

Hello. Let me turn on the chat. I think, I don't think it's on. Let's see if it's even going to let me. Hey, Steve. I can. Can you hear me? Yeah, yeah, I got you. I think I turned on the chat for everybody. If you guys could give me a comment in the chat if you can see and hear us and let us know where you are tuning in from. Looks and sounds good. Before we get started, you have anything in that obscure health solutions compendium you put together a few years ago for random searing spinal nerve pain? Because that's what I've got now. Well, that's awesome. Do you have any PEA in the house or ALA?

I don't. PEA, the thing that touches cannabinoid receptors? It's like a long name, right? Yeah, it's super long. Yeah, I'm not even trying. Okay. Yeah, PA and higher doses. You could try.

You could also try ALA 1000 to 2000 to 3000 milligrams ALA is what they give for neuropathy. Oftentimes. And then Super cool woke up in the middle of the night two nights ago and had intense thoracic spinal pain. Saw an osteopath yesterday. He said, Have you been in a car accident? And I said, No, man, I was sleeping.

I'm old. And then he worked on me yesterday. I got a little better. But then last night it was horrible again. And then it moved.

And now like if I move a certain way, I get pain out my left side down the side into the arms from the spine. You know, that means ketamine, do you? I don't keep ketamine around. Usually, but no. But yeah, so that's my, I can move like if it would have been this morning, I couldn't, I couldn't, couldn't move, couldn't bend over, couldn't do anything, couldn't lift a pencil.

So it's well, this is probably a topic for maybe for this call, but I've had two instances, one where I also woke up and had to crawl to the bathroom randomly and was convinced that I had broken my spine and jiu-jitsu only to get a full MRI from a sports med doc and she goes through it. And she goes, Well, you got a little information here. You got a little, you know, this disc is messed up.

This one. I'm like, Okay, cool. But like in context, I think at the time I was like 34. I was like, in the context of a sports athlete at 34, how bad is this back? And she goes, Oh, well, this is not, this isn't even really a sports back.

You're in great shape. And so that led me to John Sarno's book, Back Pain. And I had to deal with some emotional stress related stuff.

I'm about 99% certain that it's stress related. So it's the third time it's happened. The other two times I had trained boxing right before. So I thought like I'm old. I trained too hard.

This time I didn't do anything, but there's some extremely stressful things going on. So I'm like 95%. That's my hit too, man. Okay, perfect. But another thing to manage that in the meantime might be crad them. Just don't, you know, just don't smoke it. I honestly don't know if I can get that here. We'll see. I have no idea what the status is. Alright, so thanks to everyone for being here. Sorry for that. I think maybe people here have back pain and they just learned something.

So the East Texas, Lakewood, California, New Hampshire, looks and sounds good. Okay, so we are doing a Q &A today. This is Steve. Hi Steve. Steve is the founder of the healthy gut company. He also was a creator of SCD lifestyle and has been involved in all kinds of cool stuff for the last, I don't know, ever in this industry 15, 20 years, maybe 15, 15 and does more research than anybody I know. And it's cool because if Steve's going to talk about something, he's probably tried it himself. And so that's always fun. So he's also tried probably one of the few guys I know that's tried more supplements and more therapies and more treatments and more things than I have. So, and then he remembers them.

I try all these things and then it's like, I think I did that one time and then Steve can throw like milligram doses at you. So we're doing this is the third Q &A we've done this month we did a hormones one with Dr. Liz Bartman, which I don't know if you've seen what the Endo Axis company that Karan and his team are now involved with but they've got AI interpretations for Dutch hormone tests. Oh cool.

Yeah, we talked off line a year ago about that. Yeah, it's live now and their person that they recruited to be the brain of the software was the head of the consulting team at Dutch who taught all the doctors how to interpret Dutch tests and it took them two years, but they put Liz's brain into the software and they analyzed like 330 different patterns of dysfunction in Dutch hormone tests, which are quite complicated to interpret. But now you just get this really sweet report real time boom here's your things and then they formulated. I think it's like 26 products that align with certain upstream.

They're not giving hormones they're giving stuff that alter the enzyme, they upregulate or downregulate certain enzymes that are related to certain pattern it's, it's wild, but we did a Q &A with her at the beginning of the month and hormones. And we did a Q &A with Karan last week on about 97 different topics, and we're probably going to hit about an equal amount of topics today so it's Q &A month this is the end of it. And today, well, Steve's pretty known for gut health stuff and digestion and the healthy gut products if you have any questions about any usage of the healthy gut products or ingredients or production or anything like that. But as we just demonstrated at the beginning he also has a very random set of knowledge in the health world and if you want to throw out some questions and try to like what's that circuit. I feel like there's a carnival game where you try to like stump the name, the geek, I don't remember but anyways, we're going to try to stump Steve so if you can come up with some wild health questions will throw out stuff that he can't answer. Please put the questions in the Q &A. And I know people made a joke about it last time we did one of these that we should host a podcast.

I've gotten four emails about that just so you know Steve. Okay, well maybe that's in the future. Yeah, because they said it's like learning and joking at the same time, which is fun. I think that's good.

And that's how I like to do it. You end up hurting ourselves quite a bit as well throughout our lives. Yeah, which seems to be entertaining for everyone else. Well, I mean at least somebody should laugh about it.

Yeah, when I tell jokes and stories about all the random stupid things I did to hurt myself everybody thinks it's quite funny so. Yeah, alright, so I have a list of questions that were emailed to us from people who couldn't attend live and a couple that were posted in Facebook. So, I'm going to read

those in the meantime the people who are here if you have questions for Steve related to digestion problems or gut health situations or any of the healthy gut product line, which is digestive enzymes and HCL support. We have the holoimmune which is a paraprobiotic which are really cool. We have the tributyrin which is butyrate.

We have the B serine, which we launched last month and the ones that were waiting on the capsules I believe those are now in transit, and then the magnesium and I think I maybe missed one but probably not I think that was all of them. So, any of those questions line them up in the Q &A and then I'm going to answer these that I got in the email. So, most of these are related to the healthy gut product line or a specific product and they should be pretty fast and easy for you to answer. So, somebody said I've been using the Holozyme digestive enzyme for four months.

It works very well. I have a lot less bloating and gas when I eat certain foods, but I still do occasionally. And I've heard you guys talk about two per meal taking two of those per meal.

Is it appropriate for me to take more than two at certain meals? Yeah, so the short answer is yes. The longer answer is people don't want to hear this because it complicates things, but the world is complicated. Health is complicated.

Healing is complicated. And everything in the world falls on a statistical distribution called a bell curve. What that, why that matters to you other than like fun party tricks or something is that 34% of people fall outside of the normal distribution window.

Meaning minimum of 34% of people will have potentially a much higher need for a certain nutrient or product or a much lower need. And then this idea is not fixed as you move throughout your week. Let's say you're a woman and you do have some hormone disruption as you move through your cycle during the month. As you move through your week.

Let's say you have kids and the kids go to school and that school has a rhythm and things get wonky on Fridays or Mondays or Saturdays and Sundays when the rhythm changes. These things change our need for certain nutrients and our and our dosing of support products and they change over time as we age. And so the point being is that I think the highest level of being an amazing head of your household for health and wellness is understanding each product in the range in which you can use that product for certain outcomes. So that's, I'm talking magnesium to vitamin D to vitamin C to zinc to even things like selenium is not a big range selenium can be very toxic. But many of these other things zinc can be toxic at two high dosages. But a lot of these other things are very safe for you to play around with the range and so our enzymes are very safe.

They have a very high range. And yes, we tell people to titrate up if they're not getting results or if they're going through a stressful period of time or they've had some sort of setback. So like Michael right now with the stress of a newborn and whatever else he's navigating in business and life.

If he was having this issue, I'd be like, yeah, man, try three or four per meal for the next, you know, four to six weeks as you get through this stress and then go back down to the dosage that was working beforehand. Makes sense. Thanks for that.

I think you've shared that I wanted the other sounds. I've heard you talk about the bell curve on supplements and not just supplements but any sort of thing. People fit into that so I know when I eat popcorn. I've talked about this anytime we talk about hollows I'm I take four of them. And my insides don't become like a bar fight in my belly and popcorn usually causes that so.

Yeah, that's great. I mean, look when I for when I eat out like I do the same thing when I eat out I take six. I don't know what's going to happen at the restaurant.

I can go to the highest end restaurants and I still don't have any control about what actually happened back there. So, yeah, but I don't take six on a regular night at home. You know, I take two to three.

Yeah. Best time of day to take the magnesium product and I don't know if there's an answer to this that would be a one size fits all but I take it before bed. Yeah, I take mine with dinner or before bed as well because I'm trying to I'm trying to wind down the nervous system. I'm trying to relax my body and to sleep. If you were having like a big travel experience, like if I remember which is not often but on the way to the airport, I'll take B3 and magnesium on the way to the airport. Things like that if it's a big stressful experience but yeah, otherwise with magnesium glycinate you're probably going to want to take it within a few hours of bed.

Okay. Is it possible to get die off from tributyrin which is a butyrate delivery. It's a product that delivers butyrate into the large intestine. Somebody asked, I started taking it and had symptoms that to me would be die off but I'm not a professional. Does butyrin kill anything? No, no.

So tributyrin and butyric acid doesn't necessarily kill things but what it does do is it shifts the populations in the microbiome and it can shift it pretty significantly. So could you be experiencing a die off experience? I call it remodeling. Yeah, totally.

Especially the first two weeks. If you smash in all the walls and make a mess before you make the new wall. Yeah, yeah, you're remodeling what the environment down there and so the microbes will change in response to that.

It's not specifically an antibacterial or fungal or viral agent. What I would say is that people get confused and they sometimes either don't stay with the pain or the uncomfortableness long enough or they stay with it too long. So if you're using one capsule the lowest dose possible and you're beyond a few weeks and you're still experiencing this, reach out to us.

Something else is probably going on. But also if you're somebody who went to three pills per day and you just got the product and you started taking three pills, just slow down a little bit, go down to two pills or one pill and ease your way into it. It'll make your experiences with all supplements a lot better. I love the constant more is better all the time attitude with people email us and be like, I got my

Megaspore yesterday and I took five of them and now my belly is upset. And said, well, it says to take two, but my belly is really messed up. So I should take five and it's like, well, the opposite of that is true. So take like a quarter of one and do that for a while and then then we'll talk. But I used to be the same way. If it said take four, I took nine. Like, because more is definitely always better.

So slowing down with it could be a good idea. And the only other question I have in the email is, I attended your last webinar, and I thought I heard you guys talk about something new that was being worked on, or a new formula or a new product or something I wrote down new product with question mark. But then I don't remember. Did we do it there, I don't think maybe it was talking about we were going to do the B serene. The B serene daily formula is all the herbs are higher quality.

Some of them are different extract methods. And so this B serene daily formula that everybody's going to be getting right now. And they are shipping as of Monday. So, so Michael and his team should have the product here this week sometime and be able to ship it out to y'all. The product should be subtly better, like 10 20 30% better.

There we will have a new skew a new healthy gut will have a new product coming out in the next six weeks. And, you know, we can secret. I mean, not it's a DAO enzyme is not totally secret. We have a tester group going on Facebook. So we could do a show here about why the enzymes when there's already 100 of them and sometimes they don't work at all and things like that. But yeah, we felt we felt like it breaks down histamine. Yeah.

Yeah. It's for people with histamine related issues. Also highly linked. So this, this particular product they have researched for ADHD migraines and fibromyalgia as well. Yeah, histamine. I didn't learn that till recently that high histamine is like inability to clear his to means is a contributing factor to ADD and ADHD. I, as someone with like world champion level ADD like I never caught that one it just reached I probably heard it 12 times but ADD. So it takes 13 it takes 13 times. And I've also learned that I think I have a glutamate.

Too much. And due to my genetics I was talking to Bob Miller I don't know if you knew he is but his software for Nutrogenomics is like about as insane as Nutrogenomics software gets for details and he recommended something to me called Benageen, I think it's called, and it jumps into the Krebs cycle in a way that improves your glutamate clearance so that I don't have access because glutamates excited. Yeah, it's bad. And I've been I've been taking it for five days. And yesterday, I wouldn't say I felt stoned but I was like slow.

Everything was slow. I was trying to do because ADD is a gift to like I can do like 1000 things at one time and I was trying to do, which is why I have back pain now. And I was trying to do 1000 things and I couldn't do it. Like I got overwhelmed by something that I normally could do and I'm like I wonder if it's this thing that I'm taking to slow my brain down and maybe I don't want to take it. Yeah, cut the dose and half. Yeah, this is too slow.

I need to titrate back to slow. So somebody said they didn't know that about ADD and histamine clearance as well. Yeah, it's Yeah, I mean, I'm not we don't let's get back to all these I know there's like

a 10 or 11 questions but like, think about like how many kids might have histamine issues that are getting prescription meth. And don't get me wrong like prescription uppers for certain situations of ADD ADHD are very helpful and probably the necessary method but it should be maybe like 510% of all people not 90% of all cases and just think about how many cases might be histamine derived. A lot probably because the symptoms that I connected the dots with with histamine for me because I don't like react to lots of foods but then I looked at this other list of possible things and I was like, Oh, I have all of that. And so I've made a little changes and it's I'll definitely check out that product though so let's get to the Q &A that's here.

In your experience. SIBO webinar I think it's like, I don't know probably 2022 ish you can probably find it, but Steve in your experience is there a way to reverse SIBO by balancing the microbiome and not using antimicrobial herbs or antibiotics. What protocol do you suggest. The way the way the question is phrased I would say no. And because I don't think you got to first think about geographically where these things are located the microbiome is deeper. It's barely inside the small intestine. It's mostly in the large intestine and a SIBO SIFO experience is definitely in the small intestine. So you can't fix the microbiome, but then assume that that's going to do anything to the SIBO SIFO thing. But what I would say the number one thing that people fail to do is that they fail to ask the question how did the SIBO SIFO thing happen in the first place.

Because the conditions had to be set up for this occurrence to happen. And so normally what I find and normally what I've seen across many clinics and clinicians agree with this several of them anyways is that there's typically low stomach acid. There's typically low digestive enzymes.

And what this does is it reduces the absorption of any diet you choose. I don't care if you choose a low SIBO diet or a paleo diet or a Western diet. It doesn't matter the type of food. What matters is your ability to break the food down in the specific time required and then absorb the nutrients at the specific time required.

You can look this up online, but your small intestine is not homogenous. It does not do all the same functions at all the same steps. And so there's a timing that has to happen.

If you mess up that timing with acid or low acid, low enzymes, you basically create an extra amount of food in the lower small intestine or the mid small intestine. And that's where these overgrowth, I think, become a lot more common. And so I do think you typically need to treat it. You probably need some motility help. Motility is helped by fixing low stomach acid motility is helped by enzymes. And so it's, it's not that you're, I'm not anti prescription drugs. I'm not anti herbal antibiotics.

I'm anti doing them over and over again and not supporting the organs that likely need support this whole time. That would be pretty much exactly how I would answer that question also and makes a lot of sense. I hope that that answer made sense to you. We did also link the SIBO webinar that we have, which actually is just a really lengthy presentation explaining almost everything that Steve just said, but with slides and pictures if you're into that sort of thing.

So check that out there. And Can natto kinase, which is an enzyme be taken at the same meal with HCL guard. Personally, I generally recommend if people are taking natto kinase to take it away from food, but I don't think.

Yeah, yeah, I would agree in general optimal usage would be to use your nano kinase, nano kinase, your serrapeptase, your whatever other systemic enzyme away from food. Have you ever eaten natto? I think I tried it once. You don't think you'd remember. Yeah, I don't think I have it.

It's a memorable experience. Yeah, I don't think I have. I think I looked at it in the store and I was like, I can't do it. Yeah, I was kind of a dare at one of the health conferences and health people are being all wild. Yeah. Yeah, eating the eating the natto was the wild thing I did on that day and I swallowed it. So I made it further than half the other people.

Nice. But it makes the enzymes come from there and they're good. So what somebody who can't tolerate supplements, no supplements, no food is super reactive gets autoimmune reaction.

Oh, Andy, he has yeah, an autoimmune condition. Personally, my response to this is to I would look at Dr. Kathleen Kings. Dr. Kat has a membership site and programs called Primal Trust, but she focuses on like brain retraining and nervous system regulation and specifically for people who are really reactive to things because in my experience, this is a nervous system situation. Trauma, nervous system, brain retraining, your body's reacting to everything because it thinks everything is danger. I don't know if there's a supplement that's going to make you able to take more supplements.

I think it's a matter of getting your body into a state that isn't in such a panic. Steve, do you have something to add to that or a different opinion on that? No, I'll just add to it saying I agree with that. Yeah, I would any sort of nervous system retraining or brain training, there are apps, there's CBT cognitive behavioral therapy apps. The other thing you could try is vagal stimulation apps and devices. But basically, yeah, at this point, you're looking for things that tell your body that it's safe.

And so that could also look like grounding outside. But right now you've got to help your nervous system retrain to safety. Okay, I just put that in the things I recommended and I put Goop de Method and DNRS those are other brain retraining things, but the apps he said and then the stuff I talked about I just put in the chat.

I hope that that's helpful. But yeah, people that's and we did a webinar with Dr. Kat pretty recently as well. Mary Ann, if you're still here, if you could find that the webinar we did where we then introduced Primal Trust to Rebel Health Tribe Community. We did a Rebel Health spotlight with Dr. Kat and we did a webinar I'm looking for the webinar if you could post that in the in the chat. Mary Ann's the ninja that finds all the things because anything we've ever done.

I know what we did but I can't find it what we're doing here and so she finds it and sticks it in the chat. What is the holistic treatment for H. Pylori infection. Well, we do have a product in our shop from microbiome labs called Pyloguard that is, I believe it's a post biotic that binds to H. Pylori. You think

it's dead? Is it alive? I thought it was alive. Maybe it's alive. I don't remember but it's either a probiotic or a post biotic that binds to H. Pylori in the gut.

I know that there's Matula T is my saying that correctly but I know that a lot of people react pretty harshly to that. Do you have an opinion on H. Pylori? Yeah, yeah, I had it. I got rid of it. I saw a lot of eradication when we had our health coaching practice. Number one, as Michael mentioned, there's a number of products that you could take now that can help with the eradication, but it's a process, right? And so one of those processes I believe is restoring stomach acids. In my opinion, you want to make it as harsh of an environment down there as possible. And so I could see you combining something like the, is it Pylori Plex or whatever the name of the microbiome labs product with HCL guard. And then you're going to want to do some sort of killing component with that. And so that could look like the Matula T or there are protocols out there that are, you want to include a biofilmmaster.

That's another mistake that people often make. So that can look like NAC or some other biofilm busters like interface plus and then a general antimicrobial style herbal product. There's some, I think ortho molecular makes one for H. Pylori specifically called Pylori something.

Okay. I've heard Giardia H. Pylori on the rise. But more concerning. I don't know. That's just what it says. Oh, worded strangely, but more concerning. There are three pathogenic bacteria that are high can be antibiotic resistant.

Any of your products that can be helpful. You can answer that in a second. I hesitate from chasing labs like this and then trying to eradicate this one and this one and this one and this one. And I tend to try to focus personally more on creating an environment where healthy things grow and they tend to take care of a lot of that. But if you're really symptomatic and the symptoms match the bacteria that are high on the test and maybe, but what would be your response regarding the healthy gut products specifically, Steve. I mean, my response is similar in that if you create the most inhospitable environment for bad bugs, that's going to help any protocol you decide to do, whether it's a Western protocol or Eastern protocol or a integrative protocol.

The goal is to be hard to colonize basically hard to kill. And so, if you do not have proper stomach acid, you're, you're contributing to inflammation every single day you're contributing to malabsorption every single day. You're making it harder on your immune system every single day. If you don't have enough enzymes, you're making it harder on your small intestine every single day. You know, if you have damage from prior protocols clearing Giardia, you might want to use something like whole immune and try to eat our next to try to rebuild the gut. But while you basically retool to go fight the next battles, if you will.

So I would also be thinking about trying the microbiome labs prebiotic that could also help feed the right bacteria to help push down or help eradicate the pathogenic bugs. So yeah, it's a it's also kind of. Again, I like to think about it just like what you're saying, whereas I'm not trying to bring in a sniper because the, the battlefield down there shifting so rapidly all the time. And our tools to figure out what's happening down there are so crude that I want to bring in as many support products as I can



that will help anything else I do. That makes sense. Please put the questions in the Q &A and not the chat as much.

It's easier to follow. What is the HCL challenge and how do I do it is HCL needed after doing the challenge any recommendations for GERD and a hiatal hernia hiatal hernia I'd look at manual therapy like hand-hand healed drops. People can work with that with their hands. What's your answer to the HCL challenge your way of doing it and what you do with the results? Yeah, so HCL challenges. I just say take one HCL guard with your dinner with a normal dinner meal. And then continue to escalate each day if, if or when you feel some sort of burning or heartburn increase or something like that, take some baking soda and a little bit of water and swallow it down.

It'll neutralize it. And then if you got to three pills per day when you got the burn, then your ideal dose going forward is two pills per day. If there's, remember the bell curve, there's outliers, right? There's an outlier percentage of people, 10 to 20% of people who never feel a burn. Most people do not need more than like seven or eight capsules. So if you're not feeling a burn, but you are noticing a stool change, normally what'll happen is those folks will start to have looser stools. So watch your stools for how high to go, but most people should probably never take more than 10 capsules of any HCL product on the market. And then if you're somebody who burns immediately on the first capsule from any company, whether it's our company or anybody's company, that suggests your mucosal membrane is really broken down. And in this case, maybe you do have an ulcer or a hernia or something that you cannot tolerate these products at this time. So I would stop and then focus on healing your mucosal membranes.

How this stability looks for me is Triveter next. I do like some of the higher quality colostrum powders for it. And then DGL is a good, there's some really great herbs, prickly pear DGL, these types of herbs are amazing for healing the mucosal lining. Aloe vera. I have an aloe vera plant on my terrace, I feel very fancy. To break off one of those but I kill it if I try to take care of it if I just say well I guess that thing's going to die and I don't look at it for two months. It thrives. So I am not super green thumb but I broke one off and did some goo out of there, not that long ago. Any advice for off and on periods of chronic diarrhea, even though it was constant burping even burping on an empty stomach.

Before you answer that, which I think you'll have a pretty solid answer for that. Mary Ann, I'm going to summon you again. The two part solving the digestive puzzle webinars that we did with Steve where we went through like from mouth to tail through the digestive system and all the symptoms and all the solutions and all the things that contribute to them was super, super thorough. I think we did that last year. And that talks about this a lot.

So if you could link those two part webinars in the chat, that would be awesome and Steve can answer that one then. Yeah, so constant burping is a great sign of low stomach acid like anything around burping belching a brick of food sitting in your upper abdomen after eating these are all really good signs of low stomach acid. The burping while not eating is likely related to your nervous system. So also low or acid production is inhibited when you're in a sympathetic state. So basically if your nervous system is scared.

If it's not feeling at ease with the world. It's very hard to make stomach acid, which can make all of this worse. And then the intermittent diarrhea is typically related to these things. So you can actually not fix, but you can control the quality of your stool through changing your stomach acid. So again, I would try the HDL guard.

I would try some nervous system training of some type on a regular basis. And then. And the other thing is if you're not keeping a journal, I know this is so dumb and so boring, but like people really throw out the fundamentals and they focus on the new Chinese stuff that I'm talking about or that Karan is talking about. And when the reality is, is the fundamentals work so good, they're just boring. And one of the fundamentals is just keep a journal on when the diarrhea happens, because it could be that you're getting an exposure from like your kid's school and there's mold there, or it could be that you go out to eat with the girlfriends on Thursdays and you have diarrhea on Fridays, but our memories suck. Like we literally cannot remember what we ate yesterday.

This has been shown in many studies. So it's not just me and Michael who memories suck. Yours does too.

And this is all humans are short-term memories. Not great. We all suck. We all suck at memory. So write it down because there's a pattern. It could be the time of the month that could be related to your cycle. It could be related to an environmental exposure, could be related to a food exposure.

Okay. When I used to work with health clients and I had them take journals and write those things down, everybody was, I wouldn't say everyone, about 90% of the people were often quite stunned at what they noticed when they would review it and relook at it and be like, I can't believe I never picked up on this or I didn't know I ate this much of this or whatever. And it's because we literally just fly through life and don't pay attention to anything or remember anything and then six months go by and then you're, so I'm not sure what to do. So yeah, you'll be surprised what you can learn by doing the journal. How do probiotics interface or interact with your digestive products? All of our products are made to work with any probiotic that is beneficial to the body is going into. And so that's the biggest caveat or the biggest assumption. There's an assumption that probiotics are generally either good or inoculus, meaning like they, they're good or they don't do anything.

And that's not been my experience. My experience is that all probiotics do harm certain individuals if their gut is not ready to accept more live bugs. And so I often say the, to bring them in after doing a lot of our protocols for a couple of weeks and bring in the probiotic you want. But if after bringing in that probiotic, if you're not feeling better, remember that die off windows like, you know, three to 10 days, if you're still not feeling better then that probiotic might be the wrong strain combination for you and it's pushing the wrong buttons. And there are a majority of probiotics out there have no data on them. They have no research on them. And there's just not a good use case for them.

That's not the case for Megaspore. It's not the case for certain, you know, other high quality companies out there that are using highly researched strains, but even those highly researched strains can backfire in the wrong environment. So I'm pro probiotics, but I'm also being, I'm pro being

very skeptical of them. I currently have mold, ver, colonized mold verified by Great Plains and have just started antifungals. I believe this was, oh, this question came into our other email.

It was on the other list, I think, I think it's the same person, Linda. Do you think it's helpful to work on the microbiome well at this phase or wait until afterwards? Oh, while taking antifungals, what gut support would you recommend in general?

I'm going to just jump in here and say, I know a lot of practitioners that work with mold and say I asked 10 of them this question. I probably would get 10 different answers. So which is sad, which is really, really sad, because I think my answer is really the smartest.

Of course it is. And what would that be? I would not focus on the microbiome because you're introducing all these different binders and killing things, but I would focus on the gut function. Like, again, can your stomach do its job? Is your intestines able to do their job?

Is your enzymes, is your bile acids capable of doing their jobs? Because if you can't break down the food you need to actually fix the detox pathways and actually get rid of the mold and any sort of fungal overgrowth, you're just going to be like one hand tied behind your back the entire journey of mold. It just relax about the microbiome.

Just let it go for now and focus on your mold stuff, any sort of infection stuff, but also focus on just like, can the gut do its normal gut things every single day? OK, that makes sense. And the two videos that Mary Ann posted, which are those solving the gut and digestive puzzle, I think both of those would be good for you to watch.

Linda, that would there would be a lot more information details about what Steve just talked about, about what it means. Like, is your stomach doing its job? Is the small intestine, is the bile being produced? Are things working like they're supposed to? In those two videos that are the most recent thing in the chat there, all of that gets gone into and really, really in depth levels. So I think that you would get a lot of answers there about what he means by making sure that your gut is doing its job. Does taking powdered herbs such as ashwagandha, moringa and reishi interfere with your products or OK to take both? I can't imagine a situation in which those would be bad to take with any digestive supports, but maybe. Yeah, I think they're probably talking about beeserene, but there's no as long as you can tolerate ashwagandha, ashwagandha can for certain individuals, not a large subset of individuals, but some autoimmune people react ashwagandha since it is a nightshade. And so it's not necessarily, again, every herb is not universal, every probiotic, every even HCl guard or enzymes are not all universal. So but yes, you can stack all those herbs with beeserene and with all of our other products as long as you tolerate them.

And I take, yeah, I take mushrooms and things like that as well. And I forgot to write it down. This is not one of their questions. It's one of mine. That book from John Sarno was just called Back Pain.

Yeah. Ending back pain. Let me Google it. John Sarno. And Kratom is illegal in Italy, by the way.

Okay. It's called Healing Back Pain Dr. John Sarno, S-A-R-N-O. But I mean, basically what he's going to tell you is that you have some, you have some emotions and some, some things are not feeling. Which is interesting because I was just at a nine day training retreat in the breath work and emotional release stuff that I do in Poland. And my body felt better than it's ever been when I came back from there.

Eight days ago, but there's some pretty high stress things going on. So it's pretty impressive how fast that can go to shit. But yeah, I totally know. And this is a little sidetrack, but Willem Reich was the first somatic therapist, basically, who took psychotherapy and went into the body with it. And he create, he identified these bands of tension, essentially, where there is in the body where you'll find tension and pain in relation to certain emotions or certain sensation, like certain things. And this one is grief. And I've had three deaths in the last six months and have been too busy to process them. So the thoracic heart, shoulders, arms area is predominantly that would be the emotion. So I was hoping somebody could just push on me and make it go away. But I don't think that's going to happen.

So OK. I miss yogurt, which I can't tolerate due to histamine issues. Sounds like the DAO enzyme that's coming could be your friend. Could I make my own with hollow immune?

I don't believe so because those bugs are not alive. You would want to use live organisms to make yogurt. What's that one that really expensive one that people make at home that appear really good market marketing behind it? No, it's like a brand of it's like a. I'm not going to remember it's been years, but it used to be all the rage in the gut healing world. The gaps diet people make it. Yeah, I used to make my own yogurt as well for a long time. It's like a specific.

I'm not going to remember and it doesn't matter. But no, hollow immune will not make yogurt because those organisms are not alive. Correct. Yeah.

All of whole immune organisms are dead. I will say that there is the yogurt. Like when I started this in 2009, I was making my own yogurt with like a hundred and twenty degree cooker. And if you if you made it too hot, yeah, if you made it too hot, it's mess everything up.

It was just a terrible thing. But yeah, I was going to say what Steven's saying here is that the yogurt industry has come like light years from where it was. And so not only are there non dairy based yogurts like the co coyo or whatever the coconut based one that Steven's talking about. But there's also several manufacturers who make a low fat, sort of like almost all protein style Greek yogurt. It's not called Greek yogurt because I guess maybe there's some the term means a certain thing. But if it just looked for a high protein yogurt and there's several companies that I've actually been I've actually been eating finally again for the first time in a long time. And they're the ones that have like 14, 16, 19 grams of protein per serving size.

And there's not a lot left if you have that much protein and that little of carbohydrate and that little of fat. Okay. Please comment on the gut biofilm and do any of your products specifically target it. I like to just throw a little hesitation out there that not it's not only bad organisms that make biofilms. All

organisms live in biofilms. So personally, I never saw super great results when I gave people like large doses of huge biofilm destruction things.

But what's your answer to that, Steve? None of our products are specifically designed to target biofilms. I agree with Michael that biofilms are still relatively not well understood, but I do agree that a large missing hole in most people's protocols for the gut are a biofilm disruptor. I love NAC and a little cysteine at, I think it's a thousand milligrams three times per day was studied, I believe it was H by Lori, but I think they've studied it in other cases as well. And I mean, if you don't need it for the biofilms, you just get better glutathione and you get more cysteine in the body. So it's like a win-win. I love, I love protocols that work like that where it's like, if you're, if you failed at the one thing you were trying to do, you actually got this other benefit. And so my other favorite biofilm buster was interface plus, and you can use those two in combination since they are going at different angles of the biofilm. But again, I would only, to Michael's point, I would only use them in that acute killing situation. And then I would be focused on rebuilding the gut after that.

I feel bloated with anything I eat. Would that be more HCL guard or holozyme? And I would say yes. Yeah.

Yeah. I mean, an ideal world, if you had both on hand, they both are going to help make sure that that bloating's gone away. If, if you're constrained or whatever in one way or the other, I would choose holozyme first, but you may need two, three, four, five, six per meal for a little while until your body starts to remodel and get better. Using them in combination will decrease the amount of enzymes you would need. In other words, like if you only had a holozyme, you might need six per meal to not feel bloated, but if you had HCL and holozyme, you might need two HCL guard and two holozymes to get the same effect.

Yeah. Cause if you don't have adequate stomach acid, then you need more enzymes to break down the food that the stomach's not breaking down. But if the problem's in the intestine, the more stomach acid may or may not help it. So, uh, what are your thoughts on weight loss and your product line? And, or other thoughts that might have on a female with very difficult time losing excess weight. This is another one that we could probably do six webinars on if you wanted a complete answer of everything that factors into metabolism and weight loss. Um, but I don't know.

What do you think? Um, so, uh, there's a weight loss is very multifactorial. Like it's super multifactorial from sleeping. What are your stress levels? What are your relationships like?

How much do you move? Yeah. How much are you eating? I don't know.

Things like that. What is your actual caloric load? What nutrient deficiencies do you have? There's so many things. Um, what I will say is that the, the great thing about the new, uh, GLP one medications is a few things.

One of the things is that, um, they're showing GLP one medication just for anybody like me who has no ideas at that controversial one that they're saying makes you lose weight and then other people are like, damn, this thing, it's killing everyone. Oh, I don't know. It's called OZ.

OZ. So there's a bunch of them. My feed back from like, you know, the people that have been in your social media since we first got into this industry, you know, those people. Yeah.

That they're still, they're still on it. Like the same fights. Remember when the vegans used to fight the paleo people in the, yeah.

Yeah. Those people, they're posting things about how that drug is like a murderous conspiracy of the pharmaceutical industry. Oh, I think that's total bullshit.

Um, definitely not true. Of course. Of course.

It is. Any, any anyways. Uh, so, so OZ and what gov and a bunch of these are, there's two different kinds. There's oral and there's injection. It's basically a, it is literally GLP one, GLP one is a peptide and I'm not a GLP one expert. So I'm not even trying to do justice here, but it's a signaling molecule that does things everywhere in the body.

It does things in your brain. It does things all over the body, not just in the gut, but is normally derived mostly from fiber and the gut system in the gut wall. And so in a society where we have continuously consumed less and less fiber, we have less and less butyric acid, we'll have less and less GLP one signaling. GLP one is directly tied to your feeling of satiety. It's tied to your feelings of serotonin and your like, like desire for things. Um, and so it's tied in the dopamine system as well.

And so when you take it exogenously through semi-glucide is the oral version, which I like better than the injection version, which is the ozempic stuff. Um, you basically, uh, you can't eat as much. Um, you literally get nauseous. You literally have less desire for alcohol. You have less desire for sweets. You have less desire for all these things.

And I think those are really fine interventions. I think what's not fine is that if you don't strength train and if you don't eat a high protein diet, you will lose a ton of muscle mass. And as soon as you, if you don't change your lifestyle, as soon as you come off the drug over a number of months, you'll gain that weight back because you never really changed your lifestyle. So I think, I think they can be an awesome tool, uh, at lower dosages. So you're not putting all the emphasis on the drug to do all the work. You're actually also doing strength training. You're eating a high protein diet. You're taking care of your gut. Maybe you're using, um, some prebiotics, some fibers. Uh, you're eating a lot of vegetables.

You maybe you're taking triveterin X or some enzymes, things like this. And it's a whole, it's a whole thing. Meanwhile, you're paying attention to when you're on the drug, uh, how do you deal with regular life in a different way? Meaning do you want wine less? Do you want chocolate less? Do you, uh, like how do you change your behaviors that could drive weight gain after the drug?

And so I think, um, I think if used in a different light, these drugs can be really awesome tools. And, and I can't, and you're not, I can't sit here and say that like just taking triveterin X or some other like GLP, cause triveterin X will help you with GLP one, but it's not going to, it's not, it's not going to just make pounds melt away. You know, that's not, it's just, that's not how it works. That's not very good marketing, Steve. Sorry. Um, make, uh, unverifiable claims.

You don't know the marketing in the health industry. Uh, any advice on how to break a cycle of having small bowel movements in the middle of the night? That is something I've never encountered or heard over seen, but I would guess that your circadian rhythm is disrupted somehow. All right. Have you ever encountered that or seen that or been asked that question? I've actually never been asked that question in 15 years. It's a, that's a new one.

I'm not stumped, but I, but I have a light, like a lights that go off when there's a new, a new question that you haven't heard before. Um, so I would, I would say, along with you, Michael, my first thoughts aren't like, okay, what, you know, what things trigger bowel movements and what could be going wrong in the middle of the night. And so things that trigger bowel movements are related to utility. They're related to, uh, your nervous system. Um, and so they're also related to the timing in which you eat the food. So potentially if you, like, let's say you're a habitual of nine o'clock or 10 o'clock eater, maybe you could move that to five PM and don't eat anything after that point and see if it changes it. Uh, you could try some utility support, like HCL guard, or you could try some nervous system quarters all support, like B serine daily and see if that shifts it or well. But again, you really need a journal and kind of just approach this like a very curious science experiment, um, as you try each one of these weeks. Okay.

Uh, question for Michael about the somatics and the emotions trapped in the different body parts. Any recommendations for learning about all of this for a cheap or maybe even free? I would love to know about all of this and how to treat it myself if I can, but I'm broke. Um, I would look up Willem Reich and I would also look up.

Um, oh, you can't hear me if I'm not over here. Bio energetics is Alexander. Alexander Lohan is the doctor. There's bio energetics was a student of Reich. Um, those books are usually pretty cheap.

Reich's going to be difficult to read. It's old and difficult to read, but I would just look up bands of tension, B, A, N, D, S bands of tension, Reich, Lohan, bio energetics. Um, and then look up, uh, on YouTube, the biodynamic breath work that I do.

They have a YouTube channel and they talk about bands of tension and they'll show demo sessions, possibly of people doing work on those bands on YouTube. Um, and I'm going to be teaching all of that stuff pretty soon as well. So that's what I would, I would give you for that. Yeah.

Groundings free as well. Yes. It is. Are you familiar with the type of yogurt that is recommended by Dr. William David who wrote super gut? I am not. I don't know who that is and I don't know the book.

I don't know. You stumped the whammy. You remember that show? No whammy, no whammy. Yeah.

Stop. With the little dancing guys. That was always on when I like pretended I was sick, so I didn't have to go to school. I mean, the little red men. Remember that? Yeah.

I know. I don't recall. No, it was a game show and they would like spin around and they would say no whammy, no whammy, stop.

And it would stop the light and you either win like a prize or money or these little red like goofballs popped up and it was like want, want, you get nothing. Somebody back me up here. I'm not crazy. It was in the 80s. I believe in I counteract the Anto Ant big word anti-colonner chick.

Colonner chick, colonner chick activity of anti histamines by taking choline. I don't know. Yeah. I don't think anybody's actually studied that yet. Karen judging by the words you're using there, I would probably say yes, but I don't know that for anything past a 51% chance.

Yeah. I mean, alpha GPC, citricoline are really cool, well studied versions of choline that have also been linked to increased memory, increased cognitive power, especially in elderly people. 1000 milligrams a day of citricoline, alpha GPC, 300 to 600 milligrams a day. They affect people differently. And so based on the fact that they affect people slightly differently, my guess is that the colonner chick system is more complicated than, hey, if I take more of this thing, but I'm also blocking its uptake. I assume that's what's happening is that the, the Benadryl and things like this, the anti histamine is actually blocked the uptake of the choline. So if they're still sitting and squatting, essentially think of them like house squatters, if they're squatting on the receptors, just, just more people who want to get into the house won't actually move them off that. The question is, is there a mechanism and I'm not the guy to answer that, that would move them off the receptors by having significant more amount of choline in the system. Screen reaction to almost all food. Do you think that is leaky gut cause liver issue or both?

I would say yes, again. But it can also be histamine. Like that's a really solid histamine situation too.

And where slash which supplements would you start with? Like when, when I just want to like answering these questions is cool. And I like doing these Q and A's. We don't have your medical history. We don't have anything, any knowledge of anything other than the question. And when it's complex like that, like somebody who can't take anything, somebody who has 19 symptoms, somebody who has these complicated situations or like a lab test you got on your own that's difficult to interpret.

Like my recommendation is always to work with a practitioner who's experiencing these things and knows you and your history and your background and your journal and your everything. So there's my disclaimer. Now I'll put Steve on the spot and you have to fix this person's problems. Yeah, I mean, knowing what I know right now, which is like Michael said, I mean, I just have your question. I don't know your age.



I don't know your, I don't know anything else about you. If you had to put a gun to my head and tell me to make your skin feel better, I would put you on Holoimmune, Tri-Bedard, Nex, Holozyme and probably HCL Guard. And if you want, I said those in the order in which I would try them if finances were an issue for you. But the Holoimmune actually has studies for eczema and acne. And then Tri-Bedard, Nex is one of the, those two in combination can really help with the leaky gut and the immune cascade reactions that are happening. The, the actual fixing of the leaky gut and like what else root causes are going on. That's where you start getting into practitioner grade responses.

You start analyzing your stomach acid, your enzymes, things like that. So, good answer. And all of those things, which I always forget to mention, are in the Healthy Gut Shop on the Rebel Health Tribe site. And I just linked it there in the chat. And the code this time to save money is welovesteve15.

And so there's the code there. There's a link, all of the Healthy Gut products for everybody on this webinar. Discounted 15%. You can go today and try out anything that he just mentioned. They're all there in one spot, including the newer B-Cereine, which is the stress instant relief, which dude, thank you for sending me that in when I was in Chicago a few weeks ago for my friend's memorial.

I was very helpful and I used a lot of it because like I said earlier, it says like pump, but then there's like different amounts that come out depending on how serious you are about the pump. And so. Oh, that's a few.

Yeah. And I like saturated my arm in it in both arms and then my head and my neck and whatever before I went to bed the first night I was in America and I slept. I did wake up feeling a little drugged, but I definitely slept. And like I used enough that my arm was like still greasy in the morning. So, but yeah, it was, it was helpful.

That was a very stressful trip and time. So those are great. That's good stuff, by the way, the instant relief B-Cereine is there.

The Holozyme, the Tributarin X, the Holoimmune, the Magnesium HP and the HCL Guard all there in that shop that's linked in the chat. So you do that, use that. Can we only have a couple more? You got a minute, I know we're three after. Yeah, I got, I got like three or four more minutes here.

All right. How can you talk about Candida fungal overgrowth and how your products relate to it? That also the two part webinar that Mary Ann linked that scroll up a little bit in the chat. That's the deep dive, solving the gut digestion puzzle part one and two.

We talk about that in there. We also have two webinars on that topic specifically and there's a microbiome labs mega-micro balance that is propolis and undesalinic acid that's very anti-fungal, but that's symptom management. Steve's answer is going to relate to why is there Candida in your gut overgrown in the first place. Yeah, yeah, I mean, again, Candida, in my opinion, Candida and fungal, fungal cells or fungal microbes or whatever are normal for a gut. They're normal to have in there.

They're just supposed to be held in their place. They're supposed to be in check by the rest of the gut itself. And that includes chemicals like secretory, IGA, it includes motility and like it includes the entire, uh, all the things that are happening in the gut, which is a complex cascade. So, so if the complexity falls apart and the secretory, IGA is low or the motility is low or the acid is low, then you provide opportunity and there's extra food around you provide opportunity for Candida and these other fungals.

To rise up from their, um, we want to keep them in their surf dome, I guess, but we want to keep them, uh, suppressed. And so the question then is, um, even if you bring in antifungals, how do you make sure they stay in their place? And that's where I would just go back to a lot of people who have Candida who have fungal overgrowth, they have low stomach acid.

That is super synonymous, like 80% chance in my opinion. That you have low stomach acid, you could use some sort of stomach support. I like HCL guard obviously, but, um, uh, you would probably also want a motility support.

If you don't use HCL guard, you'd use like a, uh, a motility pro or something like that product from pure. Um, and then enzymes typically help these folks as well. So, um, that's, that's how I think about things. Again, Candida is not the enemy. Uh, it's just supposed to be in its, its, uh, proper place in the whole system.

And again, the question is, the question is when these things overgrow, when things go sideways, what are all the contributing factors that allow us to happen the first place? Okay. And I know you got to run. So you can go, there's one more question. I can answer it. It's, it's a pretty, um, general question.

So I can answer that question. Uh, thanks, Steve. This is awesome.

As always super fun. Um, if anybody has any follow-ups to shoot me an email, Steve's good at getting back to stuff like that. So shoot us an email, let us know if you have any follow-ups and we'll get them to you. And let's hook up and figure out when we can come on and talk about the DAO enzyme. Yeah, yeah, sounds good. All right. Well, thanks everybody. See you later. Thanks Michael. Okay.

Linda, I accidentally erased your question. I would use four to five HCL guard max. Like if you're one of the people that can take a million of them and don't ever react to it, I wouldn't go above like four.

Probably. And base it off how your digestion is. Like if your digestion is doing well, like there's no need to take more of them.

Uh, question, how would one know if they have leaky gut? That can be a ton of different things that can be neurological symptoms such as anxiety and brain fog and fatigue and depression and trouble concentrating and focusing. It can be skin issues such as acne and rashes and rosacea. It can be any of over a hundred different autoimmune conditions can usually be triggered by leaky gut or increased gut permeability. Things like arthritis or systemic inflammation type things can be linked to increased

gut permeability. Now they believe that even conditions like Alzheimer's and dementia and neurodegenerative diseases are linked to increased LPS, which is an endotoxin, the bacteria in the gut make, if it gets too much into the bloodstream through a permeable gut. And then you have your typical GI problems that are, you know, poor nutrient absorption, bloating, gas, diarrhea, upset stomach pain, those kinds of things. So there's really like a million, um, there's a million different symptoms of leaky gut.

And so I hope it was really general, but it's like an impossible to answer with one symptom. And thank you, Steven. Yeah, our Beyond Functional Medicine Summit is going on right now. If you guys are on our email list, you would have gotten, I don't know how many emails about it in the last six weeks, but probably four or five of them. That started what day is today, Wednesday.

That started on Monday. I'm one of the co-hosts of it. It's produced through HealthMeans. There's like 40 interviews there on a wide range of topics that kind of go beyond the standard functional medicine box from more advanced lab testing and treatments and protocols and things like that to deeper layers of healing, like the trauma and the nervous system and like the things I was talking about today, uh, energetics, trauma, nervous system, emotions, those kinds of things. There's a ton of really, really good interviews on there. And for anyone who purchases the package of the interview recordings and the bundle and all the bonuses and all the stuff, which there's like a zillion bonuses and things, you have the option to enroll in a live series of four workshops that I'm teaching with the other co-host, Annapaule, who's a friend of mine, that will start, that will run in April, I think into the first week in May.

It'll be on Saturday mornings in the U.S. But we're going to be teaching four live workshops on deeper levels of healing. So like nervous system stuff, emotions and trauma and attachment healing and like really the type of work that I've been training in for the last six years, it'll be the first time I've taught that in a large scale virtually.

So if you like the, if you like the summit, if you like the interviews and you want to support the project, you can purchase the bundle of that and you'll have the option to sign up for that workshop series. It's the only way. They won't even let me sell it like on the side. So I can't put a link to just buy the workshop series in here.

It's only available through HealthMeans, through the people who purchased the summit package. So thanks for the feedback. I'm glad you guys are enjoying it. I've never, I've never, I've never, we've always produced our own events here at Rebel Health Tribe and I had a friend over there who's been harassing me for, mostly harassing. She's been gently inviting me to host an event for HealthMeans for a really long time and I finally did and it was an interesting experience to not have to be responsible for every single thing that's involved in producing the event and it was nice. So I'm glad that everybody's enjoying it and thanks.

Steven, new workshops and website are coming soon and I will be working with clients for the first time in seven years, starting probably in May, but doing breathwork and trauma release and compassionate inquiry, which is Dr. Gabor Mathe's therapy modality and really helping people who

want to work more on the emotional, energetic trauma nervous system level. So thanks everyone. Thanks for hanging out on the middle of a day, on a weekday.

Great questions for Steve. He's always super fun. I have the most fun on those webinars and I am gently nudging him into doing a podcast with me.

So hopefully that's going to happen and a secret announcement only for people on this webinar. If you noticed, I upgraded the audio videos like a fancy camera here and we are going, I hired a high end production team and we're going to be doing a new podcast. I know we've done natural evolution podcast. We did the rebel health spotlight videos for the last like six to nine months, but those are all like produced in-house by me or us and we're not professionals. And I hired a really professional production team and we're going to have a really high quality, high production value, really cool new show that's going to start recording in April and should be launched in May and should have weekly episodes for literally ever. And so it's going to be a lot of fun and really good and it doesn't even have a name yet.

So I will be announcing it and I am going to try to wrangle Stephen to guest co-host some of the episodes because it's really fun to talk to him and me and him have a really similar background, similar story, similar things we've dealt with and had to fix and heal and work through and we have similar jokes that we like to tell about it. So it always works out well. Thanks Karen. Thanks Andy. Thanks Stephen. Thanks Christina. We'll send this out tomorrow. To sail on the healthy gut stuff, we'll go into the weekend. So if you want to stock up or try any of Steve's products, head over there, use that code. We love Steve 15 and it'll take a big chunk of money off of there. So thanks everyone. We'll talk to you soon. Maybe.