



Reverse Autoimmune Disease Summit

Dr. Keesha Ewers Interviews Erin Elizabeth

Dr. Keesha: Welcome back to the Reverse Autoimmune Disease Summit. I'm Dr. Keesha Ewers and I'm so excited to introduce you to Erin Elizabeth, who is a longtime health nut, author and public speaker, and she's had a passion for the healing arts for nearly 25 years. Erin began HealthNet News in January of 2014 with humble beginnings. She's honored to have just won the Truth and Journalism Award at 2017 Doctors Who Rock Awards in Orlando alongside some of her heroes less than four years later. She's been featured in many documentaries from truth about cancer to fasting. And is the author of *In the Lymelight, My Healing Journey*, which tells her success with healing Lyme disease naturally. Erin divides her time between Florida and her birthplace of Chicago with her better half, Dr. Joseph Mercola. Welcome to the Summit.

Erin: Thank you Dr. Keesha. It's an honor to be here. Thanks for having me.

Dr. Keesha: Your story is so wonderful. We were talking off air a little bit about an event that we were just both at and you and Joe were both there and he was saying from stage about how proud he is of you. That he keeps everything separate and you've done it all by yourself. I just thought, Oh, good for you. It's just so wonderful to see a woman that has really taken an empowered stance with her own health and then gone and started helping thousands of others do the same. And that's why I invited you on the Summit because we're talking about reversing autoimmune disease, which means by definition that you have to take an empowered stance.

Erin: Definitely. 100%. No, thank you. I never know what he's going to say up there. So that was a surprise and delight. It was great to get to meet you in person and I wish we, I know we both were saying how busy it gets at those things, but I'm glad to get to talk with you more here today and yeah, that is so true. I think that Joe and other doctors like yourself have kind of taught me about taking control of our own health. And I feel that's kind of what I had to do in order to overcome so many health challenges. It's so true, especially with autoimmune challenges as I'd been diagnosed with Sjogren's syndrome and some of those aren't always, I mean, Sjogren's syndrome is an autoimmune disorder, then of course Lyme really isn't.

Erin: There's so many things that go along with it. So often our secondary infections or autoimmune issues that I have dealt with over the years. And I think there are just now we see such a rise. If I were to go into the, when you hear different statistics with the numbers of maybe what 5% of maybe 50 years ago or even 30 years ago, dealt with autoimmune challenges as opposed to like nearly 40%, even hear numbers as high as 50%, especially with women and even children now. That it's become like an epidemic. I

love being able to share with my audience or other big audiences like yours about some of that information. And I can definitely tell a little bit about my story because initially--

Dr. Keesha: I wanted to start to have you tell your story. And I also want to point out before you start that it takes anywhere from 10 to 30 years to develop a full-blown autoimmune disease. So even the people that are listening that aren't in the 40% category, a lot of the people that I'm speaking to have something brewing, like fatigue and cognitive brain fog, and my hair is falling out, and I can't sleep well; all these things, different weird pains. You must know that oftentimes we're working on an autoimmune disease when it takes a couple of decades to blossom fully and that you can actually head that car to go the other direction with it. Let's start with your story because I really want to hear this.

Erin: I was adopted and had a very rough start with a very rough pregnancy with my birth mother and was hospitalized at for several months too sick to be adopted after I was born. And they believed that I was a double-vaccinated is what we've kind of come to that conclusion. It was January, born in Chicago, very cold weather. I had a bad cold and my mom, a first time mother and dad just adopted me, never been parents before. Took me in. And even though I had a severe cold, the pediatrician who was near retirement at the time said, yeah, and probably really in his career had just not given that many vaccines, but said it's fine even though she's sick to get a vaccine. So, he did the DPT, now known as the dTAP, and I did develop encephalitis under it and fevers, c Febrile seizures, and then pretty much full on seizures, vomiting.

Erin: I was hospitalized. I did a spinal tap thinking that it was spinal meningitis, when in fact, initially they thought that, so spinal tap didn't help, but it was encephalitis. And even after that they said it was a fluke. And my parents now they understand, and my mom especially, but she at the time just thought it was a fluke. And, who knows? But I think now knowing I found two out two years ago, I have what's called Ehlers Danlos Syndrome. So, you probably are familiar with that. I'm a very hyper mobile, lanky, tall, kind of long, lanky, and always have been. Didn't know until two years ago and I was diagnosed, being adopted; to call my birth mother, my doctor, when I was diagnosed, he said, call your birth family. I called her side, she's a doctor, and she said, no, it's got to be his, his fault.

Erin: That's your birth father's side. So, the first relative I called an immediate family member. My brothers, I don't know my birth father so well. I was diagnosed with it. I thought you knew, but we didn't grow up together. So I it did, I do indeed. You know, was diagnosed a couple of years ago with EDS or Ehlers Danlos syndrome, which a collagen connectivity disorder. So, I have issues with the with the collagen or lack thereof. I get that stretchy skin, which I hope that I can change the gene expression because I feel like whether it's hormonal in that time in my life or for many years, I don't feel like it was a as much of an issue. But now it's become more so of one. I dealt with several health challenges, but along the way in eighth grade I had so after I was adopted, they kept vaccinating.

Erin: We went on an eighth-grade graduation camping trip, and I'd had a tick on the back of my legs. I mean, you're in eighth grade, you go for the weekend, you're intense. You

don't really shower until you go home after the weekend. The kids don't care. We didn't mind. But I remember changing and we're wearing long pants to try to avoid those ticks. And in a very deep forest kind of area. And so I had the bullseye rash and everything, but back then they knew so little about it and I began getting really bad joint pain. But because I was tall, my parents did take me to an orthopedist then at about 13, 14 that summer and they said in in the Fall. And they said, you're probably just growing so fast. You're so tall.

Erin: It's just growing pains. That continued and I just dealt with this pain for years. Around 2000, after six or so hurricanes, there were a number of hurricanes here and more stress and it got really bad. So, they did test me and they did the cheap ELISA test for the Lyme disease, like a \$50 standard test done by your more conventional medical doctors. And I had just moved because a hurricane crunched a tree, then crunched my house that I was luckily renting, I didn't own; so I had to move, forced to move. It was a new doctor and she just wrote it off as she said, stress, which I'm sure that stress played a part, but insurance then immediately said, we're not covering any of those bills because stress isn't covered.

Erin: So, I just went around thinking, well, I didn't have Lyme until about 2012 when then social media is coming around. I hadn't started my site yet. And a doctor I know saw me posting about having visual snow and I knew him through Joe. And so he said, you know, have you ever been tested for Lyme? And I admittedly was a bit naive on that. I said, Oh yeah, I've already had the Lyme test. I had the ELISA test, I'm good. He said, well, you really need to have the Western Blot test either through California's iGenics(?) or the company in Germany. So I went through the company in California and I had a positive western blot. So it turned out that I did indeed, it was kind of indisputable. I think I had a positive IgG and IgM, so showing that I'd had recent exposure, but past exposure I didn't. Looking back, I know some people think if you had recent exposure, if I've been re-exposed that I should take antibiotics, but I didn't.

Erin: I did more of the herbal formulas under the care of Dr Dietrich Klinghardt and Lee Cowden, two Lyme doctors that I'm very fortunate to have to have had access to. And even if you have the best resources, I think as anybody will admit, can be very challenging. I also at that same time I had years ago had one surgery after having had saline implants and already with being so sensitive that was you know, we all make mistakes; that for me, some people do great with them. And more power to them. For me, I immediately, I became very sensitive. For me was having so many autoimmune challenges that just really immediately I experienced issues after getting, even though I got the salines that I was doing it right, I had, so I experienced that, dealt with it for a number of years, finally got those out and then begin kind of the healing journey after getting the implants out.

Erin: I had gone to a surgeon in Atlanta who specialized in it, said that one was leaky, leaky valves, had mold toxicity instead of living inside mold, mold was living inside me. So, we did a protocol for that and then I began; the protocol was a more natural protocol for Lyme. And it was difficult because I remember back in that 2006 doctor's office just after

really losing my home to a hurricane in the newspaper with the roof collapsed in on me, I actually went to neurologist too and both of them being so condescending and rude and the neurologist who was experienced and had a number of years under his belt, said just rolled his eyes and said, obviously this is just stress and wanting to put me on Xanax three times a day.

Erin: I don't know, don't take Xanax. I don't know the prescription, the dosage very well, but it was a really strong amount three times a day. And he goes, look, obviously it's all in your head. You need to take these drugs and really get your, maybe go to a shrink. You obviously are in here and you think you have Lyme disease or you think you have this. And it sounds like more you need a psychiatrist. I was calm. Until that point, I mean, I just came in and explained what my issues were, and he goes, chronic Lyme doesn't exist, but what does exist are psychiatric problems. And I was with him five minutes. How he determined this in five minutes that I've psychiatric issues having had none in my entire past was extremely condescending and this was a real rude neurologist that said that and just it was horrifying, but I knew that filling that Xanax was not the thing to do, that getting on Xanax three times a day, morning, noon and night on a high dosage no less than on a Benzo was, was probably not the way to go.

Erin: So it's very sad. I will say that the woman, the family physician, was as condescending. So I don't know, we're talking about finding a good doctor. It could be a woman who was extremely understanding or a man; don't want to stereotype because I've had both be very kind and understanding and both be not so kind. But I think the most important thing is if for somebody out there, of course we have to fight with our insurance companies and see who will, I mean I understand that people often go outside their coverage because they can't afford it. But if they can just find even a family physician or a primary care doctor who really will take the time and in listen and be in their corner and just that they will not be condescending and in five minutes,

Erin: Yeah. Chronic Lyme doesn't exist. You obviously have a mental disorder. I wonder if that was 2006 if all these years later, we're almost to 2020, if he's not retired, if he still feels that way. Because now, since then, as a journalist, I've written about Lyme. This is conservative, liberal news, whatever that Lyme is 10 times more prevalent than previously thought; that's Lyme, chronic Lyme. I'd only had the ELISA test yet, but I think a \$50 test really isn't an accurate diagnosis. So if even people can under their current, if they have insurance which I know not everybody has either, but no matter what the case, if they can find a doctor that just has patience and will listen to them and be kind, that's such a great start because it can be difficult to find that.

Erin: And nowadays, and maybe word of mouth, we're in a small town here in the east coast of Florida and it's kind of slim pickings and we have a large elderly population, so it can be hard to get into; there are few that people really like. I'm very fortunate, I have a couple doctors already that I know; or Joe, if needed in an emergency though, he always says that he doesn't want to treat his loved ones, which I get, but he will in an emergency. I have just found that, even word of mouth, wherever someone might live and finding someone who is kind and understanding and open to listening to them. And

I was lucky with that because it was my primary care doctor who I finally found who happens to be a man, so no stereotyping, but that he took the time to listen and I said, you know, I'm having these skin changes where my skin was taut and now it's rubbery.

Erin: And he listened and I said, and this was before I knew my birth family had it, and he said, I'm going to send you to an Ehlers EDS specialist, because I think, you know what, Erin, and I don't know him that well. I've used just primary care. I go in once a year, but this is a sudden change. He goes, I think you're onto something. And he listened. And that's just half the battle. Sometimes it's just finding a doctor that's going to just take the time and sit down with you. And so he did. In some ways I know like Dietrich Klinghardt will say if you are diagnosed and you have 10 times more likely to then to develop the issues of whatever you're diagnosed with. But on the other hand, I think that so many people now, for me, I like to solve mysteries in life as a writer, as a lot of things in life.

Erin: Me finding my birth parents, I want to know the answers. And for me, I'd rather get the answers and then say, okay, let's take this head on and let's figure out a solution. And I think there are other people out there as well that really want to know what their challenge is; this is half their life. Or like you said, it could take so many years for an autoimmune, full-blown autoimmune challenge to develop. But if they have one or there or before it's maybe full-blown, they want answers so they can then combat that whether it's integrative, whether whatever modalities they use natural, holistic, integrative or maybe some conventional methods, but at least that they know what they're dealing with. And for me, I like to know what I'm dealing with; which is easier.

Erin: It's not easy even with all the resources I have, I'm always very honest with my audience. That hey, with stressed, hurricanes, rebuilding or whatever it is that there's always a few, I can take a few steps backwards, but that we're all human. I went to Lee Cowden's clinic, he was practicing at the time in Dallas and I remember I had kind of overcome the Lyme and wrote the book and I said, yeah, it's so great. I was just doing a kind of a doing a last treatment there and I said, I'm so glad I can't wait to get back to just doing ever. And then I'm still naive at this point. This was several years.

Erin: I said, I can't wait back to getting everything normal, eating what I want and blah, blah, blah. And just a woman who worked at the clinic who had had Lyme, chronic Lyme herself and diagnosed through a positive blood test, said, you know, Erin, and I was quickly humbled because she said, you might need lifelong maintenance. I'm not saying that you can't have a good, normal life, but to just think that you're going to finish these treatments and go back or eat what you want and not do any supplementation and just like everything's all solved is maybe that for most of us, maybe you'll have the experience, but a lot of us here don't. And she worked there, and I know, okay, she's working and seen a lot of patients. So, I realized, you know, Doc, that she was right and for some that they can, you hear people that say about Lyme, I beat it, I'm better 100% and now I'm back to normal and everything.

Erin: But I think with now the world we live in, especially with the States or most countries, we're exposed to toxins, whether it be in our food, air, water supply; water, whatever it is that I will now do a yearly detox. Whether it's at home or if I go somewhere; and I realized how important that is since I really think I've probably had lifelong autoimmune issues. Now that I look back and I think there's a different kind of, my mom who raised me, who I love very much, she's just like, what is it with all you young people with all these health challenges? I've never been sick in my life. And her parents lived to 90 and 99, but she's understanding as her own younger family members and her siblings kids and she has eight, eight of them.

Erin: So I'm not calling anybody out, but there's eight siblings and their children or even her great nieces and nephews or grandchild have health challenges that she says, wow, this is really, it's not like when I grew up and I said, no, mom, it's, whether it be the food supply, vaccines, whatever it may be, that things have changed. And I think she's more understanding now to that in a bit more compassionate and with that having encephalitis from a vaccine, which was on record that can maybe cause some health challenges. Encephalitis is never a good thing. It's interesting that we see our parents, that my mom was in her late seventies who I have had more health challenges and now it's my adoptive mom, not my biological, but even some of my biological relatives have had fewer health challenges who may be a generation older.

Erin: And then we see the people younger than us. I know people who I work with that are 20, 25 and under 30, and they're already having psoriasis and RA rheumatoid arthritis, and they're not even 30 years old, or trouble conceiving. I think it's an epidemic that we must deal with. And I think as far as finding compassionate doctors, it's word of mouth or I think especially as women, it's tough because whether it's a man or woman, sometimes I think that is the doctor that may treat us, that we can be judged differently, but whether it's word of mouth I now have learned there is: I hear, so people who get better, I asked, what do you do? I just spent some time in Mexico evacuated where I had gone to a clinic, an integrative hospital there. And one woman said, you know, I've been to 20 something doctors. I went until I found the answers. This doctor they shut the door on me or didn't listen. And I said, you know what, I'm going to go to the next one. I'll have one visit, I'll go to the next one until I find something or someone that works for me. And that can be a way to do it. It can take time, but I think that if it's for health and livelihood, we're talking about.

Dr. Keesha: Chronic Lyme is now considered autoimmune. It's been classified if it's in the chronic state. And I've been tested Lyme positive too and had rheumatoid arthritis and reversed it. So, it's an interesting journey. The woman telling you at the clinic: eating normally may not, you know, and I always say there are four corners of an autoimmune puzzle that must be dealt with at the same time. We're all unique and we must deal with our genetics, our toxin exposure, and our body's willingness to get rid of those toxins; and our stress and past trauma and all four of those interrelate with one another. And so when you think about it that way, you have to think, okay, I've got the gene in there that somehow got regulated.

Dr. Keesha: And so, I can always, my grandfather had RA, so I always tell people I don't drink, I don't have caffeine, I don't touch sugar. I have all these things because I know that they help upregulate this gene that I'm never getting rid of, but it doesn't have to express itself. It's been 24 or since I had autoimmunity, but it's because I'm really in a collaborative relationship with my body now. I check in, how does that feel? Oh, not great. Okay. Instead of why I can't have it; so-and-so can and feeling like you're in a deprivation space. It's, gosh, I feel fantastic. So let's learn the formula. And that will also shift, right? As you age and things happen, but making sure you're just staying in a good collaborative relationship with your body. And that's actually what we're talking about is also with your medical care, right? That you're in a collaborative relationship and partnered with somebody that is on your side for healing all four corners of that puzzle for you and with you.

Erin: You taught me something, because I always say I'm a journalist, not a scientist, and I'm a patient, not a doctor. And it's interesting because chronic Lyme, you'll hear differing opinions where somebody had said, oh, there's Lyme but then there's autoimmune is different. But really, I have chronic Lyme that you would know is classified as an autoimmune disorder so it just falls under another autoimmune thing. But that's so true. What why is words that you've spoken? And I think that's so true. And another thing I learned just from being evacuated here for a while, because I got back last week and so hadn't been home since I met you and August and in San Diego. So, it had gone over 30 days because the storm took forever to come through.

Erin: We were very blessed compared to the Bahamas and other places that were really devastated. I think that I learned as well going to a couple of different clinics in Mexico, just covering them as a journalist and they took me in, but I then got to do the program and I'm very, very fortunate. But I learned that, like you said, the key thing you stated there, which is such a huge part of it is dealing with that past trauma or dealing with it now. It's not like the neurologist told me in five minutes it's not chronic Lyme, it's in your head, go to a shrink and take Xanax three times a day. No, but to deal with hopefully holistically, like you said, that past trauma; this particular place had all sorts of different, and they even had a psychologist, but they had therapists there that did all different kinds of natural modalities of dealing with that past trauma and dealing with all the emotional components, which affects us physically.

Erin: And I think having done a number of programs in the US as well over the years, that I think that is so, so key. And it's great to see even conventional hospitals like in the US that are just your straight forward conventional at least that they're finally starting to realize for people who are, whether it's autoimmune or cancer or whatever challenge, they may have some life threatening, but they are then bringing in at least some emotional components to help them heal.

Dr. Keesha: Doing mindfulness, meditation. There are a lot of different great programs now, even in corporations for those things, which is phenomenal. Meditation and mindfulness are great because it gets where you're apt to calm down. But then the trauma piece in getting down to that root of what stirs you up in the first place. I always talk about the

difference, you know, neuroception and perception of your life actually is what activates, right? The biochemistry that instigates the entire cascade. I always say 25% of healing can be supplements. 25% food, and 50% is what's going on here with your neuroception, your perception of yourself and perception of yourself in that environment. It's everything. Two people can experience a hurricane in two different ways, right?

Erin: I should have learned long ago when I lived in southern California, there was more of a holistic, he did body work, but this was a wise man who has since passed on. He's probably 80 and still doing body work on a lot of people, but he was kind of a like a philosopher and he said, look, you can, and it's sometimes you must hear these things again. I do anyway to be reminded of them, but he says, you can have a rainy day or be caught in a rainstorm and you can just, and that's my day is ruined or my hair's ruined or my, everything. My clothes are ruined for the day. You sit or you can be Gene Kelly and be singing in the rain and it's your choice because there's always going to be the rainstorms.

Erin: But how you're going to just like you said, how you're going to then deal with it like a hurricane. I have made changes even since I've come back because I admittedly, I think we all, I can get caught up in that a rat race and the other things, I had a couple injuries because of having Ehlers Danlos I had a little broken door crunch and break my foot. And that literally took me a few steps backwards. I realized; you know what? I didn't, and now I really understand, even 20, 30 years ago, people would say, well, I had a car accident five years ago and I didn't get it. Like I thought, well, they're walking and all right, that it was five years ago, but I didn't understand what that chronic pain can do.

Erin: So, I unfortunately decided just to put everything into work and not take breaks. And just be on a computer 24/7 and ignore my body where I've come back now, I'm like, alright, we got to do physical therapy. We got to get this foot better. I don't want to do surgery., I think so many times some of the worst things people may do is just to ignore their body and not deal with it. That's where that emotional component comes in to, for me, I do better within, okay, taking it head on, let's get back and physical therapy, strengthen the body, work on overcoming those injuries., I think I'm the one who's like, it still hurts. It may not be 100%, but like I was talking with a physical therapist and even this orthopedic surgeon who doesn't want to do surgery, but they said, you know what, even if you can get 80%, 90% better, that's still huge.

Erin: Everything doesn't have to be hundred percent, but that's 80%. So people who have injuries out there, that's another thing that I've seen that this cascade or domino effect, be it an injury or it could be an autoimmune issue where so often in our today's society we just are taught to ignore, ignore it, and just push on; no pain, no gain. Just take that Ibuprofen, take those. And I think that there is a prior generation before us that that's just how it was. And there's just this different mentality. But it's okay, I think to acknowledge it, to work on it, to help ourselves to better ourselves. And I'm glad that, like you talked about the like the mindful meditation too is so essential.

Erin: So, I am the first to admit that I can fall off the bandwagon, but then I'm not being true to my authentic self or practicing what I'm preaching. And so, what good am I if I'm writing articles about health or speaking on health and I'm not being my true, authentic self. Now I'm back on track and realize that even despite the crazy world, not just me, but we all live in where it just seems to never end, that I kind of take forced breaks now. And it used to be like my people's New Year's resolutions, I'm going to work harder, but my friend said, oh, my new year's resolution is I'm going to get a massage at least once a month or get body work, or I'm going to go to a meditation class, or I'm going to go whatever their thing is, maybe once a week would even be better.

Erin: But that they take that time to do that. And it's funny that's the society that we live in now where we have to make resolutions to do so. But otherwise I think and that we're, we're as you know, I mean I'm just preaching the choir, but we're constantly connected. We're wired all the time. I always joke you get wired and tired to our phones. We don't get a break like back in the day where none of us had a cell phone and it was just you go in your car and you have some peace and a drive and listen to music and there's no nobody calling. No one has a cell phone. And we do live in a different society now. But I think if we set boundaries, that works.

Dr. Keesha: That's a huge thing for reversing autoimmune disease actually. And there's another interesting component to it that. I do understand a lot of people have heard of the Vagus nerve, right? There's a lot of information out there about Vagal nerve stimulation now and polyvagal therapy or theory. The parasympathetic and sympathetic nervous system, right? We know fight or flight is bad and rest and digest is good, but actually the way we do things, it's like, oh, so everybody needs to be parasympathetic, but that's not accurate. And the Vagus Nerve stimulations, also Vagus of course, as you know, means wandering in Latin, right? So it goes from the brain all the way down and you can actually have it activated in the Dorsal area, which is between the belly button and down below.

Dr. Keesha: It's actually causes you to feel depressed and like you're isolated and don't belong and, and just kind of like gloomy, and that's too much parasympathetic. And then you can have ventral, which is going to be in the chest area, and you'll feel happiness and connected. It's very fascinating to me is I hear people saying, Oh, I need to get a Vegas nerve stimulator. I'm like, well, you can also stimulate it down in the Dorsal area, which you're going to. And you can actually, if you take those forced moments in your day and say, okay, well I'm making a resolution that for 10 minutes out of every hour, or maybe even every four hours or every eight hours, I'm going to activate my neocortex in my brain, which is going to help me get into the ventral area. And the ways that you do that is to have gratitude, right? Mindfulness, breathwork, these are the most amazing things that you can do. Just sitting there for 10 minutes that will move that up to here where you can feel lighter and happier and more connected. It's kind of fascinating how we tend to, if a little bit's good, a lot must be better in our culture.

Erin: I think that's easy. I'm not sure if that's how our bodies are, or just that we're all, you know, connected. We talked to more people maybe through the Internet, but so often

it's not maybe those in-person I think, so fewer in-person interactions like before the time of the internet or things like that. So that's great advice. I like that. I'm going to think implement that. I'm making mental notes here. I'm going to re-watch the video because I'm learning right now. I think that's important. And they were talking about, they tested in Mexico. I forget, I think I was more sympathetic than parasympathetic, but they did a special test on me with that.

Erin: It puts something on my finger and then that, this whole test. I know my aunt who was an RN and more was raised more conventionally, but she's getting more into the holistic side of things. And she was talking about with the Vagas nerve and that she is exactly what you were talking about. So maybe she follows your work. I'm not sure. But she's almost 80 years old and looks amazing. Goes to yoga seven days a week. And I'm hoping she'd take my mom along with her and not starting to wear off on her, but it's yeah. So she's, it's great to see people like that and usually because they're aware and she went outside of her conventional raised with that you know, in that conventional setting and working in hospitals and now is retired. But in Chicago, and I think she's okay with this. I'm saying this, but now that she's kind of expanded her awareness and it's, yeah, it's great to see him probably why she's healthy and you know, 80 years old

Dr. Keesha: Undoubtedly. Well I so appreciate you, your story is so compelling and what you're doing to talk about HealthNet News because your social media presence is bar none. So I would like for you to introduce that to our audience.

Erin: Sure. I'm learning that if there's a story, it doesn't have to maybe be out 20 minutes later. Like I used to be. It's okay if maybe it's the next morning, but we do a lot of breaking news on HealthNet News and have a newsletter on there as well with getting out the breaking stories. But not only that, we'll also share information on, I mean, there may be breaking stories on something that's happening in natural health, but also on new studies that may help people. Of course, there's always you know, controversy with what's the perfect diet. But we're talking about whether it be food or natural health news or whether it be some of the things happening with the pharmaceutical companies like Purdue, just filing for bankruptcy with the opioid crisis.

Erin: So it may just be information. As far as stories that are breaking are also different studies that may be people will have found very helpful with their own maybe health challenge. This is that working to overcome and they, they learn from those. So we do pretty much seven days a week breaking stories on there and have a following who like finding that information out sometimes before they'll see it in the more mainstream news. So yeah, we worked, we strive to kind of get that out there first and get it out to our audience. And so it's always a good thing and to be able to help keep people informed on maybe things they're also not going to see so much on mainstream news as well. I have the book online they can get download on the site. It's no charge. I've never charged for it. And we have a pretty good newsletter update list that gets out those breaking stories to keep people informed.

Dr. Keesha: Well, I so appreciate the work you're doing in the world. It is so needed. And I know like Google has throttled; natural isn't being listed high up in the search rankings. And so I'm, I'm appreciate that, you know, you're figuring out ways to get that information out for people. I don't know if people are aware of that, that actually Google in concert now with the pharmaceutical industry. And so natural medicine

Erin: has gotten throttled. We barely can show up on Google or it's just some like, you know these, you know, the quack sites or something that does call out all the natural health sites or holistic doctor that some of the holistic doctors in then Pinterest deleted my page along with some other big, that was one of our, I think it's second or third source of traffic that I've really built Pinterest up. And even on social media, on all those Facebook and all that, if you search for us, we don't show up. But hopefully if someone has a friend that likes it, it'll pop up. But instead, you'll you know, you'll just see links to the CDC or the World Health Organization. It's sad that we've been pretty much censored. But we're still, we're still fighting to keep getting the word out there and despite that censorship. And we thank you for all you do too. I really do appreciate that. It's great that we have doctors out there like you telling the truth and I appreciate all that you do. I want to say that too.

Dr. Keesha: Oh, well thanks. Thank you. So you guys look up HealthNet News and then you can stay connected and we'll have her information here with the recorded talk too. All right. Thank you Erin so much.