

Dr. Jill

Your Functional Medicine Expert®
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[#6: A Naturopathic Approach to Supporting the Immune System](#)

Dr. Jill 0:13

Hello, everyone. Thank you for joining us on this [slightly] cloudy Saturday afternoon here in Boulder, Colorado. But hopefully, where you're at, the sun is shining. I am joined by not only a colleague whom I highly respect but [also] a dear friend, Dr. Shelese Pratt. I'm just so excited to have her on today to talk about naturopathic medicine. [Whether] you have experienced that before or you haven't, hopefully, you'll learn a lot more by the end of this Zoom call. I would love for you guys to share if you find this interesting. And write your comments because we'll be either looking at those during the call and trying to answer your questions, or we'll come back later and answer questions, giving resources as much as we can. So just know that those will be read, and we will be answering them.

Dr. Jill 1:00

So I'd love to just start by introducing my friend formally, and then we'll jump right into the conversation. So Dr. Pratt believes in integrative and holistic medicine. We totally share this mindset. Her practicing clinics are focused on neurology and complex medical conditions relating to metabolic disease. She is so brilliant; I know you guys will notice that on this call. I know when we talk [about] pathways and stuff, it's so much fun, but I'm always impressed by her ability to really look at all this stuff at the complex level that we need to when we have these kinds of patients. She uses functional medicine and her expertise in biochemistry, methylation, and physiology to help patients get to the root cause of their symptoms through a strategic approach. The modalities she uses—we're going to talk about [them], and you're going to hear a little bit more about what she does—are nutrition, diet, nutritional supplements, botanicals, environmental medicine, classic homeopathy, and hydrotherapy.

Dr. Jill 1:51

Many patients come to her office after seeing other doctors and are scared, frustrated, and looking for answers that no one has been able to figure out. She's a detective like I am. She often tells people that she looks at medicine like a detective. She looks for clues that have led to the current health situation and for a strategy to figure out, no matter how complex your illness is, what the root cause is. And as you can see on her website, [which] we'll be sharing this on both of our social media

outlets, she's been featured in some really great other interviews. I'm just delighted to have her. So thank you for joining me today, Shelese.

Dr. Shelese 2:31

It's such a wonderful experience to be here, and it's so much fun to spend time with you again. I look forward to it.

Dr. Jill 2:40

Yes, it's kind of like having coffee, only live.

Dr. Shelese 2:43

Exactly. We're just missing a few of our friends that often join in.

Dr. Jill 2:49

I'm just going to be forward. Firstly, I want to make sure that I see this on the page. It looks like we're live, but I always like to double check before we get in too far.

Dr. Shelese 2:56

Sure.

Dr. Jill 2:57

Getting us on board. You guys can see us and hear us. And yes, we're on. Okay, cool. First of all, I just want to tell people a little bit about how we met. I'm trying to remember. I mean, we've both been in the Boulder area practicing. I know from my perspective that I heard your name, and I always had great respect [for you]. It's funny; word of mouth really is our best advertising. And I would hear from patients' families that maybe saw someone for you and me. And we do a few different things, which we'll talk about today. So we do have some patients in common at times who benefit from both of our different approaches. But I remember having this great respect [for you] and thinking you were not just a great practitioner and brilliant, but I loved your spirit, your heart, and the way you approach medicine. I remember us having coffee at my office and getting to know you and the kids that you saw—really, [people of] all ages, but a lot of the kids on the spectrum and that kind of thing—and just being really impressed. Then later, we got together for coffee and became very close friends. And what I love the most is that we really do not only think about mind, body, and spirit, which you'll talk about in a few minutes, but we live that in a spiritual realm. It's really important to incorporate that into who we

are and how we practice, and it was such an encouragement to me to share on that level with you as well. So it's been a real, real joy to call you a friend and someone I respect so much. First, before we talk about naturopathic medicine, everybody loves stories of: Why did you get into medicine? How did you get called into it? I'd love to hear a little bit about your background and how you got into naturopathic medicine.

Dr. Shelese 4:36

Sure. So how I got into naturopathic medicine was that I started with some health concerns. Early on in life, we had a cat in the house, and my mother thought that I had lots of allergies, seasonal allergies to many things. Well, later we found out it was the cats that we had in the house. But I had lots of allergies. And then in my later teens, around 19, I developed pretty severe asthma, [to the point] where it really started taking away the function of my life. At 20 years old, just walking up a flight of stairs would put me out of breath. I would get every cold and flu that came through. I was constantly sick. One day I remember being on so many steroids to manage the amount of asthma that I had and these respiratory infections that I just couldn't shake. I was really frustrated, so I started looking for other answers. I read a book by Andrew Weil.

Dr. Jill 5:52

Oh, yes.

Dr. Shelese 5:54

[The book is called] *Spontaneous Healing*, and in it, he talked about naturopathic medicine. For me, it was like a light bulb went off because I had been looking into medicine; I had thought about maybe [becoming] a DO or going to MD. But I was feeling frustrated in the paradigm that I was in. I remember being on so much prednisone that I broke out in shingles, and when I asked the doctor, "Why do I have shingles?" They said, "Do you have a computer?" And I said, "How did my computer give me shingles?" And she said: "No. Go look it up." And she walked out of the room. And this is just primary care; they don't have a lot of time. I understand that now, but at the moment, I was like, "I want a kind of medicine that's going to help me understand how this happened." Why am I so sick all the time?

Dr. Shelese 6:43

Slowly but surely, I did regain my health. I left all the things that I grew up believing that I needed to do, like taking a lot of antihistamines and taking albuterol. I mean, eventually, I didn't need those things. I didn't go off of them until I had other

symptoms that had abated. I didn't have asthma problems anymore, so I no longer needed it. But I changed my diet. That was a big part of it. I found out in my early 20s that I couldn't eat gluten, dairy, [or] soy. That made a huge impact on my recovery, just being able to breathe deeply. I had wonderful, amazing parents who wanted to keep me close, and I needed to understand psychologically, mentally, and spiritually the feelings of being a little bit repressed. I wasn't allowed to go away to college, and I think that played into my asthma as well.

Dr. Shelese 7:45

So I started going down all these avenues, preparing myself and healing myself in the process before I went on to medical school at [the] National [University of Natural Medicine] in Portland. So that is kind of my journey. I started changing my diet; I started thinking differently. I started really blossoming in my ability to fledge after college. Going to Portland, Oregon, was probably one of the best things that I could do personally in order to have confidence and know that I really wanted to help other people that had illnesses like I did, [but] didn't know what to do. I wanted to be a voice of compassion, love, and encouragement and let them know: "Your body can heal. I hold that in my heart for you." So that's how I got there.

Dr. Jill 8:39

Oh, I love it. We've never really talked about this over coffee, but it's so fun to hear [about] your journey. What's interesting is that I have had such a parallel journey because when I was a child on the farm, I had horrible allergies. I didn't have asthma, but [I had] the same mechanism of atopic diseases. I had eczema and allergies—you had asthma—and those are the three things in this whole... You also mentioned something really important. As I've looked at my past, there's a piece of this: I think we came into the world as very intuitive, sensitive souls, right? And that's why we want to be healers. I was called into medicine, as I know you were too. We maybe didn't know it, but this is a calling; it's not just a job for us. Part of that is this nature that is actually very sensitive. With that comes a great ability to connect with people and understand complex detective work, which we totally align with. So that's the gift side of it. We are sensitive, intuitive souls, and we bring to medicine the ability to really look into the patient at the soul level and at the whole environmental level and really understand at a deeper level, because we see details that other people will miss. Like [with] you, people have seen a lot of other people before they get to you, so they're looking for answers.

Dr. Jill 9:54

But on the other side of that, the blessing and the curse are that we are super sensitive to our environment, whether it's chemicals, allergies, or asthma. And any of you listeners out there, if you have struggled with allergies, asthma, or atopic [symptoms], it's probably because you're going to be one of the canaries that's also more sensitive to environmental chemicals. And even emotional stuff, right? I'm a little more sensitive. But it's so interesting because there's no coincidence about the fact that we both had these allergies and atopic conditions, and then the calling into medicine. Even though that was tough as a child, it's been a blessing to the things that we do today because we have this gift of being able to really see at a deeper level.

Dr. Shelese 10:34

Yes, absolutely.

Dr. Jill 10:36

So I'd love to hear—as we've told everybody—tell us a little bit more. For those who don't really know about naturopathic medicine and naturopathic doctors, what's your training? What are some of the principles of naturopathic medicine?

Dr. Shelese 10:49

We have six principles in naturopathic medicine that define us. In functional medicine, you've adopted many of these. So some of them—

Dr. Jill 11:00

I've kind of stolen them from you, really, right?

Dr. Shelese 11:06

It's beautiful because lots of people are getting really wonderful care, and it was born out of a lot of this nature cure and these principles. So the first one is the healing power of nature. The body has an intrinsic ability to establish, maintain, and restore health. We as NDs believe that if we put back into balance what's in excess of what's deficient and bring you into balance, then your body can restore itself through physiology, through biochemistry. So that's the first one, [which] is healing through the power of nature and using less invasive means. We try to use the least invasive means possible. So that may be through nutrition and diet; it may be sunshine; it may be clean air. All of the environmental medicine you'll see is part of our mainstay in how we look at medicine.

Dr. Shelese 12:07

So we identify and treat the cause; that's our second principle. Symptoms are expressions of the body's attempts to heal itself. If you start to have a symptom, it means your body's trying to show us [that] something's out of balance, something's not working correctly. So, like Jill, we go to the root cause. And that may be all the way down to a cellular level and how nutrients are shuttled across a cell membrane or how genomics are functioning within our body. So treating the cause. First, do no harm. All doctors, I think, have this principle. But first and foremost—and my patients all know this, [because] I'm a fairly conservative ND—I don't want to do anything that harms you. So that could even be a side effect of a nutrient, a supplement, or a homeopathic [product]. So that's the third, [which] is: Do no harm.

Dr. Shelese 13:08

Treat the whole person. So, as Jill alluded to earlier, we look at the interaction of the physical, spiritual, mental, emotional, genetic, environmental, and social factors. All of it together makes up your health. We're going to dive into some of these individually, I'm sure, in this talk. But we believe that all of these parts are your health. Your mind, your body, and your spirit all need to be healed and have healing. And then we have: "Doctor as teacher." So my first principle and oath to you is: If you see me in my practice, I want to empower you. I want to teach you. I want you to walk away knowing how to take responsibility for making different choices that heal you on all of these levels.

Dr. Shelese 13:56

And then, prevention. How do we prevent, whether it's through epigenetics... Finding ways to prevent health issues that have plagued your ancestry, or whether you didn't even know something in your home like toxic mold was making you so sick and it could end up really harming your health in years to come—10, 20 years from now. So it's finding all of these principles and treating [based] on all of these levels.

Dr. Jill 14:30

Gosh, thank you for explaining that, because I have been around a lot of naturopaths [and] have such great respect [for them]. What's neat is our allopathic [system], we call it training... I remember Shelese, and I don't know if you know this or not, but before I was in undergrad and then looking at professional schools, I knew I wanted to go into a healing profession. Kind of like you, I didn't know exactly what. I remember actually applying to a naturopathic school, applying to a chiropractic school, applying to a traditional Chinese medical school, and then

applying to the allopathic schools. It's funny because I really didn't always quite align with them. And when it came down to it, my decision was only based on the fact that, sadly, our system, as we can clearly see nowadays, is so predominantly allopathic. Say I wanted to do mission work; it's still more allopathically minded to go overseas and do that kind of work, or even just the reimbursement system and stuff. And sadly, you guys are getting more and more accreditation, the ability to practice in any state, and all of that, and you're considered a physician, which is awesome, but I know it has been a hard battle. I remember my decision was just like, "Okay, if I want to change the system, I'm going to actually go into the system and infiltrate." And I joke because I'm like, "I have the heart of a naturopath." I feel more aligned with you, your training, and how you view the world and patients. You just said, hopefully, how I practice as well.

Dr. Shelese 15:52

Sure.

Dr. Jill 15:52

But it's not common. So what I get excited about is if we can train and educate not only patients to know that they could see someone like you and get great benefits, [but] even other doctors, like allopathic physicians, to know what else there is. It's almost like my toolbox gets to be a lot bigger. So we can hopefully bring that today. So thanks for sharing all that background.

Dr. Shelese 16:14

Of course. And that's the beauty: We are integrative. I've studied a lot of functional medicine as well, [particularly] the level that I went into with biochemistry and methylation specifically, and studying with Jill James back in the early 2000s. That set me up to have really wonderful conversations with any discipline of medicine. I truly believe we're all working for our patients. My heart is that if I don't have the tools in my toolbox—I'm very confident in the ones that I do have—I want them to have them. And that's the reason why we've shared several patients over the last probably 15 years or at least 14. I remember, going back—I think you were with Bob Rountree back then, and Bob Roundtree, I remember him saying that too. I remember him coming to meetings and saying, "I have the heart and soul..."—

Dr. Jill 17:21

Of a naturopath.

Dr. Shelese 17:23

Exactly. And so there is this—

Dr. Jill 17:26

We want to be like you. We really want to be like you.

Dr. Shelese 17:30

But you're absolutely right. I remember my graduation [and] my keynote speaker. He basically sent us out on our graduation day, knowing we were climbing a mountain for the rest of our lives. So it takes a certain personality to not take offense and to know that we are doing good work. And even if we have to educate people, "doctor as teacher" is really big in the medicine that I use because we're constantly teaching. We're teaching about our education, we're teaching about our licensure, and we're teaching about the authorities that we have. We should be integrative. We should work well [together] and play nice in the sandbox with everybody, which I'm committed to doing.

Dr. Shelese 18:23

When I first got out of school, I actually went around to some of the most allopathic, old-school practices, like the Rocky Mountain Cancer Treatment Center. I went and spent two weeks with a doctor there. He knew my mother. I wanted to get to know the other side, which sometimes didn't believe in my education or didn't know about it. By the end of those two weeks, whether it was him or at the pediatric center or some of these other very traditional practices, they were all comfortable with referring to me. So it's building bridges, not ravines.

Dr. Jill 19:09

Gosh, I love that, because even though I was out in allopathic medicine, I was back in Illinois for many years practicing. And I remember [when] I got out of residency, I went to the CEO of the hospital and said: "Hey, you need integrative medicine. I'll be your director." So they hired me. I don't know what they were thinking, but [they] created a center there. And I remember the doctors in town, [such as] the gastroenterologist, the rheumatologist, and all the specialists were like, "What in the world is she doing?" And they did not... They weren't sure. And what ended up happening [was that] I definitely had visits. But even more—and I'm sure you've had this as well—the patients with arthritis from the rheumatologist would come to me, get better, and go back. And then, the gastroenterologist... I'd see a Crohn's patient, and they'd come to me, and they'd get better, and they'd go back. I didn't really have to say anything. But after a few years, they were calling and saying, "What are you doing over there? We don't understand this. We weren't taught in medical school

that Crohn's is reversible, that arthritis is reversible, or that autoimmunity in general... " So it was interesting. And I'm sure you've had that too, where you live your practice and your life, do the right thing, and help people heal. And the proof is in the pudding, right? Our best advertisement for both of us is by word of mouth because people get well and then they tell their friends and family, and that's exciting.

Dr. Jill 20:24

So I want to shift gears just a little bit because I know there's something we share and I often do talk publicly about it. We talk about the mind, body, and spirit. Especially nowadays with what's going on, to me, it's so hard to imagine if people don't have some connection to a higher power and a spiritual belief system. And you and I both know that we're super open-minded. Anyone out there listening, it doesn't matter if you don't believe in a God or you do. But this piece of who we are and what we bring to medicine is actually really important. We might ask patients questions to find out where they're at. We don't always share what we believe. But I would love to know a little bit about how your spiritual practice and beliefs have flavored who you are and what you bring to the table. I think that's so important for us to be real and authentic as practitioners and how it's in our lives. For me, the most important thing in my life is my faith, the power of prayer, and all of those things.

Dr. Shelese 21:25

Yes, so I was raised Christian Catholic, actually—Roman Catholic. I am still a very devout Catholic. So when I very first started my practice, I remember getting very discouraged when the plan didn't go as well as it should have. I remember at one point having a conversation with my mother, and my mother basically said, "Who are you to believe that it's you?" In that moment, she shifted my whole perspective on what I was doing in medicine. I'm in service. I'm in service to my faith and the grace of God. So, anyone that sees me, it's their higher purpose to get better, and it's God's plan. I'm just holding space, giving them information, and knowing that they're going to get better. I hold in my heart and pray in my heart for every person I've ever seen that what we're doing is going to bring them to their highest purpose and that God can help them and bring that through. I get to be in the front seat of all of these amazing miracles I've seen over the last 16 years. I don't take credit for a lot of it, even though a lot of times I will get credit, but it's not really mine; it's really my faith. And it's really that I'm serving, through my spirit, their spirit.

Dr. Shelese 23:02

Like I said before, in this medicine as an ND, we believe that your spiritual health is just as important as your physical and mental health. It provides us with so much richness in our lives if we have a faith tradition. It doesn't have to be a religion. It doesn't have to be executed one way or another. But finding a moment where we can surrender and get a touch of grace is so important to our health, especially in times when, yes, this virus is out there and, yes, there's lots of suicide, alcoholism, and pain that has come with this social distancing, right? We should really call it physical distancing. But it's really hard on our psyche, on our spirit, to be away from our loved ones, to be away from our friends, and the encouragement and the way in which we embrace each other, both physically and emotionally and spiritually. We're not able to do that right now, so I think this conversation is really important to have today while we're still in this situation. How do we foster more grace in our lives? How do we foster surrender?

Dr. Shelese 24:33

I've watched several of the wonderful interviews that you've given with other people, and what I've noticed is this idea of resilience. I believe that it's our faith and whatever tradition there is that brings us resilience. I know for a fact that's true in my life. Some of the hardest situations I look back on and I truly thank God for the reason why I got through some of them with the resilience that I did. And the same—whenever somebody gets through something, I just want to celebrate with them. I want them to know that you are being watched over; you aren't alone. My heart is with you, and I know that there's something—whatever you believe in—that's also with you.

Dr. Jill 25:26

Yes. Oh, gosh, this is so beautiful. And thank you for being so... If there's ever a time for us to show up and be so authentic and real... because a lot of times this isn't really talked about and yet it's so critical. I remember when the pandemic first started. A lot of the stuff was new, and there was so much fear. And there's still fear, right? But if you think about [it]: Our health is at risk; we don't know if we're going to get sick or die. Finances [are tight] for many, many people listening out there; they've lost jobs; they've lost security. Their relationships are in jeopardy—not that they're going to lose their family, but they're not in connection like they might be used to. Or their dear mother, who's older—they might not be able to be with her because she's at risk for getting the virus, and the children might be separated. There are so many different things here, and pretty much on all levels of what we perceive as our security, it's all shaken up.

Dr. Jill 26:20

For me, I realized, "Oh my goodness, if I didn't have a belief that there is purpose in all things and that there are good things that come even through suffering and difficulties... " I have such a strong—I know you do too—belief that through any adversity or any circumstance, there is good and there's purpose and meaning. What you were saying too—"resilience," really—if we tried to define that word, it would be about finding purpose and meaning in suffering. And I didn't realize that at 25 when I had cancer, but when I started to see the pattern shortly after I had cancer, I realized, "Oh goodness, my life is supposed to be about experiential suffering and then sharing the lessons I've learned." So now, like, "Bring it on, God!" I don't know what's next, but I'm not afraid. I mean, I shouldn't say I'm not afraid; we're all human, right? So there's like, "Oh, that might be hard or might be painful," but I know now that, [after] suffering cancer, Crohn's, mold illness, loss of loved ones, and pandemics, there's nothing that my God and I can't handle. It's the same with you out there. It's like this beautiful sense that after having been through this pandemic—whatever [it is]; I've been through cancer—I know I can handle this.

Dr. Jill 27:33

It's almost like they talk about a ship that's tossed to and fro about the ocean. If there's an anchor plugged into some source that's greater than the purpose of just our own lives and ourselves, then you can stand strong amidst the waves and the storms. And I love that we can bring that to our patients because, as you know as well as I do, so many people who walk in are at their last wit's end. They've been to other places, and they have symptoms that no one has been able to explain. And I know you share this with me: When we just bring love and hope, like, we just sit there and give them space to be heard and look at them... Sometimes I'll cry with patients; I'm not even shy about that. I'll look at them; they'll be shedding a tear, and I'm like, "Yes, I feel you." I don't like wiping tears away. It's funny because in medical school they're like, "You should be objective, you should not shed a tear, and you should remain... " I'm like, "Screw that!" because, I mean, we're human beings. So when we can feel and interact on that level, that starts the healing. And then I can say, "You know what? I'm not perfect; I don't have all the answers, but I will do everything in my power to help you and facilitate healing."

Dr. Jill 28:43

I loved what you said too, because it's not really about us; we're just creating this space and this environment. And often, it's [about] taking out toxins or adding back in nutrients; it's really simple. That's the funny thing: People think it's complex; it's not really complex. If we get those basic things right, the body will heal. It's like we see miracles every day. And then I do believe both you and I bring love, hope, and our faith, which we never push on anyone else. But we just bring a place there

where we know where we stand and [where] we know our purpose and our calling. We know that for that time, we are there with you, holding space for you wherever you're at. And even if you don't believe, that's okay; there's no judgment. But it's just creating that—

Dr. Shelese 29:29

It does not have to be one way; it can be multiple ways. But I want to encourage people right now. With the amount of stress that we're under, of all the things that you talked about earlier, whether it's economic or whether it's this social isolation that we're in, it creates quinolinic acid. Our MAO-A creates more peroxides. Just being stressed makes us more susceptible to disease, and our inflammation goes up, our detoxification system starts to crash, and then our immune system isn't working so well. So, I'm talking about the importance of just simple things, of having gratitude and knowing that you are taken care of, or finding ways to tiptoe into that grace if you're not so comfortable with it. And it doesn't have to look one way or another, but yes, my heart and my giant spirit want everyone to feel better. I think what I get criticized the most for by my family is that I really don't like suffering. I really want to help in some way so people don't need to suffer. But we've got some pretty amazing tools in our tool bag, and this is one of them: We bring our hearts into our practice, we truly care, and we would never ask them to do something that we couldn't do ourselves.

Dr. Jill 31:13

I love that because that's the thing too, the model, the teacher. The same thing—we need to actually live and model what we preach or teach our patients. Let's talk more practically. I definitely want to talk about fever. And then I want to go into a little bit of the immune system and everything from the mind-body-spirit [perspective] of how we can actually support immune function during this time. Let's first talk about the enigma of fever. So what does a naturopath believe about fever, and how would you treat it or not treat it? Tell me more about that.

Dr. Shelese 31:47

So we look at fever as a vital force in your body that raises up. So children often can run really high, really fruitful fevers if given the opportunity against any kind of virus, bacteria, or infection. There are parameters, and you should work with your doctor to know what those parameters are. I'm going to say [that with a] fever over 103, we probably should manage it, and I'm going to give some examples of how we would look at that. If you're running a really high fever—or even a hundred-degree fever; that's still considered a low-grade fever—we often use something called

hydrotherapy. One of the treatments that I've used in my practice—gosh, for 20 years now—is you take cotton socks. You put them in tepid water—not cold, not super cold, not warm at all, just tepid, room-temperature water—and you ring them out really well. You put them on your feet—this is if you have a fever—and then you put wool socks over them, and then you get into bed. What that will do, if you have a head cold, is bring the mucus down and the inflammation out of your head. It will [then] go to your feet and warm up those socks. And until those socks are dry, it brings down the fever and helps [reduce] congestion and inflammation in your head and upper respiratory system.

Dr. Shelese 33:21

So that's one way we would manage a fever. If it gets really high, sometimes we put people in tepid baths to bring down the fever, and then we also use homeopathy. So some of the best remedies to use for a really high fever would be Belladonna; for a lower-grade fever, it would be Ferrum Phos. But these are different techniques that you can do to manage a fever rather than just giving ibuprofen or Tylenol, which can really deplete us of our glutathione, which is our master antioxidant. So we usually encourage fevers up to a point, right? And at that point, we don't want a febrile seizure; we don't want elderly people having really high fevers either. We will use whatever means we can to bring down that fever. But the importance of letting the fever run, which I don't think I've discussed but [which] I think you know, is that it disassembles that virus or kills bacteria when our cytokines and our bodies can run that inflammatory response. What most people don't know is that a lot of times the virus or bacteria isn't [what's] making you feel so bad; it's your body's reaction to it. We want to manage that reaction, but with the intent of doing a good job of dismantling or killing bacteria or dismantling a virus.

Dr. Jill 34:51

That makes so much sense. I was in Switzerland for the last two years with their biological medicine, and I love that their typical allopathic physicians really incorporate homeopathy. So it's almost like a combination of [allopathic and naturopathic in] the US. It's almost [as] if you and I had both of our training combined. That's what typically the German-Swiss physicians do—they bring this all together: One of the treatments they have is called hyperthermia, [which means] it's basically causing a fever. I've had many of my patients who have gone to Europe who've gotten treated for Lyme disease, tick-borne infections, or viral chronic viral infections that are almost in a curative state after getting several sessions of hyperthermia. And of course, it's controlled; it's under medical supervision because they'll go very high, like extremely high. But they're watching blood pressure,

they're watching vitals, they're watching oxygenation, and they're making sure that it's safe.

Dr. Shelese 35:40

Hydration.

Dr. Jill 35:41

Yes, and hydration, exactly. It's so profound, though, to see that. We don't typically, in our US hospitals, have hyperthermia, but in Europe, it's the standard of care for some of these patients. So it actually makes sense to me.

Dr. Shelese 35:53

They've used nature cure in Europe for centuries. So yes, sauna, helping people initiate, because some people with chronic Epstein-Bar virus... right? We're just trying to find a way to help the body, again, get rid of the pathogen the best way it can. Sometimes our immune system, we need to support it with either nutrition, diet, lifestyle, or reducing environmental toxins. All of these things help the body be able to handle how the immune system is going to create an antigen and then an antibody to manage these infections. So we manage fevers; we don't discourage fevers. And yes, it is a little uncomfortable, and that's a whole other conversation as a parent to have to tell you. Your child is not going to feel so great when they have a really decent fever. I had to explain to my son when he was little, "We're going to do these socks. You're going to feel better real soon. Just wait. Here's some homeopathy." We got through it, and he definitely didn't feel well when the fever was really high, but when we managed it and put the warming sock treatment on and used Ferrum Phos, that was the remedy that always worked for him. Even at 17, he'll come to me and say: "Mom, I'm sick. I need these things."

Dr. Jill 37:20

I love it. Wow. Let's talk about practical ways... The immune system—obviously, that's the biggest thing now. I'd love to talk about [for] people listening: What are some practical ways that they can support their immune system at this time?

Dr. Shelese 37:36

Well, I think you've covered it, but it's really important. I think you had another ND, the one that's in your office, come on [the Podcast] and talk about stress. Managing stress is key right now; it's really important. Most of my patients who have been coming to me in the last couple of days and saying, "I'm starting to come down with

something," had something really stressful that made them feel that way. [It's] because when we get really stressed, our immune system goes down and our natural killer cells go down. We just can't fight infection as well.

Dr. Shelese 38:11

Diet is really important. Sugar. I know that there's a study out there saying something like, "Your immune system goes down for six hours after a significant amount of sugar." So staying away from sugar right now is probably a really good idea. It doesn't mean forevermore. I'm all about moderation, meaning if you have a birthday coming up, do all the other things to support yourself, but maybe you can have a piece of your favorite whatever with sugar in it. Just don't go eating that cake for seven days, right?

Dr. Jill 38:47

You read my mind on sugar because I was thinking, "Sugar is such a toxic thing for the immune system." Like you said, the studies show that natural killer cells go dramatically down for some time after. Interestingly, just this morning, I saw someone post something on: "Cereal sells." Box cereal sales are up by 24%. As people are home, I'm like, "Oh gosh, box cereal is probably one of the most..." If you have breakfast box cereal, please, please find some alternative, because it's not only GMO crops like corn and soy; there's glyphosate sprayed on most of those, and then it's refined, and there's a high sugar [content]. There are so many things about most box cereals; [they simply] are not a good breakfast [option].

Dr. Shelese 39:27

In addition to all of that, there's also a film that they put on the inside of your cereal bag; I think it's a flame retardant, and that actually creates a lot of toxicity for you too. It drives your insulin to wacky levels [and] brings down your immune system, so it might be a good time to break up with cereal.

Dr. Jill 39:53

I know it's a comfort food, but... [laughing].

Dr. Shelese 39:56

And I say that with love. I know that it's comfort. People are looking for any kind of comfort. Let's just find other beautiful ways. Getting up first thing in the morning and going outside and hearing the birds—maybe that would bring you more [comfort] than the cereal [can]. But I understand why people are eating more cereal.

But yes, eliminating or reducing sugar intake is going to really help immune function, [along with] staying away from foods that you might be sensitive to. For instance, I can't eat gluten or dairy; I will end up with sinus [problems], [and] I'll start getting a tickle in the back of my throat even when eating just a little bit of dairy. I have a friend that, whenever I'd stay at her house in Connecticut, if I had [a] dairy [product], she'd call me out. She's like, "You just had dairy; I can hear it in your nose," because it happened so fast for me. So it's [about] avoiding those foods that we're sensitive to because they cause inflammation through our whole GI tract, which then spills over to inflammation throughout our body. Do you want to speak a little bit more about that?

Dr. Jill 41:05

Dairy is a mucus producer. Not everyone [needs to avoid it], but for you and me as well, [we do], [and] I completely agree with that. When you have that mucus produced in your sinuses or gut, it's actually harder to clear pathogens like viruses. So you're actually putting yourself at a disadvantage from the immune perspective too because you've got all this gunk sitting there that can kind of trap the particles and trap the viruses, [which] makes it harder to clear. And I would love to just talk really quickly about: What's a typical breakfast for you? I'll share mine too because maybe some people are wondering, "Well, what in the world? If I can't have cereal...?" What do you do, Dr. Pratt, for breakfast?

Dr. Shelese 41:39

I try to switch it up. I am a true believer that we should have different nutrients rotating through our diet. But like anyone else's, my life gets really busy, and I fall back on certain things. One of those certain things is that I have MediClear by Thorne Research, and I take two scoops of that. I add some coconut milk, almond milk, or hemp milk, and then I add some mixed berries with that. That's usually great, and it has my multivitamin in it. It's just a great way for me to start my day. I can do eggs, so I'll do eggs with some sauteed vegetables if I have time in the morning or every once in a while. I am also sensitive to histamine, so I have to watch how much histamine I can take in. But if I do have something that's higher in histamine, I may do [something] like a chicken apple sausage or something like that too. What about you? What's your breakfast [like]?

Dr. Jill 42:44

Good, good, good. Well, I love that you said 'variety,' because I get into habits where I'm eating the same thing every day because it's easy. I love smoothies. I haven't done them lately, but I like the Thorne VegaLite. I like the MediClear that Dr. Pratt is

mentioning. It's kind of like a detox shake, so it's really great because it has all the N-acetylcysteine and the glutathione and all the precursors. It's chocolate-flavored—well, it comes in vanilla and chocolate, but chocolate is much better.

Dr. Shelese 43:13

I take the vanilla, but you can take the chocolate.

Dr. Jill 43:14

Yes, yes, either way. But I would often do that with some leafy greens and then some chia or flax seeds. Like you said, very similar—coconut milk [as well]. What I've done lately is [eat] a grain-free cereal that's very low in sugar. There's one that's sprouted from, I think, Lark Ellen Farm, and the other one I like is Purely Elizabeth, which Costco carries now, so it's so cool. They're both organic, grain-free cereals, and I'll put a little coconut milk on them or just eat them plain. That's my simplest go-to, and it works. I sadly can't do eggs. And a lot of you out there might be doing more [of a] ketogenic [diet], or you might be doing more intermittent fasting. Some of you might do [something] like a Bulletproof coffee, [which is] a clean organic coffee with some Brain Octane or MCT oil. I like my coconut creamer in there; that's super clean. Vital Proteins makes a really good coconut creamer. So, all those things are great. And if you're intermittent fasting, a lot of times you won't eat breakfast when you first wake up, but you'll have your first meal at like 11:00, and that works.

Dr. Jill 44:15

Sadly, for me personally, I've never done well on a high-fat diet; I'm one of those few people. I have pancreatic insufficiency, so I can't really do a super high-fat diet. I have to kind of balance the lower-glycemic carbs. I often do organic berries with whatever other protein and fats I'm eating. But a lot of you listening might do well with a breakfast that's fat and protein-based, like eggs and organic turkey, bacon, or sausage. Those kinds of things tend to keep people going really well. I often say, especially with adrenal issues, to have more of a fat and protein [dense meal] in the morning. And have your carbs in the evening, like rice, quinoa, or sweet potatoes as a side, versus our sugary cereals in the morning. They just set us up, because if you start with a sugary cereal, your insulin spikes up, your blood sugar spikes up, and that insulin tells your body to store sugar. So three hours later, you are ravenous, and you're looking for the brownies.

Dr. Shelese 45:08

And your cortisol gets messed up, right? And then your cortisol is also in there, playing tricks on you and lowering your immune system. So that's one of the reasons why I think we're talking about fiber, protein, and good fats being so important to balance that blood sugar, and it'll help your immune system dramatically.

Dr. Jill 45:31

How often people are following all day long that... And they understand when you tell them, "Three hours later, are you, like, ravenous looking... " They'll be like: "Yes. What's up with that?" It all depends. Really, your first meal of the day, whether you're fasting or not, is the most important meal for cortisol, blood sugar, and insulin. Even if you want to lose weight or be metabolically active and healthy, the first thing that you put in your mouth in the morning is really critical to think about. So cereal, sadly, [is] not a great idea.

Dr. Shelese 46:01

Yes. But chia pudding. Chia pudding would be great with some berries. I think you had a recipe too with avocado.

Dr. Jill 46:13

Yes. Avocado chocolate. It's like chocolate pudding. It's so good, and it's actually healthy. We'll have to find that and post it because it tastes like chocolate pudding, and you're basically eating avocados. It's so good.

Dr. Shelese 46:25

So this lifestyle doesn't have to feel really restrictive in that way when you start to gain an appreciation for different kinds of sweets, right? [Even] the berries become sweet.

Dr. Jill 46:42

Yes. What are your favorite recommendations for sweeteners for patients if they're making a recipe or doing something? What would you usually tell them about alternatives?

Dr. Shelese 46:49

I still believe honey and maple syrup are still a good idea unless you're really restricting carbs, like [when you're] on a specific carbohydrate diet or GAPS. But

monk fruit would probably be in there, [along with] xylitol—that also helps kill yeast. Those would probably be my favorites. What about you?

Dr. Jill 47:14

I totally agree. I do use stevia a lot because it has had some studies. It's a biofilm disruptor in chronic infections and things, and it tends not to affect the gut microbiome, which is really important. I love xylitol—that's probably my second favorite. I do agree with you about honey and maple syrup. If you're going to use sweeteners, use real [ones] if possible. Just don't use refined cane sugar; totally avoid that one. Monk fruit and coconut palm sugar tend to be a little lower [on the] glycemic [index]. But still, all those things, if you have prediabetes or are really watching your blood sugar, even honey or maple syrup is going to affect [you] but it's still more natural and nutritive—it has more nutrients—than your white table sugar. And then, [for] someone who's really low glycemic, either for diabetic reasons or otherwise, the stevia or the xylitol don't have as much of an effect on the blood sugar. So that's kind of the range, and they're all available. I do notice that with the sugar alcohols, if someone has underlying gut dysbiosis, until you treat it, they tend to get gas and bloating because those sugar alcohols stay in the lumen of the gut and don't get absorbed. So the bacteria have a party, and you'll have gas and bloating if you have xylitol brownies and eat a lot of them. You're going to be like, "What happened to my gut?"

Dr. Shelese 48:25

Right, the whole FODMAP kind of idea, right?

Dr. Jill 48:30

Speaking of gut, tell me a little bit. I mean, we both [know that] gut is the core. But how does that relate to the immune system, and what are some core things people could do to have healthy guts?

Dr. Shelese 48:41

Well, first is probably finding out if you have any kind of infections, whether it's in your oral microbiome, your nasal microbiome, or your GI. In the large intestine, do you have an intestinal bacterial overgrowth in your small intestine? Finding those infections is really important to work with a doctor like Jill or me because 80% of your immune system... It is 80%, isn't it, Jill?

Dr. Jill 49:12

It is, yes.

Dr. Shelese 49:12

Eighty percent of our immune system comes off of those lymphocytes all through our GI tract. So we need a healthy microbiome whispering, right? That's what it does—it whispers, and it gives feedback on what kind of environment we're building in that GI. So if we have weeds growing in our garden, they're going to take nutrients, they're going to create inflammation, and they're going to create a different environment that's going to invite other things in.

Dr. Shelese 49:47

I don't know, Jill, if you see this, but a lot of people will have some dysbiosis; they'll have bacterial overgrowth or maybe some yeast overgrowth, and all of a sudden, it invites in a protozoa that they get exposed to that normally you might not hold on to that protozoa. So when I see a protozoan in somebody's GI workup, I'm thinking, "Wow, we've probably had some leaky gut and some dysbiosis going on for a while." So what are the things that I do? Probiotics are important, but knowing which probiotics [helps]. As Jill beautifully speaks for Microbiome Labs and some of these other companies, knowing the right kind of probiotic is pretty important. If you have histamine or SIBO, you're going to need a different kind of probiotic than if you have just an overgrowth of some bacteria in your large intestine. So probiotics are really important.

Dr. Shelese 50:42

Managing the diet [is also important], right? Eating the right things that are not going to feed these overgrowths is going to all help the immune system in the GI. And then something that naturopathic doctors like myself do a lot of is dry skin brushing to help move the lymph system. That lymph, if you move it all over your body with just short little strokes with either a loofah or a dry skin brush that you can get at any of the natural food stores, moving that lymph really helps us detox; it actually helps the GI. And then also, castor oil packs [are great]. I'm a huge fan of castor oil. I don't know about you, Jill, but I love castor oil, specifically over the GI and over the liver, all the way up, if you have fibrocystic breasts or ovarian cysts. You can actually get a cloth that goes all the way from your clavicle bones right here, all the way down to your pubic bone. You really want to saturate it in castor oil—I have all of this on my website that I can share with you—and you lay with that on. You can either meditate, say your prayers, or do deep breathing exercises. You lay for 45 minutes. What it does is bring down inflammation in the GI, so it's an old nature cure.

Dr. Jill 52:07

I love that. What a great [suggestion]! [It's] not expensive, [it's] practical and so simple. I've recommended dry brushing to patients. Again, we've kind of stolen that from our naturopathic friends. And if you've been around lately, you've heard me talk about coffee enemas because I'm such a fan. This requires a little more equipment and training. But when I was in Switzerland, I just saw patients doing so well, and they were not necessarily young and healthy. Part of the treatments there in the biological medicine center were coffee enemas. And I think of it as really, really simple because what you're talking about with detox, we have mobilization of toxins and [their] excretion. So basically, when we mobilize, whether we're doing glutathione or IVs or any of these things, and we can't excrete, we start to get sick.

Dr. Jill 52:55

A lot of people have heard of a Herxheimer reaction; all that [means] is [that] these things aren't in balance and we're pushing the mobilization so hard and we're not getting excretion. Or, we're killing off organisms that are causing toxicity, and you're not eliminating that from your body. What I love about naturopathic medicine is that you have a lot of things for excretion. It could be castor oil, coffee enemas, colon hydrotherapy, or Epsom salt baths. [There are] all these things [to try] because just taking another pill won't necessarily help. Binders might help a little on that side, but a lot of other things, like giving glutathione, N-acetylcysteine, or some of these agents that push and mobilize toxins, could make them worse if they're not excreting. So I love that you bring a lot to the table with those therapies.

Dr. Shelese 53:40

We have to open all the emunctories.

Dr. Jill 53:43

I love it.

Dr. Shelese 53:44

Have you ever heard this term before?

Dr. Jill 53:47

I think I have [heard it] from you, but it's not common vocabulary for me.

Dr. Shelese 53:51

So the emunctories would be: How are we at elimination? It's all elimination. The emunctories are [the means of] elimination, whether it's through your breath, whether it's through your sweat, whether it's through your urine, or whether it's through your feces. It's all trying to move things out, and we have to open up those emunctories. So a lot of the treatments that we employ are [designed] to open up those emunctories. And yes, we do; we give things like bitters to help the gallbladder move better. We give all these antioxidants, anti-inflammatory herbs, or different herbs to move toxicity. The more you know about what kind of toxicity or what your exposure has been, the more specifically Jill or I can help you [determine] what emunctory we need to work on in order for you to move that out. So yes, deep breathing is so important, even for detoxification. Hydration is so important for detoxification through the kidneys, right? Fiber is so important for phase III detoxification—now we call it [that]—but as NDs, we've been thinking about that the whole time. Like, how do we get detoxification? How do we get that emunctory of the colon working to your benefit? How do we get your kidneys to work to your benefit? How do we clean your blood and get all of these things out?

Dr. Jill 55:22

Yes, that reminds me. There are some of the gurus on television talking about these ice baths, and there are all these things with hot-cold water therapy. From a naturopathic perspective, tell us a little bit more about that. Whether it's used in the shower, like going [between] hot and cold water, or going into an ice bath, what does that do for the body?

Dr. Shelese 55:39

What it does is increase circulation, which is really going to help you both detox and get vitalized, meaning your cells just get more nutrients when we circulate our blood better. One of them is constitutional or hydrotherapy, going from hot to cold. If you were a patient of mine—you know this about me—I tell people to always end their shower with cold. Or, [you can do it with] sitz baths, where you go between hot and cold, or even in the shower, you can go between hot and cold. Sometimes I'll say three minutes hot, and then you'll want to turn it as cold as you can; I don't want to shock you. But you would be amazed at how invigorated you feel afterward because all of a sudden you're going to feel this throbbing in your body. What we do is, if you have a certain area that we're trying to increase circulation to, we focus on that area, or it can be a whole-body experience. If you have the ability to go from a whole-[body] immersion in hot [water] to a whole-[body] immersion in cold [water], that's going to give you a whole-body treatment. What it does is it vasodilates you when you're in the hot [water], and when you get in the cold

[water], it vasoconstricts and pumps your blood through all those little tiny capillaries in your fingers, your nose, and your toes. So we're increasing circulation to get these nutrients. All of the things that we need for vitality move throughout our bodies, right? Our qi moves better.

Dr. Shelese 57:08

In sitz baths [this is also helpful]. If you have pelvic issues—let's say you have reoccurring infections in your pelvic area, you have pelvic floor dysfunction, you have bladder infections on a regular basis, or you have GI problems—you can sit in hot water, and then you want to go sit in cold water. Again, it's the contrast. If you can make it as cold as you can take it and then go back to the hot for three minutes, back to the cold for a minute, back to the hot, you always want to end on cold because that's where you get the good [results]. When you vasodilate, you're going to pull blood. So if you just take a hot bath and you don't end [it by using] cold [water], sometimes you can be a little bit more swollen after a hot bath. It's this idea of pumping your blood through your body more efficiently by using contrast hydrotherapy. And colon hydrotherapy is fantastic too. That's what Jill was talking about before, where we use coffee enemas or different things to basically create a new microbiome and also help pull out toxins. And then, of course, drinking plenty of really great, clean water [is important]. We forget how important [it is] for all processes in the body to be really well hydrated. That's going to help your immune system immensely as well.

Dr. Jill 58:41

Yes, thanks for explaining that, because I always know I do feel invigorated with that cold at the end there, but people that I know want to know. And it's something you can do at home. It's really practical. I can't believe we've been talking for an hour, and we could talk for another hour. This is so much fun. I wanted to ask you two things before we end. The first one is: If there were one piece of advice, what would you leave listeners with as advice for this time?

Dr. Shelese 59:10

To find a beautiful rhythm again in your life. Many people are struggling right now for a rhythm. Our hormonal system, our immune system, and our nervous system thrive on structure. The more we can get up in the morning and go out into our backyard, [see] nature, [or be] anywhere we can get sunlight on our faces will help our melatonin because [the reason] we know to make melatonin at night is because of sun exposure in the morning. And then trying to focus on the best possible messages [is also important]. Find or tiptoe back into exploring with wonderment

your spiritual self, your ability to connect with something higher that is watching over you, that loves you, that will sustain you, that will give you resilience at this time. And end your day by watching the sun go down, letting your body know the day is over and now is time for rest. Like, we're not going to turn on our blue lights; we're not going to turn on all of our lights and overstimulate ourselves and watch really pretty horrific news outlets that are going to make us stressed, so then we can't sleep well. Just watch the sun go down, have a beautiful cup of tea, talk to people you love in any way that you can, and just know that you are connected.

Dr. Jill 1:00:48

Oh, that is such beautiful advice. And where can people find you, Dr. Pratt? Where can they find you? We'll link this up too.

Dr. Shelese 1:00:55

Sure. So I have a website called ThePrattClinics.com with an 's' on the end—so my [last] name [is in the middle]. We can put a link in this for them too. I am here in Colorado, but just like Jill, we see people all over the world. So we're lucky enough to do telemedicine and be able to help lots of people in lots of different places.

Dr. Jill 1:01:19

Yes. Oh, this has been so fun. Thank you all for listening, and thank you, Dr. Pratt, for joining me today. We'll have to do this again because there's even more stuff we didn't get to cover.

Dr. Shelese 1:01:31

I'd love to.