

# **Healing Trauma With Functional Medicine**

**Guest: Laura Frontiero** 

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### [00:00:09] - Alex Howard

Welcome everyone to this interview where I'm super excited to be talking with Laura Frontiero. We're going to be exploring the role of functional medicine, the place that trauma plays in the interface of trauma with our physical body. We'll also be talking about the four root causes of many of the health challenges we can experience.

To give you a little bit of Laura's background, Laura Frontiero is the founder and CEO of Bio-Radiant Health, creator of six online functional medicine health summits, and has served thousands of patients in the clinic and virtual setting as a nurse practitioner over the last 25 years.

Her focus is to solve the root cause of chronic health conditions by supporting cellular energy production, gut health and detoxing the whole body. Her work in the health industry marries both traditional and functional medicine, and she's known by her community as The Energy Lady. So firstly, Laura, welcome. Thank you for joining me.

#### **Laura Frontiero**

It's wonderful to be here. I'm so happy to contribute to this project.

#### **Alex Howard**

I want to start with something I was reading in what you shared with me. You were involved in the original ACES study, the Adverse Childhood Experiences Study. It's one that's been quoted many times in interviews in this series of conferences. It's one that I've spoken about. I have to start there. Tell me about that and your involvement with it.

#### **Laura Frontiero**

I'm pretty sure by now the ASUS study is well known around the world. It was a joint study by the CDC and Kaiser Permanente, of all things. The primary investigator on that was Dr Vincent Felitti, a pioneer in bridging people's adult chronic health conditions and bridging the connection with what occurred traumatically with people in their childhood.

### [00:02:09]

The study had already been completed by the time I showed up on the scene. But my part in this is, I worked in the clinic where all the research was conducted and we used that data and the tool that was developed to identify adverse childhood experiences and how they relate to adult chronic health conditions. We put that into practice every day. So every day I used the tool that was created.

The research study was from '95 to '97, I showed up on the scene in 2000. 17,000 people went through this clinic that I worked in, to receive physical exams, and these confidential surveys that asked them questions about their past childhood experiences and their current health status and behavior. The categories that were asked for the Adverse Childhood Experience Study included a lot of different things.

For example, they asked about abuse. Psychological, physical, sexual abuse. In the clinic that I worked in, it was a preventive medicine clinic, and it was where we did head-to-toe physical exams, did a whole bunch of diagnostic tests, and took a really thorough health history, including their childhood history. And then we put that all together and connected the dots and helped people identify how to solve their chronic health conditions. The things that were identified in this study were profound.

They were asking questions like, "Did you witness violence against your mother?" "Did you live in a household with people that were substance abusers, or mentally ill or suicidal?" Or "Was one of your parents imprisoned, or were you abused?" This was deep stuff.

You could imagine, I'm in an exam room with a patient, who came in to get their cholesterol, blood pressure, lung volume checked and go over their labs. And I'm asking them about abuse, and I'm asking them about these really big psychological things. And, you know, Alex, that when you ask this in a western medicine environment, this takes a lot of time and it opens a can of worms.

What western medicine clinic actually does that? Where you have to roll through people in 10 or 20 minute visits? I'd spend 45 minutes to an hour with people all day long. This was the model. It was remarkable. And I'm sad to say that the money was eventually taken from that department. It lived for 30 years. It was called The Health Appraisal. It was in San Diego. Eventually Kaiser took all the funding for that and hired 30 new primary care doctors and abolished the program. That is a true story. I was there when it was disbanded.

# **Alex Howard**

Wow. I think about, just as an aside, the volume of people, because... The Optimum Health Clinic, which I founded and run, we've been going 20 years. I remember maybe 7 or 8 years ago, one of the admin teams saying, "Hey, we just hit our 10,000th patient registered in the system." We're 20 years in, maybe we've seen 17,000 people in 20 years. But you think about the time of that research and the amount of people, it's a staggering amount just of processing of data.

# [00:05:35] Laura Frontiero

Alex, there was 30 practitioners working in that clinic and probably 100 staff total.

#### **Alex Howard**

Wow.

#### Laura Frontiero

It took up two floors of a six-story building. Two floors were dedicated to this clinic. And they had a satellite clinic in another part of San Diego. I saw thousands of patients per year through this clinic. It was bonkers. It was a lot.

#### **Alex Howard**

Thinking about that approach... It's so sad to hear how it was abolished. But that approach and the differences between, what we would call, a functional medicine approach and a more mainstream western medicine approach. Do you want to maybe speak a little bit to some of the differences between those two frameworks, those two ways of understanding health?

### **Laura Frontiero**

I'm really grateful for the time that I had in this model before I transitioned myself to functional medicine, because I see, and I know, and I understand what doesn't work. Kaiser did the good work of conducting this study and connecting people's childhood experiences with their adult chronic health problems and it was an absolute 100% connection. It cannot be denied. People who have these type of experiences are more likely to have heart disease, to have obesity, to have diabetes, to have cancer, to have adult risky behaviors, to use substances, alcohol, drugs, smoke. They're more likely to have COPD on that note.

We know the link is there, but how we solve it, what we do to support people, this is where western medicine misses the mark. Even Kaiser Permanente, who did this ground-breaking study that's quoted all the time in functional medicine and integrative medicine. What we do is we prescribe drugs and we do talk therapy. This is all we can offer people. I can't tell you how many times when I worked in that clinic that I wrote in my chart "Referred to psychosocial services". "Referred to psychosocial services". "Recommended SSRIs". "Recommended..."

Nothing that would really get underneath the problem and help solve it for people. In the functional space, we do things a little bit differently. There's a lot of different strategies and therapies to actually release the traumas from the body, because what western medicine, they figured out that there was a connection, but I don't think they figured out that the trauma lives in the tissues. That the trauma lives in the organs. That the trauma is in us. Even if we've forgotten it or don't remember the exact details of the trauma, it's in there, and it's manifesting as this thing that we call 'somatic' in the western world. I can't tell how many times on a chart I wrote, and I'm saying I wrote because this was before electronic medical records.

# [00:08:30] Alex Howard

You actually wrote.

#### **Laura Frontiero**

Yes, I actually wrote. People had a phone book sized chart, and I wrote note after note after note. I have an overuse injury in my arm to prove it. I would write in people's charts, 'Somatic', 'Somatization'. And I look back now, I'm like, "Oh my God, I can't believe I did that." But that's all I knew.

I really want to say to people listening right now that your western practitioners, they are helping you to the level of their knowledge and their expertise. Stop spending energy being mad at them for what they're not doing with you, or for you, because they don't know any different. People treat to the level of their education and training and they all mean well. 100% of them are, in their hearts, doing good work. They are trying to help you.

You need to go seek out... If you're doing the talk therapy and the drugs and it's not working to solve the anxiety, the depression, the moodiness, the low energy, the brain fogginess, the body aches and pains, all these things that live in the body after trauma, the digestive issues. I can't tell you how many GI referrals I wrote to nowhere. The GI doctors couldn't help these people. The bloat, the constipation. They'd get all the diagnostic tests, they did colonoscopies, endoscopies. And their GI docs would say, there's nothing wrong with you. It's all in your head. Literally, you are physically perfect. You have a problem in your head.

We don't do that in functional medicine. We get under it and figure out what else could be there, besides trauma and stress, in addition to that, that could be causing some of these issues. And how do we help people release that trauma and stress out of the body?

#### Alex Howard

One of the things that I think is often interesting about the ways that trauma shows up, is that people can recognize they have adverse childhood experiences and then people can go through their teens, 20s and 30s and they're like, "I'm fine. I don't have any impacts of that." Maybe there's more psychological impacts, as anxiety, depression and so on. But physiologically, often people can get away with it, for want a better way to put it. And then it's often from in one's 40s, 50s and 60s that people then start to show the physical impacts of those trauma experiences.

I'm curious as to, from your experience and your perspective, what are some of the root causes of those manifestations? What are the physiological impacts that are often going on there?

### **Laura Frontiero**

I want to talk about root causes for a moment, because there are four main root causes that underlie almost every chronic disease, illness, condition. In those buckets of root causes, four buckets, one of these buckets is trauma and stress. Those could even be two buckets, because stress is different to trauma. But the emotional, I would say the emotional component of trauma and stress would be in a bucket together.

# [00:11:36]

And then there's three other buckets that we really need to address, because if all we do is solve the trauma and reduce the stress, that's probably still not enough for people who are having, what I call, this middle-aged deficiency syndrome. This manifests literally in the 40s, 50s, 60s. If you don't do something about it, it continues on and it ends up in chronic disease. That is the low energy, the brain fog I mentioned earlier, a cluster of digestive symptoms, body pains, skin eruptions. All of this starts to happen, and there seems like there's no reason for it. So the three other root causes need to be evaluated. This is where I live, in the functional medicine space.

Also, I'm so grateful for the misinformation I learned in the western medicine world on how to solve this. But the next bucket would be chronic infections. Infections don't just live in the gut. They live all over the body. So infections can be in the sinuses, they can be in the lungs, they can be in the bloodstream, they can be in the liver. They can be more places than just the intestines or the GI tract in general.

I'm talking about parasites, fungus, bacteria. Those are the big categories. They really will wreak havoc on the body, reduce immune function, screw up all your systems in your body, steal your energy, make you foggy, eat your nutrients before they get to your cells, where you need your good food that you're eating, all that organic food you're eating, and thinking, "I can eat my way out of this." Well, the infections can steal that from you.

The third bucket would be. So first bucket being trauma, stress, second bucket being infections. Third bucket would be toxins. And this is a huge topic. It's something that you and I could probably spend an entire hour on.

Toxins are coming at us through our food, through our fluids. So what we're ingesting, what we're breathing, what we are putting on our body and our skin and using in our homes. I'm talking about cleaning products, body products, hygiene products. I'm talking about heavy metals and pesticides and herbicides in the water, in the food. I'm talking about the air we breathe that's riddled with toxins and even heavy metals. And I'm talking about mold toxins as well. All of this needs to be evaluated and removed. And then we can oftentimes solve the underlying reason why people feel the way they do.

The final bucket is nutrient deficiencies. What I have to say here is, there's a lot of misunderstanding in this area as well. Many experts will just say, "Well, our nutrition problems are because people are eating processed food and because farming practices are depleting our soil of nutrients." That's part of it, but those other two problems I just mentioned, infections and toxins, they're actually stealing your nutrients. Toxins block cellular receptor sites where nutrients get into the cell so that mitochondria can make energy and help you with every process in your body.

You've got to get those toxins out so nutrients can get into the cells. And there's the issue of infections, like I said, skimming off the top, taking your nutrients from you. When we are holistically looking at helping a person with this middle-aged deficiency syndrome situation, which is, immunity is not working, brain isn't working, body isn't working, enzymes aren't being produced, hormones are dysregulated. It's a mess. If we're going to solve this, it's a holistic approach. We have to look at all four of these things together.

# [00:15:00] Alex Howard

When it comes to working with people, I'm curious as to how you figure out which of those pieces are going on? Because a lot of the symptoms can be the same. If someone's got a chronic infection issue, it may well manifest in the same way as toxins, or nutrient deficiencies, or indeed as trauma. How do you help decode that and figure out where to start?

#### Laura Frontiero

That's an interesting question. I'm going to say something that may sound kind of crazy, but almost everybody starts in the same place. That is because of this one thing that we know. Your body innately knows how to help itself. Your body knows how to heal itself. It's very intelligent. So if you can give your body, your immune system, your cells, your brain, if you can give it a foothold, if you can just give it a little edge, then oftentimes it can take over and start doing what it needs to do to help you.

I generally start everyone in the same place, because almost everybody I work with has clogged up drainage pathways. Their organs are not working efficiently, they're not pooping every day. Rarely do I meet someone in my world who says, "Yeah, I poop enough every day." This is a huge problem if you're not. Constipation of emotions, constipation of toxins, constipation of microbes. If I can get people, for two weeks, to open up their drainage pathways in their body with some simple herbs and remedies and start working towards that, they start to have their body come back online.

Maybe they have a better night's sleep, and now they've got more energy, and now they feel like they actually can spend the time to prepare the food that they know they need to be eating. The last place I start, and I know this isn't popular, but I don't start with food. People tell me, they say, "But, Laura, food is medicine, and it's so important." Yeah, okay, there's some general rules about food. Don't eat processed food. Eat real food. Don't eat at the drive-through. This is all part of the plan, but I'm not going to obsess about what kind of diet. Is it paleo? Is it keto? Is it low FODMAP? Is it on and on and on?

We're not going to play that game in the beginning because we need to get your immune system online. We need to give you some wins. We need to get your mitochondria firing. Drainage pathways and mitochondria is generally where I start. Most people, unless, and I will say unless, unless their trauma is so severe, then most people will actually start to come back online and start to feel better. And then we start to investigate from there with labs, with whatever we need to do based on their symptoms, their history. People live into this, and they have to live out of it, too. That's another thing. It doesn't resolve overnight.

### **Alex Howard**

You mentioned labs. In your way of working, how important is data? Because I think, again, often what can happen is people can go, "Well, I have this symptom. That's that thing. So I'll just take this intervention." I'm curious as to how typically you use labs and... Speak to that bit.

# [00:18:18] Laura Frontiero

I've done it both ways. I've done treatment protocols with and without labs just based on symptomatology and history versus measuring. I find some benefits from measuring. The question is, how long do you want this to take? We can try to guess and say, "Okay, your symptoms are pointing at this. Let's try this. Oh, that didn't work. Well, those symptoms could also be pointing at this. So now let's try this. That didn't work. Okay, well, your symptoms could also mean..."

Low energy could be caused by a lot of things. Maybe it's mold, maybe it's metals. Maybe it's a parasite, maybe it's trauma, maybe it's... Maybe it's... I find that if we do labs, we can shortcut the process and really hone in on what we need to solve. Also, and this is the magic of labs, when you see in black and white, you are going to be more motivated to actually follow through and complete the thing that we recommend you do because it's there.

Guess what else labs do? They help you not feel crazy. So you can go to your spouse and your kids and your boss and say, "See, this is why! This is why my brain is foggy and why I'm tired and why I'm calling out sick and why... This is really happening." It's really helpful to feel like, "Oh, this isn't in my head." But western medicine labs are not going to give you those answers. Your doctor is going to look at you and say, "This is in your head" because western medicine labs are not going to uncover those buckets of problems that we just talked about.

#### **Alex Howard**

That's a good point. I think we'll speak to it a bit more. Do you want to speak to the difference between functional testing and more mainstream testing?

### **Laura Frontiero**

Mainstream testing is measuring... I'll use the example of magnesium, for example. When we do a magnesium test on you, or a B-vitamin test on you, or think of any kind of test. When we measure these types of markers, we're looking at the amount of that nutrient that's circulating in the bloodstream. That's how much your body's moving around. That's not what your need is, though. I want you to shift and think about what's my need for magnesium, the amount that's in the bloodstream versus how much my tissues need.

I usually like to give magnesium as an example because it's required for every cellular function in your body. It's really important in mitochondria energy production. It's really important in so many aspects of our health. You can run a functional medicine organic acids test, and see a completely deficient or high need for magnesium, while your western doctor is saying your magnesium is fine, that's just how much your body's moving around. It's not how much you actually need. If you're fighting infections and if you're fighting toxins, you need more magnesium than what's showing on your blood test.

So instead, let's measure enzymatic reactions in the body and see what the need is. That's just one example. There is a time and a place and importance for western medicine labs. There's some really great labs to measure inflammation in the body, to measure cancer markers. There's all kinds of good stuff there. But from a prevention perspective, we don't do a very good job of that in the western world.

# [00:21:37]

In fact, prevention in the western medicine world is a lie. Prevention in western medicine is just early detection. It's not actually prevention. I want to illustrate that for you. I want you to think of a mammogram. Let's think of breast cancer screening. We call it a preventive test. Your insurance covers it as a prevention. It's a screening. I'm here to tell you that this is not a screening test. That is an early detection test so that we can treat breast cancer before it becomes advanced and more expensive and more likely to kill you. So a mammogram is looking for a spot that we can take out with a biopsy before it's big. That is an early detection test.

And I'm not saying don't have your screening tests in western medicine. I'm saying don't be confused about what this test is. It's not prevention. Detection versus prevention. This is one of those things that I realized after 20 years of working in western medicine in a preventive medicine department. I went, "Oh, I'm playing an early detection game. I'm not actually preventing a thing."

#### **Alex Howard**

I think, also, it's one of the challenges where, when people that do functional testing then go to the mainstream medical world and present those results, and they may well rubbish it. That's not the way that they work. It doesn't mean that it's wrong. It just means they necessarily understand what they're looking at.

### **Laura Frontiero**

That's always it. I remember when I said in the beginning that - don't be mad at your doctors if they don't get your functional medicine labs or they don't understand the protocols that you're on, or the herbs that you're taking, or the biohacking that you're doing. They only know what they studied.

Many, many people are afflicted with know-it-all syndrome, like, "Well, I know it all and I've never heard of that. So therefore it's not valid." people invalidate information they don't understand or know all the time. And underlying that is truly a fear that "I'm not enough." That's really where that's coming from, is like, "Wait, I've got all these degrees and I studied, and I'm the big dog on the hill, and I make all the money, and you bring that to me, and I don't know that that means I'm not enough." That's all that is. That's just being human.

# **Alex Howard**

I want to talk a little bit about the relationship between these four root causes, because you mentioned trauma, infections, toxins and nutrient deficiencies. Sometimes people are wondering is it trauma, or is it infections, or toxins, or nutrient deficiencies? I think sometimes the challenge is that people go, "Oh, well, I have those adverse childhood experiences. It's trauma. Therefore, I just need to focus on healing the trauma."

And yet, what's happening is that the trauma has already impacted these other systems. I'd love you to speak to... I know that you were saying before we started recording that you don't treat trauma, you treat what's happening in the body. So it's true that people need to deal with the trauma, but people also need to deal with what's happening in the body.

# [00:24:39] Laura Frontiero

They do. I think I would start this answer by saying that trauma opens the door for these other things to take a foothold. There's the first thing to really understand. Honestly, Alex, I don't think any of us got out of childhood without some trauma. Hardly anybody had a perfect childhood. I had very loving parents, and when I look at that list of trauma, there was substance abuse. There was divorce. But I would look back and say, I was very loved, and my parents did the best they could with the tools they had. I have a very close relationship with them, and I love them very much. I would never feel like they didn't do a good job. But there were traumas there.

So most of us don't get out without some trauma, which opens the door for more things to set foot. Because that trauma, I want you to think of, like I said, your body has the tools to take care of itself, and it's at its peak strength at some point in your life. At some point in childhood, before anything bad happens, you've got peak immune function, you've got peak brain function, you've got peak digestive function. Everything's circulating well, everything's good. And then you start to take it down a notch. An assault hits you, a trauma hits you, and boom, your whole system comes down a little bit.

Now it's easier for an infection to come in from the sushi that you ate or the uncooked fish, or the partially cooked fish, or the uncooked pork, or the watercress that had parasites on it, or the dog that licked you, or the mom that kissed you and passed it on to you. Now your immune system can't handle that. Now you're getting exposed to metals in your water, and you're just going down, down.

A trauma usually is associated with this and takes us out a little bit, like when you have a cold and your immune system isn't very strong, and then you can get a double cold on top of that. It's that same concept. It all interacts. It's all related.

I think what you are getting at, that you want me to talk about is, I work with people who we do all the things right. We do the parasite cleansing. We do the toxin cleansing. They've been working with me for six months. They're doing infrared sauna. They're doing red light. They're doing mitochondria support. They're doing all the body detox things. They're dry brushing their skin. They're rebounding. They're doing all the things to get toxins out of their body, but they're still not better. They're seeing parasites come out in the toilet, and they're watching these microbes come out, and they're like, "When will this ever end? Why is this coming out of me? And I'm still not better, and my energy is not better, and I'm not where I want to be."

Did you address the trauma? Have you called for the EMDR appointment that I recommended for you? Have you worked on brain neuropathway retraining like we talked about? "No, haven't done that. I haven't wanted to do that. Don't you just have another pill or a protocol that can help me or another supplement?" No, you have to do that piece.

I can remember early on when I was studying functional medicine and working with my first clients, and I had these people that I couldn't get better, and I'd go to my mentors, and I'd say, "What am I missing?" Do you know what they'd say, Alex? "What's the trauma? What trauma is going on? Have you addressed that? What kind of emotional trauma have they not worked on?" Every time. I can't tell you. I'd be like, "There's got to be a way I can help them through this." Nope.

# [00:28:12]

So then I start remembering where I came from. I came from Kaiser Permanente and that preventive medicine department and all of the ACES study. And I remember, "Oh, the issues are actually in the tissues." It's true. These things don't leave us. They have to be handled. But we just didn't handle it well in western medicine.

#### **Alex Howard**

It strikes me, Laura, as you're talking, that there's different camps that people get into. There's people where they don't want to address the trauma and you're making those recommendations to go and find pathways to do that. But there are also folks who are fixated on the trauma and think that all the answers are addressing the trauma and then are not looking at the infections, the toxins, the nutrient deficiencies and so on.

### **Laura Frontiero**

You have to remember that the trauma opened the door for those things to happen. If you have trauma, you also have those things. It's never just one thing. I think that would be the biggest message that I want people to hear is - it's never just one thing. Last I checked, we aren't getting off this earth without being exposed to toxins, without being exposed to microbes, without being exposed to the nightly news and the stress, and without being exposed to some sort of processed food, or preservatives, or glyphosate or something. You are not escaping this.

If you've had trauma, it just makes you that much more susceptible to it. You have to address it, and you have to understand that not one thing is going to solve this. I know people want one thing. "If I just do the trauma work, I'm going to be good." You're going to be better, you're going to have a foothold. Your body's going to have more energy to do what it needs to do. But if you want to get back to that peak performance. You've got to look at these other things.

### **Alex Howard**

Part of the challenge is that often, as you mentioned, people have been to see mainstream practitioners that have either gaslit them, or just not understood what's going on, or have taken these very arrogant perspectives of "I can't find anything wrong with it or there's nothing wrong" and so on. What are some of the qualities that are important in a good clinician? Someone that's listening to this interview and goes, "Okay, I recognize I'm working on the trauma piece, but I need to work on the functional medicine piece." How do they navigate that pathway?

### **Laura Frontiero**

This is a really important question because anybody can hang a shingle out there and say "I am a natural medicine practitioner, I am a holistic practitioner, I'm a functional practitioner." There's no regulating authority, there's no regulating body on this. Anybody can say "I do this."

So you better ask your practitioner some questions and you better also pay attention to what they're asking you. Is your practitioner, in their protocols, in their programs, is there a place for trauma and stress to be addressed? Are they talking about this as an important piece to your healing strategy and your process? If they're ignoring that and saying, "All we need to do is a

DUTCH test and look at your hormones, and fix your adrenals, and your thyroid, and get that blood sugar regulated, you're going to be good." Then run. Because that is like a middle-of-the-road problem.

### [00:31:34]

Those sets of problems I just explained, those are not root cause problems. Those are middle-of-the-funnel or middle-of-the-stream problems. And underneath that, if you go further upstream or underneath those things, you would think of it, then you'll find those four buckets of problems I just talked about.

When you're looking for a practitioner, make sure that they're addressing trauma and stress, that they're addressing chronic hidden infections, not just gut protocols, that they are talking to you about detoxing. And they're not suggesting a two month or a two week juice cleanse. Detox is a process. It could take you a couple of years to get all this stuff out of your body.

Your practitioner had better be talking about phases. Like "First we're going to do this, then we're going to work on this, then we're going to work on this. You're going to get all this out of your body and you're going to feel better as we go." And they better be talking about nutrient deficiencies. Not just that your soil is depleted and that you're just eating processed food. There better be some thought behind what's causing those nutrient deficiencies.

And then I would also say, you want to work with somebody from a functional perspective, in addition, that's also working on mitochondrial energy production because you need more mitochondrial energy to heal. It's not just the physical energy you feel each day, day in and day out, by 14:00 you're zonked or you have energy to keep going.

I'm talking about invisible energy in your body that's needed to build new hormones, build new neurotransmitters, digest your food, help your immune system heal, and communicate with all systems in your body. You need more energy production for that. You even need energy to sleep. That's a whole other talk we could have. But you had better work with somebody who's putting mitochondrial energy support and addressing that into your protocol.

Somebody who's opening your drainage pathways. If they aren't talking to you about poop from the first get go, that you are pooping every day. You are never going to get better. We have to have you doing that to get all these things out of your body. Those are some red flags. I would stay away from the person who says, "All we're going to do is hormones and adrenals and you're good."

# **Alex Howard**

I'm hosting the event, so I can use rude words. If they're not talking shit, they're talking shit. That's what came to my mind when you said that.

### **Laura Frontiero**

I might have to use that in my programs.

# [00:33:39] Alex Howard

We have to try and soften the language a little bit.

# **Laura Frontiero**

We talk about poop all the time. People love to talk...

#### **Alex Howard**

If they're not talking poop, they're talking poop.

# **Laura Frontiero**

When you open the door for people to talk poop and you make it a safe place, it's all they talk about. I'm telling you, that is a big topic.

### **Alex Howard**

I got three daughters between 6-12, so it's not a difficult conversation in our household. We're running out of time. I'm going to ask you in a minute how people can find out more about you and your work, but maybe just a few practical pieces. You mentioned that your pretty generic starting point with a lot of people is opening up detox pathways. Any practical things that people can do at home, or if that requires more sort of clinical input, just some sort of takeaways. People listening to this, where can people start?

### **Laura Frontiero**

There's some great things you can do from home that don't cost a lot of money or effort. Number one, let's talk more about poop. All of your drainage pathways funnel to the bowels. All organs of detoxification funnel to the bowels. The liver funnels to the bowels. Everything funnels that way. The first and foremost thing you can do is support yourself pooping.

There's some great magnesium products out there. Ozonated magnesium. Am I allowed to share some brands? I can plug some brands. I mean Oxy-Powder by Global Healing is amazing. It's an ozonated magnesium oxide. It is great. It helps people poop. You can take several. It all gets excreted. You're not absorbing that particular type of magnesium into the body. It's a particular type of magnesium that excretes.

Getting yourself pooping every day is number one. Your poop should be the distance of your wrist to your elbow, not the length. But if you poop three times a day, take a look at that and kind of mentally categorize. If I lined all that poop up, is it the distance of my wrist to my elbow? If the amount of poop you're pooping each day is this long and this much total, you're constipated, you might go every day, but that much... So poop every day is really important.

You can take Epsom salt baths. That's amazing. That really helps with detoxification and opening your pathways and supporting you. You can rebound. That's where you get on a little trampoline and that helps move your lymph. You can do lymph massage. Just look up on YouTube, Kelly Kennedy is the Lymph Queen. She's amazing. She'll teach you how to massage and pump your own

lymph. You can skin brush. Before you get into a shower, get a dry brush and dry brush your skin before you shower. You can tongue scrape.

# [00:36:15]

If you don't have the money or the resources to get an infrared sauna or red light, guess what? Those wavelengths come from the sun. Get outside and get your whole body in the sun. I know there may be people watching her going, "But Laura, I live in the Pacific Northwest and there's no sun here."

#### **Alex Howard**

Or London in January.

#### **Laura Frontiero**

There you go. So do what you can. I live in San Diego. We have sun for 300 days of the year. We pay the sunshine tax here for sure. But do some of these things. You can do so much. And then start looking at your food and stop eating and drinking your toxins. Definitely eat organic. Definitely don't eat things with big ingredient lists.

As far as water goes, purify your water. I could have a whole talk about water purification, and I'm going to say something that people will be like, "What? How am I going to get my minerals?" You can take minerals on the side. You're not going to hurt yourself by drinking distilled water, but it does get the radioactive elements and the heavy metals and the pesticides and the herbicides, all the crap out of your water. You get most of your minerals from produce anyway. Your body absorbs minerals from produce, so eat more vegetables, organic ones.

These are all free things you can do to start opening that drainage pathway and getting yourself feeling better.

# **Alex Howard**

The thing that comes to my mind is that, often when people go and see practitioners, what they're looking for is the really complex, nuanced protocol, which may have a place, but people often don't want to do fundamentals. And often those fundamentals... They're called the fundamentals for a reason.

# **Laura Frontiero**

It's so funny you said that because I just talked to a person two weeks ago, who came up to me. She's like, "Well, I have this condition and I want to do this, this protocol. Do you use that protocol? Do you know that?" I said, "Yeah, and we don't do that because we're doing root cause solutions here. And if we solve these things, you might not even need that protocol." If that's how people come at me and say, "Well, I want you to do this big complex..." That's not what we play over here.

# [00:38:19]

We do really basic stuff and people feel better. I'm not going to do the complex protocols. It's hard. People don't stick with it. Oftentimes it's just a distraction from what's really going on.

I'll say this, I'm going to say something else crazy. Sometimes practitioners never want to let you go. If you get healed and you get better and you don't need them anymore, you're no longer an income stream for them. I'm just going to say it, there are people out there who are like, "We'll do this protocol, and this protocol, and this protocol, and this complex thing." And you're just going and going and going and you're wondering, does this ever end?

#### Alex Howard

I think also what can happen is there's practitioners that, with the best of intentions, are just throwing mud at the wall and seeing what sticks. I think practitioners should be able to stand behind their clinical choices, and it doesn't mean they always get it right, but there should be a sense of real clear progression that's happening there.

Laura, we're out of time. We could keep going for many hours. For people that want to find out more about you and your work, where's the best place to go and what can people find?

### **Laura Frontiero**

Yeah, just go to <u>www.LauraFrontiero.com</u>. I'm also on Instagram <u>@LauraFrontiero</u>. My last name is spelled like the Great Frontier with an 'O' on the end, so make sure you put that "I" in there.

### **Alex Howard**

You've had a few people misspell it over the years, I reckon.

# **Laura Frontiero**

Oh, yeah. I went from a really hard to spell and pronounce French name to an Italian name when I got married. And both of them are very hard to spell.

# **Alex Howard**

Amazing, Laura, thank you so much for your time. I really appreciate it.