

Michael Roesslein:

All right, we're recording. Maryann, if you're here, it says recording. I will wait for Dr. Cath to pop in. I have been on seven Zooms today. I've been having a lot of problems with Zoom, so I'm hoping that this operates smoothly. Hey, Dr. Cath.

Dr. Cathleen King:

Hi. Hello.

Michael Roesslein:

You're here. I'm here. You can hear me, I can hear you.

Dr. Cathleen King:

Yeah. Yeah.

Michael Roesslein:

Okay. That is more successful than most of my... Far too many Zooms today. Let me fix the chat because they make it so people can't use the chat now. Everyone, everyone, everyone. Okay. If anyone is there and can drop in the chat that you can see and hear us, that would be fantastic and let me know that everything is working good and let us know where you came in from, where you're calling in from, and I'm just making sure that the email reminders went out. Now here, I'm going to try to send... Okay.

Dr. Cathleen King:

I see a Traverse City, Michigan on there. I'm from East Jordan, Michigan. Crystal, who just wrote in. Awesome.

Michael Roesslein:

Great. Okay. Did you guys get reminders that the webinar was starting because Zoom has been really screwy with that? I just want to make sure before we start, I'm just doing a little housekeeping thing.

Dr. Cathleen King:

Sure. No problem. Take your time.

Michael Roesslein:

The last two times, Zoom didn't send out the reminders, so I'm seeing if anybody got reminders that the webinar was starting. Pennsylvania, Gilbert, Arizona, Denver, Massachusetts, California. I've been to Traverse City, Michigan.

Dr. Cathleen King:

Have you?

Michael Roesslein:

Yeah. I have no reminder. No reminder. Perfect. Thanks. Zoom. So we have hundreds of people registered for the webinar, and now a lot of them are going to be watching the replay because Zoom is not sending reminders.

Dr. Cathleen King:

Yeah, I've had that experience as well.

Michael Roesslein:

Deep breath and deal with technology. So thank you to all of you who got here on your own without the reminders, that's impressive. I don't think I've ever personally accomplished such a feat, so thank you. My life would turn into a disaster if I didn't have reminders. This is going to be fun. I'm looking forward to this. And usually at the end of a really long day with seven Zooms, I would be dredging along, but this conversation is one that I'm looking forward to having. So thank you for everyone who's here live and for everyone who's going to watch the recording, which we'll probably start right now on the edited version. I'm Michael, I'm your host. As usual, I'm here with a new guest. Well, we did the Rebel Health Spotlight, which some of you have watched that we sent out this week, the interview that we recorded not long ago, but this is the first webinar I've ever done, at least here for RHT with Dr. Cath.

So I just want to give a little introduction and then we're going to talk about stuff that really lights both of us up, so I think it'll be a fun conversation. So Dr. Cathleen King is a doctor of physical therapy who loves teaching neuroscience principles. She's an intuitive mind-body practitioner, mom and the founder and CEO of the Primal Trust Academy & Community. Her superpower is helping people with chronic health conditions, see the patterns that have bound them, help them regulate their nervous systems through a multifaceted brain body approach, and create transformational life changes. And we will get into a little bit about what all of that means in a second. She found her own liberation from over a decade of debilitating chronic Lyme disease, mold illness, microbiome imbalance, chronic fatigue, PTSD, and a host of other challenges that left her mainly bedbound in a dark room.

After unlocking her own healing through neuroplasticity based methods and her own intuitive approach, she created the Primal Trust Academy & Community to combine the latest neuroscience education wisdom from mind body leaders, top down brain retraining and bottom up somatic healing techniques to help others reclaim vibrant health. I could go on and on, but I think that we should just get to talking and I love your work. I love what you do. You've created such an essential thing that needs to exist for so many people who, like we talked about in the other interview, functional medicine is great, it's way better for a lot of things and a lot of purposes than conventional medicine, but it still leaves a lot of people thinking that they're too broken to fix because they didn't respond to x, y, z protocol or the supplement didn't do anything for them, or that dietary change didn't work or whatever the thing is, and there's a reason for that.

There are reasons why they find themselves in those situations. So I know we did it on the interview, on the spotlight interview, but a very brief, I mentioned it in your bio there, just where you came from to be doing the work that you're doing now to I think people can really relate.

Dr. Cathleen King:

Yeah. Well, I was one of those people that went from doctor to doctor year after year after year trying to figure out what was wrong with me. And at first they gave me something to help with my stomach acid. Then it was an anxiety pill, and then these weird diagnoses just kept piling up. And I went from western medicine to naturopath to functional medicine to energy medicine to shamanism, what is wrong with me? And over time and over the years, I racked up Lyme disease, mold toxicity, dysautonomia, hormone stuff, autoimmune, the stuff you mentioned, so frustrating. And I also had a medical background. I'm a physical therapist, I worked with chronic pain and resolving chronic pain, and I was in an resolving chronic illness situation, and eventually I'm like, "This is not working." We spent everything, we were broke, I couldn't work.

I was at this point seeing the best doctors I could see. And yeah, I was that person that just would respond for a little while to treatment and then I would crash again. It was like, "Am I cursed? What is going on?" I feel like my body is not even human. It just felt like it was so broken. It got to the point where I couldn't stand light and sound. I was living in this dark, quiet room. I had two small kids and I was like, I'm going to lose out on their whole life and I

can't fix myself, and these really smart doctors can't fix me either. And that moment was hot burning terror because I felt so out of control. Even the doctors cannot fix this. And somehow I was like, I just have to live with what I've got, I've got to do what I can.

And it was sort of a surrendered moment of I'm just going to go outside and lay on the grass and try to be with my kids. I remember laying there and letting them tickle me because I was like, at least the tickle felt better than what I was feeling. And they were laughing and I'm like, I don't know what else to do, but I need to start living. And in that transition of giving up, I remembered some things that I had learned as a physical therapist that the brain modulated pain, but it also modulated the immune system and the detox system. I'm like, what if I just start focusing on my own brain, my own self-regulation? And that was really what turned me around. Was focusing not on the infection, not on my microbiome, not even on the diet anymore, but just my own brain and nervous system just like I would do with someone with chronic pain. And sure enough, the immune system and other things started to respond, and that was what turned me around.

Michael Roesslein:

It's interesting putting two and two together with the correlation between like, oh, this controls the pain response, but it also controls the immune system. So you used terminology or there's terminology in your bio that is top down and bottom up. I think, well, I'm going to get to that in a minute actually, because brain retraining was originally a big focus of your work and for your own recovery, and you thought it was like this is the thing, this is the thing everybody needs to do. We'll talk about that in a second, but I want to just mention how do people get to the point where brain retraining or bottom up somatic approaches or nervous system overall regulation practices, how have we gotten to the point where this is such a necessity for so many people?

What have you seen or what do you believe or what have you learned is... How are we getting into that state? How are so many people ending up in this place where their nervous system is haywire, whether it's the brain patterns or the somatic side of things in the body or whatever, so their immune systems all over, what the hell is going on?

Dr. Cathleen King:

Yeah. I have two answers for that. The first answer is more practical in that the onslaught of impact with toxins, stresses, busyness, pressure, technology has completely stressed out our nervous system. I mean, think about when we grew up 30 years ago, it was a different world. Without the phones and the computers, we were present, we would walk to our friend's house and be present in our bodies. We walked down the street, we weren't on our phone. So on one hand we had way less stressors to our nervous system, and all of this adds up. The EMFs, the busyness, all the things, they are just a constant irritant to our brain and our nervous system, which already has to deal with this microbiome and toxins, et cetera, and it's way too much.

That's one answer, but I actually think there's another answer. And I think that we are on the brink of what I would call healing our ancestry, meaning those of us that come from a lot of generational patterns. Some of us are being asked to uproot them and look at them and heal them in a way that nobody in our history could do. So meaning we have to face that internal shit that has been buried for year after year, generation after generation, because our bodies are not letting us bypass what's been stored. And so that's a whole other can of worms. But I think both play into that being this ancestral chain breaker and being self-responsible to handle the onslaught of toxins and stimulus to our nervous system.

Michael Roesslein:

Okay. Yeah, and that makes sense. And yeah, the stimulation's insane. A lot of people that have been following here for the last lot of months know that it's been a really difficult, stressful, and challenging time here in my life for the last bunch of months. And I've had to get really consistent with certain practices, how I start my day, how I

finish my day, how I take breaks during the day, how I am careful with what I'm doing at certain times of day. And I've noticed such a massive difference in something as simple as not opening my phone for an hour after I wake up, leaving it on airplane for an hour after I wake up, it's incredible the difference that makes in my nervous system for the whole rest of the day, because you're not starting getting bombarded with the Internet's great.

That's how we're doing this, it's how I know you, it's how I communicated with all these people. It's fantastic. And we are not designed to consume mass danger and tragedy and alarms and things that we get put in front of us all the time. We're not supposed to know everything that's going on in the world all at the same time, and then have it broadcast to you in a terrifying way simultaneously.

Dr. Cathleen King:

Yeah, yeah.

Michael Roesslein:

And so I guess, yeah, if you combine that overstimulation with things that we've all been carrying, which is a fascinating topic in and of itself, I've done a couple interviews in my career with people who practice family constellations work, which is really cool. And that's more of the abstract, conceptual, esoteric version of familial trauma, but there's actual science showing that trauma changes DNA expression, for lots of generations they do this in animals and people think, oh, our generation didn't... Or what family history and every family's history, there's stuff.

So you're saying there's familial stuff, there's overstimulation stuff, there's toxins exposure, and then day-to-day traumas that we experience in our life, either acute or growing up. So that leaves us where our nervous system is in complete disarray, which you mentioned at the beginning, the immune system then doesn't function properly, which is why you and a lot of other people find themselves with mold toxicity and Lyme disease and reactive to apples or some random where the diets come in too. They're like, I did this diet, but I'm still responding to cabbage. And it's like, okay, well, it's not the cabbage. So, I guess from there, I'd like to talk about the brain retraining because that's something that I think our audience has heard of.

They know about, they may have heard of DNRS or they may have heard of the Gupta Program, things like that, that focus entirely on brain retraining. So you found brain retraining. Can you share what are we talking about? What is brain retraining and then what does that do? And then before everyone runs and starts doing brain retraining immediately, we'll talk about how maybe that's not the best place to start.

Dr. Cathleen King:

Yeah, it's such a... Thank you. Brain retraining is simply teaching the brain, which is a rehearsal machine. The brain is a rehearsal machine to rehearse something differently. Neuroplasticity is the ability to rewire the brain, the habitual circuits of the brain to have one focus and then another focus. And so with brain retraining, typically we're targeting a part of the brain called the limbic system, which is the emotional center of the brain for the purpose of calming down the amygdala and some other structures and actually changing the biochemical output of the hypothalamus and the subsequent organs, the pituitary gland, the adrenals, et cetera, et cetera. So you're trying to biohack the limbic system to produce a different biochemistry so that your body runs differently. So if you're wanting your digestion to improve or your immune system or your detoxification system to improve, that comes all the way back to the limbic system and the hypothalamus.

And the cool thing is we can biohack that hypothalamus with brain retraining or self-directed neuroplasticity, and it's very powerful and it's very effective. And there's more to it than that. There's more to the process of changing our biochemistry in a more holistic way and beyond brain retraining, but brain retraining, it's definitely a tool that is in my toolbox in Primal Trust, and it's a tool that I recommend everybody learn, including my children, because it

gives you this ability to self-regulate through your mental perception in the moment and calm down that over reactive limbic system for the purpose of being able to come into the body and coming into the body is ultimately what we're wanting. We're wanting to be present in the body, but sometimes we need to shift our brain state in order to get our conscious presence in our body without being in a state of threat. And then from there, there's another journey. You're muted, Michael.

Michael Roesslein:

Oh, weird.

Dr. Cathleen King:

There.

Michael Roesslein:

Zoom today has been trying to make an insane person, but they're not going to get me. I don't care, they can keep doing it. So this is an effective tool. Can you share, we're talking about you can self-directed neuroplasticity and you can hack the limbic system to change your biochemistry and we change our brain and change the neuro pathways, what does this actually look like in practice? I know that's more complex of a question than we can answer here, and there's a million different exercises or whatever, but what does it really look like functionally to implement this to your life?

Dr. Cathleen King:

Yeah. The majority of brain retraining programs focus on two things. They focus on your memory center, which is your hippocampus and some other structures, and they focus on your visualization center. So what we tend to do is we focus on memories, either rehearsing memories or re-patterning memories, and we focus on visualizing a sense of ourself in the future because our amygdala, that limbic system, that emotional center of our brain is always looking to the past to make a meaning of a current situation. And it's looking to the future to decide what kind of threat might be coming. So if you can send messages to the brain that are positive or safety based of the past, positive or safety based of the future to the present moment to the amygdala, its threat response calms down and therefore the biochemistry of this present moment will become a little more optimal. So it's basically visualization exercises, mental rehearsal exercises, perceiving the past and the future a little differently.

Michael Roesslein:

That's interesting. I'm taking a lot of notes. Yeah, I can relate. I call it a doom scroller, but I have a really good one that can pick out the worst thing that's going to happen in every single situation and then run with it. And if one tiny thing goes bad, that means that that pattern is going to continue forever until the doom happens. Not that like, oh, that was a bad day, or this wasn't a good outcome for this one thing, it's that everything is going to suck from this point on and it's just going to get worse. And that's because that's a pattern, that's what it learned how to do. And I've actually learned in my own journey that that's actually quite common for adoptees, I'm an adoptee and that having that pattern is quite common for adoptees.

So I've done a lot of work around learning to interrupt that and give it new stories and also where it lives in the body, which is something else we can talk about. So you found this during your journey, this brain retraining, I don't know which program or teacher or thing you found first, it doesn't really matter. There's a lot of very similar work out there. And so you thought you'd found the thing, right? This is the thing that fixes everyone, and so everyone just needs to do this thing and they need to do it right now, and then it's going to solve all of these really complex situations. We found it.

Dr. Cathleen King:

Yeah. So, what happened?

Michael Roesslein:

We had a conversation about this on the spotlight interview and then off camera too, we've talked about it a lot, so I know where we're going with this, but why is this not always the best place to start for people? There might be people in our audience who have tried DNRS or they've tried a brain retraining program and either wasn't something they could follow, they couldn't stick with it or they didn't get the results. So who's not a prime candidate to start with that?

Dr. Cathleen King:

Yeah. Well, first of all, I'll say what I have found is that if you don't have a sense of your own nervous system or even simple vagal toning tools in your tool belt, when you start working in with the limbic system and this emotional center of the brain, there can be some side effects that can be pretty disruptive if you don't have some basic tools on board. So the person that I believe may need some entry level stuff, which is how I approach things now, would be somebody with a history of trauma or severe attachment wounding, which is trauma. Meaning, they tend to be very highly sensitive, or they're somebody who has felt, we're going to use the word gaslit, meaning invalidated, brain retraining can feel very invalidating to do. There's a reason to do it, an important reason to do it, but it can feel initially very invalidating.

And so those kinds of personalities need a little bit more context before they go into brain retraining. They need a little bit more basic somatic tools to help them stay in the body so they don't dissociate and they need to learn a proper sequencing of when to do brain retraining versus when to do somatics and how to weave that together. And I was that person. I was the sensitive person with trauma and I was doing brain retraining, and I thought, oh my gosh, this is great. And I was having symptom improvement. But then what happened one day was that as my limbic system calmed down, a Pandora's box opened up and all this childhood memory flooded me because I was safe enough to feel it, but then I didn't have the somatic capacity to process it, so I had to go on-

Michael Roesslein:

You've had to convince your brain that you were safe.

Dr. Cathleen King:

My brain was protecting me.

Michael Roesslein:

Like, oh, we're safe now, here's this.

Dr. Cathleen King:

Here's this and ta-da, this is what really happened. And I was like, oh. And then I had to go on another journey, which is more of the somatic trauma processing. And then I was like, well, in hindsight, here's the sequence I would have done. And I found a lot of people from DNRS and Gupta done these other programs were having this explosion of like, oh, crap, now what? And they needed to go through a little bit of a bottom up approach to process and integrate what was happening.

Michael Roesslein:

Yeah, I can relate to that too. I think we've had really similar journeys, equal trajectory on a lot of things and equal experiences like I had the same things happen, and I've now worked with a lot of people doing the bottoms up somatic work that were doing more top-down things and ran into something like that. All of a sudden they either remembered a whole bunch of stuff or their body started having... Because the explicit memories, there's the actual things you can remember, this happened, I remember this thing. But then there's the implicit memory, the things the body remembers, so the sensations that will come.

So I've worked with a lot of people then who were doing that brain focused work, and then all of a sudden I wake up at four in the morning and my body's racing and I am shaking and I'm physically anxious, but I can't think of anything I'm scared of. And I'm like, okay, because you mentioned having the somatic capacity, and we're using a lot of terminology that I don't know if people here. So I just want to clear up a couple of things. You said it and I've said it. There's the top down, which is the brain focused stuff that should influence the rest of the body. And then you mentioned somatics and bottoms up, and I'm curious how you define or what that means to you, like somatics or bottoms up type work. What does that mean?

Dr. Cathleen King:

Yeah. Somatic would be the felt experience of the body, meaning the sensations, the presence that you feel of your own body or lack thereof of what you feel in the body. Whereas top down is the mental storyline imagery perception. So we're working with both the felt sense of the body and the mental world together in the top down/bottom up approach.

Michael Roesslein:

Okay. Yeah, and you mentioned dissociation, and I think there's a lot of people with chronic disease who have checked out from the body and for good reason, that's a protective mechanism. Something was too difficult or too painful or too anything. So they may want to jump right into the mental things because I know that was for me, I didn't even know I had anxiety until I was 35 and stopped doing all the things I was doing to mask it or cover it or soothe it or cope with it. And then all of a sudden my body went totally bonkers and I'm shaky, I'm jittery, I'm all these things, and I'm like, what the hell is going on? So I was like, oh, I've never actually felt my body before.

And so that is good to know. So if somebody finds that problem, then maybe pause with the brain retraining or incorporate body-based somatic practices, which what you've put together at Primal Trust has these steps and incorporates all of these things and these practices and it's super comprehensive and it's exactly what we're talking about, put into a thing that people can find themselves on. I'm here, I'm here. So our conversation here isn't linear, and I'm just noticing that. Which brings me to the next point I wanted to talk about is that this process also isn't linear.

So you found yourself really sick, then brain retraining was one of the first things you found that really helped a lot. You had a symptom improvement, then all of a sudden these things came flooding and you were like, oh, we just took nine steps backwards, now I'm a mess. So then you had to learn about somatic work and trauma work and going through the body to increase the capacity of the body to hold uncomfortable sensations essentially so that those can be released. And that's the kind of work I do now and it's really, really potent. But even doing that, there will be days where you feel like you're the champion of that and that you have this new invincible capacity. And then I just want to set expectations. So can you talk a little bit on the real shape of the healing journey if it's not a straight line?

Dr. Cathleen King:

Yeah. I'm so glad to talk about this. I feel like this is something that I wish people could get a more realistic idea of. You'll see a lot of people platform, leaders, coaches claim their recovery story using brain retraining alone or

somatics alone, and you think they've arrived in some magical place where their life is now all put together and they never deal with this stuff again. And it's not true. It's not true. Our nervous system goes through periods of regulation. We have situations come, it can dysregulate and you get to go through another layer. Now, often the periods of dysregulation are shorter or they're not as severe as you gain more tools and capacity, but life is like this even for me, and I tell people, do not put me on a pedestal. Just because I teach this, I am not sitting here in a blissed out nervous system heaven all the time, not at all.

I have things happen that knock me down and I have to use my basic tools and gain more capacity and work on the attachment in a new way or work on my body presencing in a new way. And it's absolutely something to embrace that nervous system work and healing work and trauma work is simply about building capacity to handle the ebb and the flow. And when an ebb happens, instead of being frustrated, expect it, you're a human. You're a human and your nervous system is human and it's never going to be, I have not met a human on this planet whose nervous system either they're so dissociated and out of touch if they don't feel it, that it's just totally together all the time.

Michael Roesslein:

Yeah, thank you for being real. I see a lot of those stories too. And I am actually building my new practice and career doing bottom up work, and I'm working with great coaches and people who are helping with messaging and how to talk about the work. And I've taken a couple little workshops on your story, how to share your story in a powerful way, and the instruction there, and it's very well-meaning is always, and now I, blah, blah, blah, blah, blah, blah, and x, y, z problems are gone. And I used these tools to do it and now I can share with you the tools I use to be perfect now. And I am a blissed out happy floating magician. And that is complete bullshit, but it is well-intentioned, it's well-intentioned, they're trying to help people get the word out and you're in a much better state than you were.

You're not laying in the bed in the dark and totally disabled. I am not rocking, mumbling to myself on a couch, completely dissociated not knowing where I am because I've been there and I've just gone through what is probably the most difficult three or four month stretch of my life emotionally to handle and stress-wise and sleep and just really, really, really hard. And I made it through that and I'm still in it, but I made it through that without a major complete disaster meltdown wreck, which is fine if you have those.

I don't mean to judge, but I made it through it in one piece because I did the work and had increased my capacity to handle things and had practices and had tools and had support. But yeah, I felt terrible a lot of the time. I was anxious. There was nights I couldn't sleep. There were times I woke up in the middle of the night and I couldn't go back to sleep. So I went for a walk at three in the morning. That is not what the story of someone who's supposed to help people with that sort of thing should be doing. Right?

Dr. Cathleen King:

They don't put that on their website here I am still.

Michael Roesslein:

Yeah, it didn't go on my Instagram. Here I am pacing outside worried at 3:30 in the morning. So we're telling you that there is no perfect, that everybody goes up and down and even though you created this incredible... It is really remarkable. I love your community and what you've put together there. It's really unique because there's so many that now there's a number of those brain retraining programs, the bigger ones that I mentioned, and then there's people who went through that and then made their own one that's very similar. And then I know a lot of somatic therapists and that's actually much harder to do as a group thing or a course or whatever than the brain retraining is. The brain retraining can be pretty autonomous, but there's others that are creating those systems and programs.



But rarely have I seen them put together at all put together and then put together in a way that helps people self-identify where they are and which of these tools would be right for them.

And then there's live stuff they can come to. There's coaching, there's options for different levels of touch and the community aspect of it, I think that's something that doesn't get talked about in this space either. That's essential for healing. So that's not a question, that was just a commending you for what you've created and that I really like it. And we'll send you guys links and stuff in the follow-up email and we'll send you information to go check it out. But maybe if you could speak just openly to the person out there who's listening or watching that has been up and down in their healing journey and has felt like the champion and then had setbacks and then thought that they stopped and then that the thing they're doing is never going to work or insert story. What would you say to that person?

Dr. Cathleen King:

I'll say I understand and that part of this journey is embracing... This is something I was thinking about recently, the best version of you. We're often trying to make this best version of us, the one that's healed, the one that's self-regulated, the one that's leading, the one that's doing these things, the best version of you is the one that is with you when you are in that on your knees shaking because you're so overwhelmed and the version of you that's there leading and teaching the class and the version that's afraid, there's a part of you that has been with you all along, all along in the highs and the lows. And when you can recognize that that part of you, whether you're with you when you're feeling completely sick and broken again, that's still best version of you, is the one that is present with you.

And that identity is what we're trying to bring forward in this journey. That there's an identity that exists no matter where you're at, and that identity is worthy and valid, whether you're rocking yourself like you say on the floor in fear or you're teaching your greatest, latest new thing. And that's something that I had to find myself especially as started to become this leader of this community. I was like, I'm not always up here, they think I'm up here all the time, but I'm not. I mean, this summer I got knocked down. I got very sick in Central America. I was scared, I was in a jungle. I was back into like, oh my gosh, and I had to find my own worthiness. Can the CEO of Primal Trust ever get sick and be scared? Am I still worthy? Yeah, I am because that person, the me that's teaching two months ago is still the same me learning to self regularly through a new experience, and that is the best version of me.

That I can come out and share with you my highs and my lows, and the person who's struggling, your best version is right there. And there's something that happens in our body as we start to stop trying to fix this broken part of ourself and start to embrace that we've got this magnificent part of us with us at all times. It's like there's a calm that starts to come through and a capacity that starts to allow ourselves to be human. And the body ironically does change and heal in that embracing of the best version of ourself that is always there no matter what.

And so that's what I am aiming to embrace more of, to not just be the leader that knows everything, but to be the human walking the journey beside you and finding the worthiness of me in my lower moments as well and sharing what that's like because that's just what the true journey actually is. I might not have Lyme disease anymore knocking me down, but I have things, I have attachment wounding I'm dealing with. I have even some leftover stuff from my infection this summer I'm dealing with. It's not perfect, my body, it's not perfect, but it's fricking resilient and that's what I lean into.

Michael Roesslein:

That's really beautiful. Thank you for sharing that. And there's so many words that I've come across or terms or things to describe what it is that you are pointing towards. Spiritual practices, call it the soul, internal family systems, which I've done a lot of therapy and refers to it as the self with the big S, but it's the consistent you that's been there, that's the same you that was there when you were three years old, that's there now that doesn't get

wounded, it isn't hurt, it's not judgmental, it's not all these things. It's where you can witness all those things from and it's always there with you all the time.

And it's what you actually are. And I think people get so identified with the stories and the parts and the things that happen, and you're not any more defined by being the person who is sick in the jungle than you are by being the teacher who is sharing the tools. And the tools don't become any less relevant or viable or I don't know the right word, because the person who taught you about them got sick. So I see that. I think there's a lot of fear and a lot of insecurity in people, especially people who find themselves in those positions. I can't speak for you, but I know when I spoke to, I don't know how many people once at a conference, like 400 people live once, and I was just up there like, holy shit, what am I doing here doing this? And I barely remember doing it. And then people were like, oh, it went perfect, you did so good. And I was, I terrified.

So I think that there's a lot of fear involved like, oh, if I let them see me and that I'm not this perfect thing, that it's going to discredit something or whatever. But yeah, I think that that becomes... I mean, that's not the work you started in, you're a doctor of physical therapy and my master's degree is in exercise physiology, and I did rehab work, so I was working with doctors of physical therapy. So we were in similar rooms doing similar stuff and now we're talking about finding your soul and essence and whatever. So it's interesting the progression that it goes, but it's like different layers. It goes layer by layer by layer by layer, and that's the last layer, that's the last thing.

That's the thing you find when you've already gone through everything else. When everything else is stripped away, that's the only thing that's left. So there's your unrequested esoteric lesson for the day, everyone. But I think it's just beautiful for people to hear that this journey can go that deep because it's not blood chemistry, and it is, that's like the physical manifestation of being out of alignment with this thing or out of touch with this thing or separated from this thing. And there's a place for lab testing, there's a place for supplements, there's a place for dietary things. It'll move the needle for tons of people, but for those people who want to see how far the rabbit hole goes or need to, I think very few people do it out of a want, I know I didn't.

It was this or I would die, that was pretty much what the options were. So I just was like, all right, I guess I'll see where this goes because I didn't feel like I had a choice. So just keep going, I guess, is that. So we do have a couple questions that I'd like to get out there. Is brain retraining the same thing as DNRS or ReOrigin or is this a different program? Also, this sounds a lot like NLP, which is what is the difference or is brain training a type of NLP?

Dr. Cathleen King:

So brain retraining or self-directed neuroplasticity has components of NLP in it, ReOrigin, DNRS, Gupta based, those are all brain retraining programs. I'm speaking our program, brain retraining is one aspect of the program, it's an important aspect, but it's only one aspect. So NLP is included in part of how you rewire your brain. So yeah, I don't know, does that answer it? Yeah.

Michael Roesslein:

It does for me. And they're welcome to comment another question if it doesn't for them. So Eve wants to know, can you truly heal after 25 plus years of complex chronic illness, similar tangle of mold, toxins, pathogen seems like the brain and body after 57 years just doesn't have the ability to heal?

Dr. Cathleen King:

Yeah. On our testimonials page, we've got some amazing testimonials of people who, yeah, decades, decades, because the brain is neuroplastic and it really ultimately comes down to self-creating a different sense of identity out of that illness identity and reinventing yourself and your biochemistry tends to come along. Now, it doesn't mean that you don't feel things and you don't have your ups and downs, but absolutely people shift out of decades of biochemical disharmony when they shift their brain state and they do the deeper work, the somatic work of

processing what's in there. It's just a matter of being willing to see things differently and being willing to feel what needs to be felt and doing the practices to rewire the communication between the brain and the body enough. But absolutely, we've got a lot of, I'd say even elderly people in my community having amazing results, which is just so cool.

Michael Roesslein:

Yeah, I know a couple of people that have been through and your site and a couple other similar, this type of work that have reversed things after 20, 25, 30 years. Not just physical things, but addictions, anxiety, panic disorders, depression. I had really severe anxiety for 30 years and didn't know it. But yes, it's definitely possible. And I think those are the ones that are the most gratifying when I see that happen. It's such a beautiful thing to see. And there's one more in the chat. What preliminary work should a person look for to prepare?

So this question was from about 20 minutes ago when we were talking about how brain retraining might not be the best first step. Somatics is down up. How do we find top down? Top-down work is the brain retraining? Is the limbic system work that she's talking about? What kind of therapies or works do we look for? I'm happy to name a couple. I know you have all of this incorporated in Primal Trust, but as far as somatic based practices, modalities, therapies, what have you personally either done as a client or patient or been trained in or know of or recommend?

Dr. Cathleen King:

Yeah. I often tell people to start learning a breath practice that resonates with them just because that's the beginning. It's like you're starting to get in touch with something you're doing all day long. HeartMath is a great one. There's lots of them on Insight Timer, and it's just that awareness process is putting you into your body and toning your vagus nerve right there. So breath practice would be a really good one. And another one just for beginning emotional processing is expressive writing or automatic writing. Every day taking three to five minutes writing every single thing you're thinking, ripping that paper up when you're done and throwing it away is a process of seeing what's actually... The talk in your mind that is over and over and over repetitive and then showing your brain that you are putting that elsewhere. So it's a way of becoming both aware of the internal thoughts and aware of the state of your breath. That's where I would start.

Michael Roesslein:

Okay. Yeah. I've been training in breathing and breath work now for about a year and a half. And I mean, I've done it for a lot of years, but training to facilitate for a year and a half, and it's pretty remarkable. I just interviewed Patrick McKeown, who owns the boutique breathing clinic and the Oxygen Advantage.

Dr. Cathleen King:

Yeah, I used the technique. Very, very powerful for me. Yeah.

Michael Roesslein:

He's a cool guy. I'm actually recording with him tomorrow for the Beyond Functional Medicine Summit that I'm co-hosting for health means, which I haven't announced to this community yet, but that will be airing in March. But I'm actually interviewing Patrick for that tomorrow. But his breathing techniques and what I learned about from him and breathing in general around how we... Because there's breath work, there's practices to consciously change your breath to get at a thing, to get a result. But then there's how do you breathe moment to moment. And Patrick works a lot more with becoming mindful of how you breathe moment to moment, and it's just completely backwards to what we were taught.

It took me how his low and slow breathing and actually increasing carbon dioxide in the blood makes the tissues get more oxygenate. Anyways, watch the Rebel Health Spotlight video, it's in our video section on our site. I think I already posted it with Patrick, if not, it's coming out soon. I have a podcast with him. But the breath is the most fundamental tool that we have to alter our physiology and it doesn't cost anything.

Dr. Cathleen King:

And I'll just give him a shout-out. His technique really helped to reverse my chronic anxiety disorder using Buteyko. I was doing Buteyko along with brain retraining and functional neurology at the beginning. So tell him thank you tomorrow when you talk to him because he really helped me.

Michael Roesslein:

I will. I just put that in the chat. The Buteyko breathing in of Patrick. Can regulate work with children? I'm guessing they're talking about can this work in general work with children?

Dr. Cathleen King:

What I usually say, and this is what I have to do with my own children, it works best when the adults are regulating their nervous system. Because the number one thing that children regulate with is you now. You can sit there and do breathing practices with them. I do brain retraining with my kids at night. We'll do a visualization together and teach them the algorithm, so they have it. It's fun. It's a way of telling a story. I teach them the principles. I don't like children to go through this alone because sometimes it's sending them a message that there's something wrong with them and they need to fix themselves. But when the adult takes that responsibility to learn the tools and includes the children as an activity, then I think it can be powerful.

Michael Roesslein:

I'm really happy that you said that. In Compassionate Inquiry, I studied with Gabor Maté and he's co-authored books with Gordon Neufeld and Dan Siegel who are child development psychology, neuroscience people for children. And their answer to that question isn't even usually as diplomatic and as kind as yours was. And it is like the child will be regulated if the environment and the parents are regulated. So I think it's essential that parents do the work with the kids. And I love that you mentioned that they would get the idea that something's wrong with them, because I got that message a lot when I was young that something was wrong with me. That's a very difficult program to change.

Dr. Cathleen King:

It is. There's a study I just read yesterday where they put teens through a mindfulness program, and it made them worse because they were being trained to track their beliefs. And the way that it was taught was like, oh, there's something wrong with me. And there's some interesting studies about group mindfulness therapy with kids and teens especially that it can have a counter effect because it's like an adult is telling them something is wrong with it. So you need to be pretty careful with the kid population.

Michael Roesslein:

That's interesting. I could see how that could happen too, because mindfulness practices, especially if led by a group and you don't have any individual help or anything supporting you, you're just going to become really aware of the racing thoughts in your brain and your mind. And for a lot of kids, the racing thoughts in their mind probably aren't very kind. So if you don't have any help to unblend yourself from those or put them in context or get support around it or talk about it or get it changed, flip it, I could see where it would reprint because the brain is patterns.

It is neuroplasticity. So then it would strengthen the... Well, when I get quiet, I think of this when I think of this. Yeah. I also saw a study that's saying that mindfulness practices can make people more narcissistic, which I didn't read that article, the headline was enough for me. I just laughed and was like, I've met some of those people. The spiritual community is not empty of narcissism or sociopathic behavior. So I put a link in the chat for a free ebook that you've created on brain retraining, somatics, and vagus nerve stimulation. People can go there, they can grab that, they can download that. In the email that I send out with the recording of this webinar, I will include some more links to some more stuff for Dr. Cath on the site. You guys do a discovery call with Primal Trust Academy if people are interested in checking out what you're doing to see if it's for them, they can book a free discovery call and ask questions, right?

Dr. Cathleen King:

Yep, absolutely. We have a lot of other free resources on our website and on Instagram and on YouTube. So there's a lot of ways to just for free look at what this is all about. And in the community, we have daily help live classes every day. It's not just a home program, you'll be taken care of if it calls to you.

Michael Roesslein:

Yeah. I didn't even ask you to just give a little overview synopsis of it. I referenced Primal Trust a lot. In your bio I talked about how much I love it and how it combines a lot of the things that we talked about today in a way that's really accessible and well-supported. But I know that your language or verbiage around it will be more polished than mine. So can you just share just for a couple of minutes about what it is that you created there?

Dr. Cathleen King:

Sure. I wanted to create more than a course, I wanted to create the journey that I went on and in a community setting with live help, all the things that I wish I had, I created after I was done. And so we have a community. We have recorded courses, but we have live courses and we have live help. So, basically, you can go through it by yourself if you want, or you can meet and go through each module in a group setting and talk about it. We have study groups that you can join and be a part of. Live classes just to show up and practice regulation practices of all types, top down, bottom up. And it's basically a community of people just like you who are dealing with chronic symptoms and have been around the block and want to go through the process together. And we start initially with regulating the nervous system.

And once you get some capacity, then we work with the trauma and attachment wounding, and we'll go through a process to do that. And then we have even a level three community where it's people getting back to work, getting into their mission parenting relationships where there's support for those that have gotten the basic skills. And so it's meant to be a place where you're understood and you have somebody every day to ask questions. You don't feel alone anymore. And you can have find that reassurance that you're needing in this process because we all need it, I need it still. This is how it is, we heal together in community. And so that's the way I created the program.

Michael Roesslein:

Thank you. Yeah, it's fantastic and it has so much. And I think that that community aspect is completely overlooked in healing work within functional medicine. I know I have a friend, James Mascal, who's focused now his whole career now in functional medicine, is in creating community functional medicine situations like healing with doctors, leading groups through community-based healing programs. And they're seeing pretty incredible results just from having really simple times once a week where local people get together in person and see each other. And I'm doing a lot of trauma work and grief work and learning a lot about grief and grief work and trauma work, and this was never done on an individual basis. That kind of stuff was never held by individuals or even by one

person, it was always a community, it was always the village. It was always a group. It was always that angle with things. And so I think the community aspect of it is really huge.

Dr. Cathleen King:

Yes, it is.

Michael Roesslein:

Yeah. We'll share a bunch of links, there's a lot of stuff over there, a lot of free resources, the ebook. There's a lot of different ways to experience these sort of things. So thank you so much for sharing your story and your work and everything that you shared so openly. I always really enjoy having real conversations with people who also are willing to share their actual story and their actual journey and what things are really like. Sometimes I feel like an alien when I'm talking to some of these people, because some people I talk to in this world, I'm not going to name names, but there's people in the industry who put on the perfect face and the perfect everything and the thing, and then I'll tell them, they'll be like, "Oh, how are you?" And I'm like, "I'm really struggling. There's really hard things going on right now." And they're like, oh, slink away and hide over there.

Dr. Cathleen King:

Yeah. It'll ruin my reputation if I hang out with you.

Michael Roesslein:

Yeah, I can't hang out with the sad guy. So, no, it's just really refreshing and I think that it really resonates with people, and the work is super important. So thank you so much for everything you shared, for everything you're doing. I'll send out more links, everybody will get them tomorrow or the next day, and I'd love to collaborate more. If you ever need a guest teacher or anything, I'd love to-

Dr. Cathleen King:

I would love to have you in. Absolutely.

Michael Roesslein:

I'd love to teach them stuff over there.

Dr. Cathleen King:

Yeah, let's do it.

Michael Roesslein:

Let's stay in touch. Thanks everybody. We got a lot of people on live, even though Zoom did not send out the reminders, so there were a lot of go-getters who found their way here without the reminder emails. Thanks, Zoom. And yeah, let's stay in touch. Let's do more stuff together, and thank you so much for everything that you're doing.

Dr. Cathleen King:

Thank you for giving me the opportunity to talk about what really matters and how the journey actually looks.

Michael Roesslein:

Awesome.

Dr. Cathleen King:

Yeah.