

## [239: The Importance of Light in Healing the Mitochondria with Carrie Drinkwine](#)

**Dr. Jill** 00:00

Hey everybody, welcome to *Resiliency Radio*, your go-to podcast for the most cutting-edge insights in integrative and functional medicine. I'm your host, Dr. Jill, and with each episode, we dive into the heart of healing and personal transformation. Join us as we interview renowned experts and world leaders in health topics, biohacking, how to really optimize human performance, and everything you want to know about functional medicine.

**Dr. Jill** 00:23

Today, I want to introduce my guest. My guest is Carrie Drinkwine. She's a highly regarded leader in the holistic wellness field with a diverse and impressive array of qualifications. She's a certified regenerative health practitioner, clinical iridologist, traditional naturopath, and success and freedom coach.

**Dr. Jill** 00:39

As the founder and director of the Institute of Regenerative Health, Carrie trains and certifies regenerative health practitioners around the world. She also owns Wise Wellness Holistic Clinic, where she applies her expertise to support clients in achieving optimal well-being. Join us as we talk to Carrie and get into the heart of healing today.

Thank you, Carrie, for joining me.

**Carrie Drinkwine** 01:01

Yeah. Thank you so much for having me on. This is going to be a fun conversation.

**Dr. Jill** 01:04

It's so fun! The first thing I always love to start with is your background. You sound like a serial entrepreneur—you have all these ideas and visions and, of course, [are] bringing them into manifestation. What's your history? Did you always want to be a healer? How did you get into what you're doing now?

**Carrie Drinkwine** 01:23

Yeah, a really good question. I think since I was a little girl, I was an unwell little girl.

I had a lot of difficulties. I had a reflex valve problem as a little girl. Urine was going to my kidneys and deeply impacted my wellness. I was on a load of antibiotics as a little girl, and I always noticed that I was different from others. I dealt with belly bloat, which is very embarrassing as a young, developing girl, especially [since] I was a dancer. I was a gymnast. So that resulted in me noticing that something was wrong in my body.

### **Carrie Drinkwine** 01:54

So I'd always kind of been drawn into health. I went into college to go into dietetics and nutrition science and quickly realized that the dietetics space was not the right space for me and that that was not true health. But it was after college that I was diagnosed with three autoimmune conditions. I was diagnosed with Hashimoto, early-onset lupus, fibromyalgia, and then chronic adrenal fatigue. And if that wasn't enough, I was trying to get pregnant at that time and had either no luck getting pregnant or, every time we conceived, we miscarried. We had had five miscarriages, and I went through loads of testing, and they just diagnosed me with unexplained infertility at the end of it.

### **Carrie Drinkwine** 02:36

I knew, in my bones and in my body, that something had shifted. I remember asking my doctor: "How does this happen?" [In] the five years prior to this diagnosis, I had been going into the doctor saying: "I don't feel right. Something's off in my body. I'm gaining weight. I'm getting these skin rashes. I have chronic fatigue. I have constipation." And they're like, "Everything looks normal," because we were looking at the chemical view of my blood. I'm sitting here going: "How is this normal? It's not in my head. I don't have some sort of a disorder. I'm not a hypochondriac." And then all of a sudden I was diagnosed with all these dis-eases, as I call them, in one day. I remember asking how this happens, and she said: "Well, we don't know, but if you just take these prescription medications, you'll live a relatively normal but shorter life." And that was her answer. Like, no big deal; just take these things and out the door you go.

### **Carrie Drinkwine** 03:30

I went through this wave of shock, grief, anger, and frustration. Then I remember sitting in my car being like: "I'm 30 years old. I am way too young to have all these autoimmune conditions." And I just thought in my head, "If something happened,

something shifted in my body, I can unwind it. I wasn't born this way. I don't know what shifted, but I'm going to figure it out." Really, that is what set me out into the level of work that I do now.

**Carrie Drinkwine 03:58**

I started working with endocrinologists, hormone specialists, and functional medicine doctors. I worked with rheumatologists. I worked with naturopaths. I went Western and Eastern, high and low, to find everyone's perspective. And it wasn't until I found the work of regenerative detoxification that I reversed all of those conditions in my body and then had two vibrantly healthy children after that.

**Carrie Drinkwine 04:20**

It was from there that I had to unlearn all of my mainstream education and go get an alternative education in regenerative detoxification. I studied gut health. I studied biophotonic therapy—all sorts of things—to come together into what I do today.

**Dr. Jill 04:38**

Wow. Just wow. I love asking about [their] story because I would say 90% of my guests, even if I don't know what happened in their story, there's something that was pretty transformational in their own health. Either that or it's the health of someone they love dearly, and they felt like this block—with usually Western medicine, to be honest—of the ability to go beyond that ICD-10 code that says: "Here's a label that describes the set of symptoms that you're experiencing." So I know a lot of our listeners can relate to that. And we have a lot of practitioners. I know you work with practitioners as well who are interested in learning more.

**Dr. Jill 05:09**

One thing that struck me in our conversation on the panel was how you talk about detox. My favorite people to talk to are naturopaths in this realm because there's this depth of understanding that we in conventional medicine don't have. Again, I've learned this, but many, many, many people don't have the awareness. Do you want to just give an overview of how you think about detox and the different pathways and the different core mechanisms that are behind how we rid ourselves of toxic load?

**Carrie Drinkwine 05:36**

Absolutely. We have to look at our body as a unit. Even in naturopathy, we're just supplementing a natural form of a pharmaceutical approach, essentially. But that's not getting to the root cause. The reason people are in an imbalanced or dis-eased state is simply [that] their cells are too toxic. That's really what it comes down to: The environment that surrounds your cell is more important than the information inside the cell, and the way that that cell expresses is due to its environment. I think of [how] if you're in an unhealthy relationship, it's hard to be your best self. The same thing goes on in the body.

**Carrie Drinkwine 06:15**

We're around 35 trillion cells. Some humans, up to 100 trillion cells, depending on our size. We are nothing but cells and fluid and light and water. Every single cell that you have in your body has to eat and poop just like you do. It's really that simple. It has to bring in nourishment; it has to excrete waste. And we are nothing more than cells. Our kidneys, our hair, our skin—everything is a cluster of cells. So what you're seeing is an expression of how well or how ill your cells are.

**Carrie Drinkwine 06:50**

I think one of the foundations that most people are missing is they don't understand: How do we detox? It was of my experience where I went and saw a naturopath and ended up extremely sick and in the hospital for being put on a heavy metal detox with unfiltering kidneys. Somebody might say, "What do you mean by that?" So I'm going to dive in.

**Carrie Drinkwine 07:11**

Kidney filtration is the foundation of your major elimination pathway. We have elimination pathways. We have the kidneys, we have the lungs, we have the skin, we have the liver as well, and we have the colon. The colon—we eat and then we poop out the waste or we excrete the waste. And if we don't—I always say, "What you don't eliminate, you accumulate"—it's building in the body. If you don't move your bowels every single day, and preferably two to three times a day, that waste is recirculating inside the lymphatic system. It can break through the blood-brain barrier and cause a lot of toxic overload, brain fog, and all of that. So I focus heavily on the drainage pathways, first opening the colon and the bowels and the kidneys, [which] are my primary focuses.

**Carrie Drinkwine 08:00**

Here's a little test you can do at home to see what I'm talking about. Most people think: "That's crazy. I can't find anything on the internet like that." And here's what I learned in my detox journey. I was asked to pee into a jar in my journey and share it with my practitioner. And I was like, "Okay, that's really strange." So I did. And my urine was crystal clear.

**Carrie Drinkwine 08:21**

The urine that you want to check is 12 hours or more away from the last time you consumed food or water. Let's say you stop eating at 7 at night, then you can check the urine at 7 in the morning. It doesn't matter if you went to the bathroom in the middle of the night. That's okay. We're just seeing: What's your body doing while you're sleeping? Are you eliminating lymphatic waste? What's in must come out. And that means excess urea, nitrogen, minerals—all these things need to come out of the body. So you should have cloudy urine with sediment. This is a healthy filtering kidney. Most doctors think that if you have sediment in your urine, it means you have an infection. And it doesn't. If you have an infection, you'll have more sediment. This goes to show you how many humans, in general, are not filtering, that it's not common knowledge.

**Carrie Drinkwine 09:16**

I own the Institute of Regenerative Health, and I train practitioners. One of the practitioners I was training was my children's pediatrician. She went through my school and became a certified practitioner. She hit this section in our institute, and she said: "Carrie, I trained with the nephrology department, and I learned they would call this 'dumb pee.'" She never knew what they meant. They would look at all the bags because these people had had anesthesia, and if the pee was clear, they called it "dumb pee." And they said, "These people will have trouble recovering." And they knew that.

**Dr. Jill 09:50**

Wow!

**Carrie Drinkwine 09:50**

Yes!

**Dr. Jill** 09:51

Just, wow!

**Carrie Drinkwine** 09:52

Incredible. I always wondered what they were talking about. And they said, "They need to have cloudy urine or they're going to have trouble recovering from the anesthesia." So all these light bulbs went off where this common knowledge has not been passed down anymore. But somehow it's taught in nephrology but it's missing everywhere else. If you look on the internet and you type in "cloudy urine," they say you have an infection.

**Carrie Drinkwine** 10:16

Pretty much every single one of my clients or patients that comes in here, I have them bring in a urine sample, and all of them have clear urine. Within two to three months of working with us, they all have cloudy urine, showing that now they're finally eliminating, which means this—here's where I want this to be an important piece: We are testing the blood all the time, but the lymph is 80% of our fluid. The lymphatic system is the sewer system of the body. It's what's taking out the trash. What you eat, drink, breathe, and put on your skin goes into your lymph. That lymph needs to excrete its waste out, and it does it through the kidney pathway.

**Carrie Drinkwine** 10:52

If you're not eliminating that waste, where is it going? It's overwhelming the liver. It's coming through the skin. It's maybe building in the lungs for people who have chronic infections. They're constantly getting pneumonia or bronchitis. Or it's in the sinuses because they're backed up from head to toe, literally. When we open up this pathway, we start to see the lymph drain—we're basically cleaning the terrain—and now the cells start behaving differently.

**Dr. Jill** 11:20

Wow. Even as an allopathic doctor, as I've been in functional medicine, I've realized [that in] my most difficult patients—beautiful people but difficult getting well; they're having trouble on their pathway—is a lymph issue so often. So I very much relate to this. And I feel like even on tools, allopathically, [that] we are given are

certainly not enough. We almost don't even talk about that system. The integument, the fascia, and the lymph are almost excluded from the medical education.

**Dr. Jill** 11:44

I want to talk about metals in the kidneys and why that's a particular issue if there are heavy metals because I feel like it really does affect the kidneys, more like your story there. But let's start with lymphatic. First of all, how would they present? Would they be puffy? How would they notice that they might have poor lymphatics besides the urine? And then what do we do for lymphatic drainage if we want to get that moving?

**Carrie Drinkwine** 12:08

A really good question. Most of all, feeling puffy is your main indicator. If you feel puffy, that also means the adrenals are involved. I say anything with an '-itis,' the adrenals are involved because you should be producing those healthy steroids to reduce inflammation. But I remember when I was ill, my fingers felt like sausage fingers. In the morning, I couldn't bend my hands. I was so puffy. This is lymph. You're super swollen. The lymph is very full.

**Carrie Drinkwine** 12:35

Another indicator is having to clean crusties out of your eyes in the morning. That is common but not normal. That's the lymph backed up in the head. The body is always looking for ways to excrete waste. Having to clear your throat a lot. You have lymphatic buildup, and the body's trying to clear that out. I would say [that] people that have a chronic cough [are] heavily lymphatic.

**Carrie Drinkwine** 12:57

The other thing to look at is the skin. Is the skin breaking out? Is it dry? Is it itchy? Is it flaky? If you take off your yoga pants, and I used to have this experience—I was a yoga teacher even when I was diagnosed with my illness—I would have hundreds of flakes go flying in the air when I would take off my yoga pants. I would think, "Oh, that's just dry skin." It's actually not. Dandruff is another example. It's actually the waste in the flakes. The sediment that you should be seeing in your urine is coming out the skin, which is known as the third kidney.

**Carrie Drinkwine** 13:27



Some people will present a skin issue. Some people won't. Some people will have cystic acne, which means there's lymphatic and there's infection in the lymphatics. All of that—the skin reflection, the dandruff, the clearing of the throat, the crusties in the eyes, the feeling swollen and puffy—those are all indicators that the lymph is really struggling.

**Dr. Jill** 13:48

Such clear advice. So then what do we do about it? How do you advise your practitioners to train their patients to really clear the lymph? What are some of the things we can do?

**Carrie Drinkwine** 13:58

There are a lot of physical things you can do first. Sauna is great because we want to sweat, and that's going to help us sweat and move lymphatics. Swimming is great. Hopefully not in a chlorine pool. A saltwater pool would be better. But that's going to move your lymph. Breathwork moves your lymph. Dry brushing moves your lymph. Rebounding moves your lymph. However, I don't recommend rebounding if you're really backed up because you're moving a lot of lymph to a closed kidney.

**Carrie Drinkwine** 14:24

We take people through a detox protocol. But the biggest advice that I have is—I call this acute detoxification, meaning for a short period of time—you're going to change your diet to get the kidneys to open up. Our really heavy protein foods actually overwhelm the kidneys. A lot of people are trying to address through a high-protein diet, and that can be fine for a phase, but it's not what's going to clean or regenerate your kidneys. So temporarily, we take people off of protein and we put them on really cleansing fruits: Berries, melons, red grapes, things like citrus. Think of [the following]: Would you clean your counter with a lemon or a piece of steak? It would be a lemon. So we start working with more diuretic herbs and then also cleansing foods to get those kidneys to open up.

**Carrie Drinkwine** 15:11

Also, things like light therapy on the kidneys and working with laying on red light and activating the mitochondria inside the kidneys. And then, I'll just throw in one last curveball: The kidneys have this energy or emotion of forgiveness. If there's an emotional component, sometimes we can physically stagnate in that area. This was



a big part of a lot of people's journey—or my clients or patients—that come through here. They would do all the physical work, and I would say 90% of them would reverse whatever they had going on. And then there'd be like 10% that were stuck, and we'd have to explore the emotional component to that.

**Dr. Jill** 15:48

Wow. I have found that to be so relevant—anger in the liver and different emotions—because it really is. Sometimes I will ask the patients, "Is there anyone you need to forgive?" and just gently, openly create a space for them to talk about if they want to. Or at least, "Go home and think about it." So I love that you include that.

**Dr. Jill** 16:07

I want to go on to light and the mitochondria. But before we do, any comments on... You mentioned the metal detox took you into a really bad place before you knew all this. And I see that. If someone's been diagnosed with heavy metal issues, especially mercury, what additional things may they want to know about detoxing the kidneys?

**Carrie Drinkwine** 16:27

Yeah, really good question. I think that zeolites are one of the safest ways to approach these metals. You want to be cautious with the zeolite that you choose. What I love about zeolites is [that] it doesn't matter if your kidneys are filtering or not. This comes in the body. Zeolites are natural in nature. They come from what's called clinoptilolite and they grab onto toxins, heavy metals, forever chemicals, microplastics, you name it. If it doesn't belong there, it pulls into its cage.

**Carrie Drinkwine** 16:54

The way it works is this helix cage is strong. It cannot open, it cannot leak, it cannot release. But once it reaches a net neutral charge—meaning the cage is full, it's circulated around your body and filled itself up with metals—you just pee it out, which is fantastic. That is the safest way to start to approach cleaning up the lymph, getting the liver out of overwhelm if you've had heavy metal toxicity. That's probably my favorite first-step approach. Instead of just starting to take chlorella and spirulina and all these things that are going to start pulling those metals to kidneys that aren't open.

**Carrie Drinkwine 17:27**

So that's what we do: We start with a zeolite. We use the cleansing foods to get the kidneys out of overwhelm. And then we also start with some cleansing and diuretic kidney herbs, which are very affordable. You can get them online pre-made. You can go to a local apothecary and start working with diuretic herbs. It's very simple.

**Dr. Jill 17:45**

Beautiful. I love that because some people are being diagnosed. And like you, unfortunately, I think practitioners are pushing too quickly without opening the pathways and then they get stuck and patients don't do so well.

So moving on to light, mitochondria, and energetic fields. There are a lot of things that help our health, as we know with red light now. That's becoming very popular. And you and I both had great experiences with patients on that, myself included. Let's just give an overview of: Why is light so important to ATP production—as we started on here, going to that level that maybe people aren't aware of—[and how does it] have an effect on their energy, their mitochondria, and their enzyme production?

**Carrie Drinkwine 18:20**

Oh my gosh, I love this question. The first part of my clinical practice for, I would say, the first eight years was really heavily focused on the biochemical—open up the detox pathways, clean the terrain—and we saw incredible results. But what I didn't realize is [that] our results were always consistent with bringing in really high-living foods. Foods that contain natural light in them. So I started becoming really fascinated with—as I have light beaming in my office right now...

**Dr. Jill 18:46**

I know. It's so beautiful.

**Carrie Drinkwine 18:49**

I could close that if it gets too light. But we are attracted to light. When you go on vacation, we all want to go somewhere warm where we can get in the water and we can get in the sunlight. That's because we inherently know that we need light as a precursor to our cells. So I started looking into this, and I started realizing that all

of our cells maintain a voltage difference across their membranes. This is known as the membrane potential. This is really crucial for all cellular functions.

**Carrie Drinkwine 19:17**

I like to give the example of: What's the difference between you, me, and a dead person? The difference is, we have a current; they don't. Some people will say, "Oh, the heartbeat," "Oh, air." Well, no. How does the heart beat? Through a current that's in their body. When you run out of your current, time is up. Everything is really about: How do we charge the cell first? Then the cell has the potential to detoxify and repair itself.

**Carrie Drinkwine 19:46**

When we look at a really healthy body, in neurons, when we see this membrane potential activity, it should be between -80 to negative -70 millivolts. This means the cells' integrity—the plasma membrane—is intact and the body is charged to a really good level. This is where you're like: "I feel good. I don't need to reach for coffee." When we're reaching for coffee or caffeine, we're already at a lower voltage potential.

**Carrie Drinkwine 20:14**

One of the things that is now really developing is [that] even in cancer research, they're starting to see that at -30 millivolts, the cell cannot stop division. No matter what. It does not matter what is happening. You could have the cleanest body, you could have the best micronutrients, but if that cell is at -30 millivolts, it cannot activate our Nrf2 pathway, it cannot detoxify itself, and it also can't recognize that it's damaged.

**Carrie Drinkwine 20:41**

Our body should be putting our damaged cells through natural apoptosis. This should be happening—programmed cell death: Oh, you're damaged, you need to go; we're going to make a new one. If we had proper communication and proper voltage, there would be no cancer at all. It wouldn't exist. So it's really about starting to understand that at -30 millivolts, what happens is the cell, in an attempt to survive, says: I'm just going to keep duplicating because that sounds good; that's all I can do at this level.

**Carrie Drinkwine 21:11**

I really focus in my practice on: Charge the cell, clean the cell, and repair the communication. That's about the electric potential. How does light come into that? And we all know that we're drawn to the light; we're drawn to the warmth. But it's deeper than that. There's so much research happening now that [shows that] light is the precursor to all mitochondrial function. But we have something called biophotons inside our cells. It's like a very weak light emission that comes from our cells.

**Carrie Drinkwine 21:43**

As I've studied live blood analysis and done LBA, what I've seen in every client that has a dis-ease or a disease state or chronic fatigue [is that] they have very little light surrounding their cells. And as we start to work on their body, their cells start to glow and have all this light and move about. And I'm like, "Wow, it's really about the biophotonic light emitting from the cells!" And that light is the precursor to the enzymatic function.

**Carrie Drinkwine 22:10**

When we look at ATP chemically, you eat glucose, it pairs with oxygen, it becomes ATP. But there are multiple steps before that. We need light in the body to then activate the enzymatic process that then activates the mitochondria to produce ATP. The less light we have in the body, the less we're able to generate that energy. This goes to show studies where we have the most depressed states are the coldest, rainiest, and grayest climates because there's not enough light coming into the body to carry out the regulation of our cells.

**Dr. Jill 22:51**

Amazing. You are such a great teacher. No surprise that you own an institute to train because you're really, really good at explaining difficult concepts.

So obviously we have experience. This morning I wore my red light device on my head. I love starting my day with that. I have PEMF. What are some modalities and things? I know you mentioned food. I don't want to forget food and movement, because I think those are things that people forget because they're so basic and yet they're so core. Give us a smorgasbord, give us a buffet, of how we could infuse light into our cells each day.

**Carrie Drinkwine 23:23**

One, I say [that] if you can catch a sunrise every day for the rest of your life, do. I know that's hard, but when you get into this state of vitality and you balance your circadian rhythm—you go to bed when it's dark, you wake up when the sun is coming up—that red light is activating more in your body than you can understand. The red light of the morning, your retina receives it. This starts the production of melatonin for the night, which is activating the body; it's activating the mitochondria. Your morning sunlight is your morning cup of Joe. It's what is charging your cells. So I say, bare skin outside in the morning.

**Carrie Drinkwine 24:02**

Right now I'm in Minnesota, which is -2 degrees. One of my tricks is [that] I do my workout first. I get my cells charged up. I get really hot and sweaty, and then I go outside with as bare skin as possible. So I'm really warm anyway, but I'm getting that morning light. So morning sunlight. If you can't do the sunrise, at least get out in the morning at some point, as bare skin as possible, but let your eyes receive the light and without contacts. Currently, contacts actually block a lot of the UVA and UVB light that you need to receive light. People don't know that and their cells aren't getting this essential charge from the sun.

**Carrie Drinkwine 24:42**

We also produce vitamin D based on how much sunlight is hitting our skin, triggering melanocytes to start to convert. So sunlight is essential. It's creating vitamin D synthesis. It's regulating our hormones. That's the free and cheap way.

**Carrie Drinkwine 24:59**

I also think red light therapy is amazing. If you can't get out in the light, get on a red light bed [or] get a red light device at your house. You want something that can penetrate through the skin. That's going to be a good red light device. Red light—what it does is it increases cell-to-cell communication. So you're charging the mitochondria.

**Carrie Drinkwine 25:21**

So yeah, PEMF [devices] are some of my favorites. And there are all kinds of different devices that you can use. I don't know if you want me to get into the

specifics or not. But I would say red light, movement, sunlight, daily grounding—which is free bare feet to the ground—really charging your cells, and then eating foods that contain natural light. You can study biophotonic light and food. And there are foods that you can actually see the energy that emits from them.

**Dr. Jill** 25:51

It's such a great layout of what we can do. And really, even if you can't afford a PEMF mat, you can all get out and see the sunrise.

We were talking earlier about a delayed trip for yourself. You would have been in a different country right now. And it's interesting because I bet you do really well with jet lag. I find that I almost don't have it because I use light and food to tell my body what the time is. And I've been teaching my friends that, and they're like: "It really worked! I went to France." And they were fine. But it's all about light and food and these signals. And when you learn that, you will never have jet lag again. I'm assuming that's the same for you.

**Carrie Drinkwine** 26:26

I never have jet lag. One of my students made a joke and said, "You change time zones more than most people change their pants." And it's true. I'm forward seven hours; I'm back eight. I'm forward two; I'm back one. And it's multiple times a week because I'm speaking all over the world, and I never have jet lag. It's because I tell my body what time it is. I fast on the plane. If it's daylight when I land and my body thinks it's bedtime, I go outside right away. I let my body receive the light, and then I break fast at the time I should be breaking fast to train my body. And I never have jet lag.

**Dr. Jill** 27:03

I love that because obviously, it's the exact same thing. People think, "Oh, let's take melatonin." No, it's light, and it's food cues. And our body knows what to do. I've been so fascinated by how really easy it is to hack jet lag because you just give the body the signals. I have red glasses. I'll wear those if I want the body to not know that there's light out there. Wow, so much.

**Dr. Jill** 27:26

What is up and coming for you? You obviously are an incredible force in the world in training doctors to think differently and practitioners. What do you see in maybe just 2025 as up-and-coming things that we can use to enhance performance and vitality in patients and even in ourselves?

**Carrie Drinkwine** 27:46

I think the best medicine is knowing that you are the medicine, you are the antidote, and using those free resources that we talked about. But there's a lot coming up. I can share what I have coming up if you'd like. And we have a program called RegenAge, which is literally a reverse-your-biological-age program. That is going to be coming out in February. So very, very soon. And we're working with the best of the best in really understanding a lot deeper of all this knowledge of: How do the cells work? How does the lymph work? What's going on with your gut? What's the communication, the pathways? It's this deep dive program with me that's really amazing. And there are multiple options to join. There's a free option. There's an Evergreen option. And then there's a live—being coached by me—which is really a big deal because I've been retired for quite a while.

**Carrie Drinkwine** 28:33

Also, if people are interested in this—like, "How do I learn this work?"—the Institute of Regenerative Health, the next program to become a certified regenerative health practitioner is in April. So [at] the end of April, we start launching a new program that is live, guided by myself and my coaches. And you learn this really elite knowledge on how to view the body from the physical, the biochemical, to the electric to the magnetic, and even understanding what I call the energetic anatomy of illness. I think that there's so much opportunity through this. There's also so much coming out.

**Carrie Drinkwine** 29:07

These biohacking summits are fantastic—to go and learn from so many incredible people like Jill, I met. We were on this panel together. It was really funny because we were super vibing with each other in what we were saying. But go to these summits. Go out. There's going to be the Hack Your Health Summit. There's the Whole Life Summit. There are so many summits coming out and events where you can immerse yourself in people who think differently. And it's really, really refreshing.



**Dr. Jill 29:33**

I couldn't agree more, and I think: Power to the people. Even [on] both of our journeys, I had cancer; you had the autoimmunity. And I really had to go outside my conventional training to say, "What else is out there?" and really learn to heal myself first and then take it to the world. And you've done the same thing. So kudos to you for all the great work you put out.

**Dr. Jill 29:51**

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**Dr. Jill 30:10**

Carrie, it's so exciting. I hope wherever your travels take you next, it is good and you get to continue to inspire people. Any last words of wisdom for someone, especially maybe someone out there suffering from autoimmunity or some chronic illness [that] they haven't been able to overcome?

**Carrie Drinkwine 30:26**

Yeah. Autoimmunity is really unique in the sense that the Western world thinks that our body is attacking our own cells. I would love to invite a reframe because our body is always on our side. What's happening—Jill and I talk about this—is about too many toxins in the body. What's happening is an infiltration of pesticides and parasites and things that don't belong in the cells. The danger alert has been set to your immune system saying: Something's in my house; there's an intruder in my house. So the body is attacking the intruder.

**Carrie Drinkwine 31:00**

For example, when I had Hashimoto, which meant my body was attacking my thyroid tissue, why do you think? From the brain, what's going through that? We have huge lymph nodes here behind the clavicle bones. What's coming down from brain toxicity, from heavy metals, from all of that, is collecting in the thyroid tissue.

This concept of autoimmune is: "My body is attacking itself." No, your body is trying to get something out that doesn't belong there.

**Carrie Drinkwine** 31:27

One of the biggest keys is defungal, deworm, and get the chemicals, pesticides, and parasites out, and the autoimmunity goes away because once the problem goes away, the body stops signaling to attack that cell. One of our sayings is, "The issues are in the tissues." Once you remove those issues from the tissues, the body repairs itself. Your body is brilliant.

**Dr. Jill** 31:52

I love it. And maybe I'll just have you say what's the best website if they want to find more? You can make sure if they're listening, they can remember that website, and we'll link it up as well.

**Carrie Drinkwine** 32:00

I would just say go to [CarrieDrinkwine.com](http://CarrieDrinkwine.com) because it hosts the link to get to my institute or my clinic or some of my live programs that are happening. That hub will keep you all in one place at [CarrieDrinkwine.com](http://CarrieDrinkwine.com).

**Dr. Jill** 32:14

Awesome. Carrie, what a pleasure it has been to get to know you even better, and I hope to see you at one of the upcoming conferences. Thanks again for sharing your wisdom.

Hey, everybody, thanks for joining us for another episode of *Resiliency Radio*. As you know, we come on every week. Wednesday is a new episode on YouTube. Hey, if you haven't subscribed to my YouTube channel and you're watching, subscribers are now approaching half a million, and I'm just so grateful for all of you out there. Many people I know, even myself included, listen to amazing podcasts and don't subscribe, and that's okay too. But I want to just invite you; if you haven't subscribed, please hit that subscribe button and notify so that you'll be notified of any new episodes. You can find all the transcripts as I mentioned at [JillCarnahan.com](http://JillCarnahan.com).

**Dr. Jill** 32:54

And the last thing: If you haven't yet seen the movie Doctor/Patient at [DoctorPatientMovie.com](http://DoctorPatientMovie.com), it's now streaming for free. We put a lot of money, heart, and soul into making that documentary to inspire and encourage those of you with chronic illness, those of you who are looking outside just conventional medicine for answers. So you can go now to [DoctorPatientMovie.com](http://DoctorPatientMovie.com). You can stream that on Amazon Prime or YouTube with ads for free. I hope you enjoy it, and let me know your feedback after you've watched the movie.

Take care, and we'll see you next week.