's also a great tool for research and really making this become standard of care and mainstream, as it should be.

We are building, we just built, opened up our lab, which is an R&D lab but also will become cell respiration, mitochondrial respiration lab and metabolomics lab in the future, as our funding allows Our education platform. Like I said, it's over 600 people now in 39 countries and we



matriculate two new cohorts a year for the clinicians and two new cohorts a year for the advocates. So that's ongoing. If you're interested and you're listening and you're one of those categories. We'd love to join us because we have an average of 30,000 hits a month to our directory looking for someone trained in this methodology. So we can't possibly meet that need, that demand, with the providers we have. So we need to keep expanding that. We are hoping we've got land donated for what will be the first ever metabolic integrative oncology hospital and research institute on 1200 acre organic regenerative farm. If you have any billionaire friends who have 180 million laying around to get that built and doors open, we would love it, because it's also a nonprofit hospital where we have opportunities for scholarships and grants for people to come who would never have access to this type of care and just ongoing.

This is my passion, this is my purpose. I'm still learning things for myself every day and applying it to those that I get to teach and I get to learn so much from the patients that are going through all these clinicians and through the clinicians that are coming on board with us. It is incredible. I finally feel hopeful. I would say the first 20 years after my diagnosis I did not think, first of all, that I'd live, second of all, that I'd see anything change. But in the last three to five years, I feel hopeful. There are a lot of things happening on the horizon, not just in oncology, but in health care and health creation, and I have to thank COVID.

Talk about reframing.

Covid is probably the biggest gift we ever had as a society, because it's what's allowed this 33-year dream of mine to get traction, because we've been trying to get traction for it for years, but it was COVID that really put the traction on it, because people realize our systems are broken and it's time to build something entirely new.

So I spent 20 years of my career trying to fix a broken system. Instead, I'm like screw that, I'm just building a new one, and we have more and more people coming out of the woodwork to help us do so. So if you feel called after this conversation to join in in whichever way you can, maybe you've got some expertise in I don't know fundraising or gardening or something that you want to share with our community, like we're always taking volunteers. If you are interested in donations, if you're interested in investments, we've got all types of ways that you can contribute to being part of the solution, versus just complaining about the problems, and so we'd love to have all the help. It's all hands on deck folks. This is how we've got to do it.

1:07:02 - Chloe

I love it. It's so punk rock, it's so beautiful and it's totally true. I mean, covid really did shine a light on so many of these issues that we're having and show the failures of the system, of the Western medical system, in a way that's pretty hard to deny, and so I think a lot of people are really opening up their eyes to the fact that we need to work together to build a better system. Yeah, I'm so excited about the hospital.

I personally, like I was I mean, I've been nerding out on your stuff for a bit but like I was like hi, my friend Maria, as we discussed, who was first episode on my podcast, maria did your training and absolutely loved it, and even though I don't really see patients anymore either, I'm like I so want to do the practitioner training, so I probably will sign up in the next year or two because it's just so fun.

It's also such an important framework for anybody that any practitioner is working with. Again, I think that it correlates very directly to working with women and mothers and children and just sort of how we look at building health and like that's one of that's been like my big catchphrase recently I'm like for me, I'm like I want to help you build health with Chinese medicine, instead of responding to disease with pharmaceuticals, because I'm like this is not working and like

oddly enough for me, like Chinese medicine is such a beautiful framework for the terrain and for building health and you know growing into that space instead of you know just responding when something's bad enough that it's measurable by some Western medical instrument, which half the time it's not, until it's something absolutely abhorrent, right.

1:08:45 - Nasha

Don't wait till you're a flaming building. You know a building engulfed in flames. Deal with the smoldering embers. Folks, still smoldering embers.

1:08:53 - Chloe

Well, again with COVID. It was the same shit. It was like, do not go to the hospital until you absolutely cannot breathe and are on the verge of death. And you're like, could you just recommend some fucking vitamin D to these people?

1:09:04 - Nasha

Like what are we doing? We should recommend vitamin D. And we got deplatformed Me too, Me too and then we had to go to a legal battle to get replatformed, where we're like we were citing PubMed scientific literature. We weren't being extremists.

1:09:17 - Chloe

Dude, at the very beginning of COVID I posted on my personal Facebook just a research study on vitamin D and SARS viruses, just posted the study and said interesting study. I'm like I'm not stepping into this. I only have so much bandwidth. I'm taking care of Remy by myself. I just had to move across the country, whatever, and I had my Facebook shut down for like two weeks. I was like I didn't do anything.

1:09:43 - Nasha

This is the world we live in, which is why we have to build something different, because we are up against things so much bigger than we could possibly imagine. There are so many interests that are not interested in our actual collective health, and that's where we have to merge forces, because we are, you know. I love that quote Margaret Mead about never underestimate, you know, the power of a small group of determined people. We are small, but we are mighty and we're growing larger and mightier by the second, and that's where I'm very grateful for opportunities like this to have these conversations, to fling around a few F-bombs and to hopefully empower, because this is now. It's just, it's like that's right, I get, I get fired up and they fly out and that.

So I apologize if that hurt anybody's ears, but at the same time, it's like, you know, when I use those, I use them because there's something incredibly passionate behind it. This is what gets me out of bed every morning. This is my why, this is my pain to purpose, and this is the legacy I'm leaving on this planet is leaving it better than I found it, and so I'm really. Anyone who wants to join on that mission and vision, come on in. We all need it, we could all use it, and so thanks, chloe, for your opportunity to let me share this with your community.

1:11:00 - Chloe

Oh, it's an absolute pleasure you for your opportunity to let me share this with your community. Oh, it's an absolute pleasure. You're such a legend and such a force and it truly is such an honor to get to speak with you. I am in awe in any way that I can possibly be of support. Just know that I'm always here and we'll wrap it there. But everybody seriously read the book the Metabolic Approach to Cancer. It has so much information in there. There's so many things I wanted to dive into and I intentionally decided that I wanted to go a little bit more esoteric, because you can go and read the fucking book and yeah, the book is very tangible.

1:11:36 - Nasha

We went on, we went, we went off off the out of the sandbox today on a lot of things, which was great.

1:11:41 - Chloe

Yeah, but you can. You can get the book and you can also listen to that on a bunch of other podcasts. I wanted to pick your brain more from the level of our hearts and where we're coming from. So I love this conversation and again it was such an honor. So thank you so so much.

1:11:56 - Nasha

Absolute joy. Everybody, Everyone be well.