

Level 2 Meeting March 22, 2022 Transcript

Dr. Roark:

Okay. All right. Thank you. Thanks, Karen, or whatever your name is. She needs a name. Like Siri has a name, Alexa has a name. I feel like the Zoom lady needs a name. Maybe that starts with Z.

Dr. Roark:

Okay. Hi, everyone. Welcome to ... What call is this? I don't even know. Oh my gosh, you guys, this week has been so crazy already. Zsa-Zsa. Thanks, Zsa-Zsa.

Dr. Roark:

So this week has been crazy. Oh my goodness. I am in California. Obviously, hotel room behind me. It's not a zoom filter. It's the actual room I'm staying in. And I actually got to meet Steph, and she brought two of her birds to visit me. So I got to meet Gumdrop for the first time, and she brought Luna, one of her owls, who was very sweet. And I learn so much about birds from her every single time we talk. It was very fun. Anyway, so she's not going to be on because, apparently, she does not live right next to where I'm staying. It's an hour and a half away. So that was very nice of her to drive all that way to come see me.

Dr. Roark:

So I like visiting with you guys. It makes me so happy. So if I'm in your area, and you find out about it, definitely reach out to me and make it so that we meet. And I want to meet your animals in person, too. So Gumdrop got mad at us a couple of times because we stopped talking about him for two seconds, and so then he had to do his little kookaburra laugh. But it's been crazy.

Dr. Roark:

So just quick story, has nothing to do with animals, but a lot to do with why I'm so thankful for my oils. I was supposed to come to California last night. We were supposed to arrive last night, I had a hotel room, the whole nine yards. Well, we got on our plane, my friend who came with me and me, and we were trying to hurry. Everyone was trying to hurry because we were supposed to get some bad weather in Austin. I don't know if you guys saw the news, but there was tornadoes, and it was crazy. There was hail. And so we were trying to get out of there before all that hit.

Dr. Roark:

Well, someone on the plane lost their mind. A dude was being really weird in the waiting area. Just yelling, talking to someone on the phone, and yelling at them. And it sounded like they were kids, and it was just really disturbing. And then we got on the plane, and his bag was too big for the overhead, because it was just a little short flight to Houston, and then I was going to fly Houston to California. And so it wouldn't fit. And so the stewardess lady got the bag out of the overhead and was like, "Hey, whose bag is this? We have to check it. It's too big." And he started screaming at her. Like screaming, yelling, and then everyone was trying to calm him down, and he just started yelling more, screaming. I was at the front of the plane, and I could hear every word he was saying, and he was just being crazy. I don't know if he was on drugs or what, but he was like a normal looking dude. He was clean cut and had pomade in his hair, and clean shaven.

Dr. Roark:

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And so they had to call security. Security, finally, after 20 minutes got him off the plane. They had to call the police. The police had to come and take statements. He started spitting on people. It was insane. I've never experienced this in my life, and I fly a lot. And so of course we didn't get to take off a little early, try to beat the storms, so by the time everybody gave their police statements and stuff, almost at the exact same time, you guys, everybody's phones went off. Tornado warning, a tornado touchdown. We all had to get off the plane with our luggage and reverse all of that. And then we were stuck in the terminal. And so we're waiting. I'm like, okay, I'm timing it because I've got a connection to make to get to California.

Dr. Roark:

And so too much time has gone by, so I wasn't going to make my connection. So I go up, get it, and I'm putting on Forgive, all my grounding oils, like Balance, Serenity. Oh my gosh. So many oils. I'm like that guy needed some sedating oils. Does anybody have any vetiver? Just throw it at him. It was crazy.

Dr. Roark:

So we got to the front desk lady, and she re-booked us. So she's like, "Okay. So instead going through to Houston, you're going to go through San Francisco. So San Francisco to LAX, which is not the airport I was going to fly into, but close enough. A little more expensive Uber ride, but whatever. I just wanted to get here. And so we go over there. Well, the plane coming in to Austin to go to San Francisco was actually coming from Houston. Well, that's the way the storms were going, so they were grounded. So that one got delayed. And by now, it's 8:00 at night, and there's no flights going anywhere towards California.

Dr. Roark:

And so we go back up, and I was going to miss my flight into LAX, so I would've had to either stay the night in San Francisco and gotten a flight in the morning. So I just go up. I'm like, "Okay, let's see, what's the first thing you have in the morning?" So they had a flight leaving at 5:30 this morning. And so I was like, "Well, we'll just grab that one." So by the time I get home, because I live an hour away from the airport and all that stuff, my bag, my luggage, is actually on its way to LAX. And I have my husband drive all the way, pick me up, and stay the night at my house.

Dr. Roark:

Well, it's 11:00 at night. I have to get up at 3:00 in the morning to be able to make my early flight to come back. Anyway, I'm running on three hours of sleep, you guys. And I'm all confused because the time change just messed me up. And I'm like, "I've got to be able to do my call."

Dr. Roark:

So all that to say I still don't have my luggage because it's still in LA instead of where I'm at, which is in Anaheim. And so I don't know if they're going to bring it to me or what. I filled out the claim thing. And then when I get to the hotel, I stick my credit card in because they have to take your charges at the hotel. And so I stick my credit card in and my car credit card is declined. And I'm like, oh no, this is so embarrassing. How could that happen? I look at my thing. I'm like, well, no, I've got \$60,000 on that. It's a business credit card, guys, so like \$60,000 on there. And I'm not even anywhere close to spending that much. So I'm like, no, it must just be because I'm in California. Maybe it's a fraud alert or something like that.

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Dr. Roark:

So I call my bank, and they're like, "We don't have anything. You're good. We know you're in California. No problem. Go ahead." And I was like, okay. And then it turns out the credit card machine broke the second I got there. I don't know if it's like I broke it or I don't even know what's happening. So I do not know how this call is going to go, but I love you guys, and just use your oils. You're going to have to use some Forgive because of me teaching you today, I think. It's just going to be a hot mess.

Dr. Roark:

Okay. So you guys are so funny in the chat. Oh my gosh. Oh goodness gracious. Oh yes. And so on my personal page, I'll post the photo. I got a couple of photos with the birds. So I'm super excited.

Dr. Roark:

Tracy, yes, I'll come to South Africa. Heck yes. Let's do it. Let's figure it out. Well, I am actually here for a conference, and she just came to see me. So I don't know of any conferences in South Africa anytime soon, but I would love to go there. It's definitely on my list. I have other friends there, too, so I might be able to figure something out.

Dr. Roark:

Vanessa, "Did you start spraying the disruptive guy with oils? Aromatherapy superhero." I wanted to. I felt like somebody needed to mom talk to him, or you know how you have to talk a little sternly to animals sometimes, and just be like, "Listen, you're being a little silly." But nobody would do that. And then he's like, "I'm a victim, I'm a victim." People were videoing. I felt like, I don't know, stuff like that doesn't happen to me, guys. I live out in the country. So it was crazy. And I'm like, he wasn't some homeless dude that has mental health problems. I don't know, man.

Dr. Roark:

Oh, Victoria. I'm in Anaheim for ... Plus, I'm eating right now because my food schedule's all off. I'm in Anaheim at a conference.

Dr. Roark:

So good. I'm so glad I could entertain you guys. So I'm here. Oh my gosh. It's so embarrassing, when your credit card doesn't go through, you guys. It's like, oh my gosh, everyone's going to think I'm poor. Which I am kind of, but it's okay.

Dr. Roark:

Regina, "Come to New York." Okay. Maybe in the summer. I love New York. Actually fell in love with my husband in New York.

Regina:

But you have to say it this way. It's New York.

Dr. Roark:

New York. You have to say like that, New York.

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Regina:

There you go.

Dr. Roark:

I don't know if I can talk like that. That's crazy. You guys talk crazy over there.

Dr. Roark:

I don't even know my accent. My accent is this weird Michigan/Texas accent, and it's just like ... Hot mess. Okay. So glad I could be here, too, you guys. Yes. Adaptive spray bottle. "Nashville is the place to be, just saying." Christy, I love Nashville, and one of my best friends from undergrad actually lives in the Nashville area. So that is a true possibility. Might be a little more possible than South Africa right now.

Dr. Roark:

Plus, I'm not going anywhere where there's crazy COVID stuff still going on. "Throw oregano at him." Oh my goodness. I don't know. I was putting on my oils and I was praying a lot. That's what I was doing, and hoping he didn't hurt someone, which he didn't. Nobody got hurt. Thank goodness. He did hit one lady in the head with his bag when he was throwing it around, but she was OK. She was OK.

Dr. Roark:

Okay. "Come back to Michigan." I do go to Michigan all the time, Debra. Yes. "Texagander," yeah. That's exactly what I am. Victoria Sloan, "I have no accent. I'm from LA." Oh my gosh. Oh yes. It's not only embarrassing, but scary. Yeah. You're like, what happened? Did someone steal my identity? That's definitely a thing.

Dr. Roark:

Okay. Yeah. Okay. I'm not going anywhere cold when it's winter. So Michigan right now is not a pretty place to be. I know how Michigan is in March. And right now in Texas, blue bonnets are blooming, and it's 75 degrees. So not going anywhere in March or April. Now, talk to me in July, August, September when it's 100 degrees here every single day. I'll gladly go up north then during those months.

Dr. Roark:

OK. Let's answer some questions guys. So, Janice, I'll start with you, and then I'll try to figure out how to get to the page here with only one thing.

Janice:

Well, you're tough. You're tough so you made it.

Dr. Roark:

I did. I'm very tired.

Janice:

Oh, yeah. Well, we won't keep you too long. So I took in the cancer webinar. So touching, and I'm so sorry for all your losses. I'm going to cry because I can't imagine-

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Dr. Roark:

It made me cry.

Janice:

Oh, my gosh. I can't imagine. Everything you went through at such a young into your business stage. That was just incredible. So it helps us to understand more of the why and your passion, but it was a great webinar. Super, super great. And I'm just trying to pass the information onto everybody, and trying to get them on board to get in there so they can watch it. And can watch your cat. Mistakes, too. So, yeah.

Dr. Roark:

Okay. Awesome.

Janice:

Thank you. Thank you.

Dr. Roark:

Oh, you're welcome. Yeah, you guys invite everyone to the Seven Mistakes Cat Owners Make That Might Accidentally Be Hurting Their Animals. I hope all you registered for it as well. It's a very general overview, but it's good. It's all good talking points to talk to your cat owners about. So it'll be really good. And then, of course, you can opt in. I think most of you have probably already been through it, but, well, some of the new people, maybe not. The Seven Day Happy, Healthy Cat Challenge, which you can get it for 50% off if you register for the webinar and then do the cat challenge at the same time. That's the only time you can get it for that price. So if you guys want to do that one, definitely go through it. And I know some people go through it every single time, which is a little bit crazy, because it's the same information. But it's not always the same information because a lot of it depends on who's in it and what questions get asked, because it does change a little bit every time, depending on the dynamic of the group.

Dr. Roark:

So, yeah, definitely. Thanks for reminding me about that, Janice.

Dr. Roark:

Okay. So let me share my screen and let's do the posted questions before I forget about them again. That was so bad of me that one week. Okay. All right. Can you guys see my screen? Let me minimize the chat real quick here. Okay. Level two, questions. Yay. Okay, I have it right here. I'm going to have to minimize the little video thingy so I won't be able to see you guys. There we go. All right. Hopefully, you guys can see this. Oh, I can't see the chat or anything like that so it makes me nervous.

Dr. Roark:

Okay. Emma Hamilton has our first question. "Hi, Dr. Roark and colleagues. I have two cat questions for a couple of new cases that were recently presented to me. The first one is a physical issue. Adult male, approximately eight years old, showing signs of weakness in the back legs and the vet was unsure of diagnosis, but at this stage, it could be muscular. So the cat has been prescribed anti-inflammatories. He

has to be confined to the crate to prevent him from moving around too much, and the owner has mentioned he is more shut down than normal, so he thinks this could be affecting him emotionally, too.

Dr. Roark:

"I have suggested oils that will help support his muscular and nervous systems and also anti-inflammatory. Roman chamomile, lavender, copaiba, helichrysum, frankincense, cypress, vetiver, melissa, marjoram, clary sage, rose and cedarwood. The client has Young Living oils, so we'll choose from the list of what she has. I plan to do a face-to-face at some point when I can get out there. I advised her to do self selection to start with and we will go from there. From here, would you suggest topical with the oils chosen? I know cats tend to lick themselves and a couple of these are topical only. Any other thoughts for moving forward?"

Dr. Roark:

Okay. So let me see what you guys think on this one. Hold on, what do you guys think on this one? Okay. I don't know if you guys can see my chat. Usually, I have this on a different screen. What do you guys think on this one? Kathleen says, "Diffused for mental health as well. So spikenard is really good." Spikenard is excellent for healing in general, so I really like spikenard for cats. I think that's a really good one for this first case as well. I think the oils that you have chosen are excellent. Janice says, "Acupuncture." Yes, 100%. I love acupuncture. Or you can get your little laser out as well if you have a light laser.

Dr. Roark:

Now, she's not doing it in person right now, so she might not be able to do that. "Diffusing for the emotions." Yeah. "I love spikenard as well." Heather, I recommend Photizo. I have an Amazon affiliate link. It's posted in the membership group. So if you actually look up "laser" in the membership group, it should be in there. And I don't know if anyone wants to grab that link and then post it in there. Post it in the chat. That would be awesome. It's a great one, and it's very affordable. It's way way more affordable than a lot of the stuff that's that out there. And it's very, very effective. I really love it. I've been using it on Miles' nose for the hogweed injury that he has and it's healing up beautifully. It's just a little bit pink still, and he's black, he's got black skin, so his skin's not black yet, but it is going to heal really, really nicely. It healed up super quick. Now, it just looks like he has freckles.

Dr. Roark:

Okay. Lynn just says, "Diffuse bergamot and melissa." Regina saying, "Jing Tang Hindquarter Weakness." I don't know if she can get it over there, Regina, but, yeah, that is a good one as well, depending on the animal. The acupuncturist can recommend some internal herbs, but herbs are really, really hard to get into cats.

Dr. Roark:

Yes, Debbie, thank you. "So when my kitty had hind weakness, it was a lot of things, including kidney. Not sure if it was just my boy or a common thing, but juniper if kidney." Yeah. Well, in Eastern medicine, in Chinese medicine, the hind end is very much connected to the kidney, and so it would definitely be beneficial to support with juniper berry. I really like juniper berry with a lot of those oils that you mentioned, Emma, as well. And I think that's a great place to start is doing some self selection with those ones for sure.

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Dr. Roark:

Let's see. Christy, for the laser, it's basically just an additional tool that you can use. It's a light therapy basically. Red light therapy, and that particular one goes through several different frequencies, which is why I like it so much. And you can just use it. It's not hard to use. You just push the button, and it runs for a certain amount of time, and you hold it over the area of concern. And you can definitely order one and include it in some of your aromatherapy sessions. I tend to do that before I do the aromatherapy, but you can certainly do it after as well. I like to do it before, and then do my oils if I'm doing topical oils.

Dr. Roark:

Marjorie says, "Balance for all around." Yeah. Balance is another really good one. So I like Balance, frankincense, helichrysum, spikenard, and then, of course, melissa would be probably another good one.

Dr. Roark:

Debbie, "Young Living, we don't have Yarrow Pom, but just blue yarrow, I think it is. And they don't have Balance." Oh, that's a good call, Debbie. So, yeah, do not use blue yarrow with animals. Do not use that one. But you can definitely use the Valor. Valor is very similar to Balance, unless they've changed the formulation.

Dr. Roark:

Oh, thank you, Janice. There's the link to that laser, I think.

Dr. Roark:

Okay. The second case is ... Okay. Behavioral. "Female kitten, 16 weeks old, new to home. Was a stray found in a drain, and coming into a house with a dog, who's great with cats, and a number of other cats. The owner wants to smooth the transition to introduce the new kitten to the rest of the pack, rest of the family. And I have suggested black spruce, Roman chamomile, frankincense, lavender, cedarwood, patchouli, and copaiba to start with. For the other cats and the kitten, self selection, and then diffuse the choices well separated to start with. Would you self select with a kitten this young with this range, or just stick with the more gentle ones, like Roman chamomile and lavender? Any other thoughts for oils?"

Dr. Roark:

So I know I don't like to talk about the blends very much, but Balance is a really, really good one for these transitions. Frankincense is another really good one for transitions. So, yes. So you could definitely do self selection with a cat that old, and you can definitely just go from there, yeah. Melissa, vanilla, Steady, also really good options. Yeah. Steady is a really good one as well for kitties this small. That's a good one. I kind of always forget about that one, but it's a good one.

Dr. Roark:

Anybody else want to contribute other things that they would do for this little kitty? Patchouli, maybe coriander. But I like the ones that you chose, Emma. I think you're right on target with that.

Dr. Roark:

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"Thanks so much for your time and sorry for all the questions. I am very much missing the lives being... I stopped working from home. So, hopefully, I've covered everything." Okay. All right. That looks good. Okay.

Dr. Roark:

So the next one is Jamie Theriault. "Hi, Dr. Roark and friends, question about turmeric. Since it has anticoagulant properties, should we avoid giving this oil in pets with splenic nodules or any pets with clotting disorders?" Yeah, I tend to be a little more careful than we probably need to. So, yeah, I do. I personally do. I wouldn't worry about it with splenic nodules, but certainly with clotting disorders, I'm careful with it. Now, some people say it helps it, but we have other oils that are awesome that I wouldn't worry as much about.

Dr. Roark:

And then, "Two, I saw that Dr. Roark had recommended for dogs over 25 pounds to give the dual cap by the cap instead of the oil." So the deep blue ... Oh, oh, either one. Yeah, you can give either one. You can give either one. The dual capsule is a combination of the herb and the oil, and they work synergistically together to really get the best bio-availability and the best benefit to the animal or the person. And so you can absolutely do either one. If they only want one, then I would just do the oil, because you can do a lot more with the oil than with the capsules. You can do it topically.

Dr. Roark:

"Also, I was wondering if anyone has experienced a transitional period of loose stool with introducing copaiba. I realize this is not a common to experience this, but I have a sensitive guy. Maybe there's light at the end of the poop tunnel. I know that we use it to treat IBS diarrhea and other GI issues and inflammation in general. I started him on frankincense every other day for 14 doses. He did okay. Then once daily for 14 doses, did okay. And then when I introduced copaiba every other day, he got progressively mushier stools. He's already on probiotics, weekly vitamin B injections, and pumpkin, and pretty much lifelong metronidazole. He also gets Kill It blend on pretty much his full ventrum and axillary regions twice a day. Maybe this is too much oil for him. He's 80 pounds. I have fennel, marjoram, Digestzen, and chamomile. Not sure if I should stop it, wait it out, or start adding other things in the mix or not. He had a negative diarrhea PCR panel and normal resting cortisol levels, but he just turned 13, has splenic nodule and a thymoma that we know of. Appreciate any advice."

Dr. Roark:

All right. So does anybody want to try this one? Dr. Holtman says, "Possibly TerraZyme." So digestive enzymes can be helpful in these cases. Sometimes it makes them worse. So that's one I'd be careful with, but I would still try it. Yep. The Tamer blend would be another digestive blend that you can try in addition to those ones that you listed.

Dr. Roark:

What do you guys think about the copaiba in this case? What should she do? Heidi says, "Topical copaiba." Suzanne says, "Stop it." Kathleen says, "Topical." Regina says, "Cut back." Heather says, "I would back off a little," and all of you are 100% right. So I would definitely stop it. He's going to be sensitive. We do have some animals that are more sensitive to copaiba than others, and so if you want to reintroduce it internally, I would dilute it out in a carrier oil, and then just use one drop of the diluted copaiba if you wanted to try that every other day. I would personally just stop it.

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Dr. Roark:

Stick with frankincense. Frankincense is a great anti-inflammatory, and he does well on it. So let's stick with what he does well on. It's already on the Kill It blend, so you're already applying it topically. Is it too much for him? No, but the internal just might not agree with him with his sensitive tummy, so I would definitely cut back. It's not a super common response to that oil. Usually, you get the opposite. Usually, you get improved digestion, but every animal is different, as we know, and his chemistry is different, and he's just a little more sensitive to the copaiba.

Dr. Roark:

So, yeah, everybody's kind of in agreement with me on that. And so, Jamie, go ahead and stop the copaiba, and keep up with the frankincense. And I think what you're doing is plenty. I don't think you need to think about adding anything else if he's doing decently well on that protocol. If you do want to add something, doing a digestive enzyme, probiotic situation. Again, go slow, and see how he does.

Dr. Roark:

Yeah. Yeah. Audrey says, "Stop the oral copaiba. If the diarrhea stops, we know it's the copaiba. If it doesn't, then we need to re-look at maybe something else that's going on." That's a really good kind of way to think about it is just the puzzle pieces. You're putting them all together at this point.

Dr. Roark:

"Dr. Abby, would there be a difference with using the copaiba softgels?" Sometimes with some animals, there is a little bit of a difference. I would not risk it with this dog. I would not test it out. The copaiba softgels have more copaiba in them than just one drop. So I would not try the soft gels with this particular client.

Dr. Roark:

All right, Jamie, let us know how it goes.

Dr. Roark:

Jennifer, "I'm working with a dog that's undergoing shock wave therapy for chronic shoulder injury. The vets have been unable to determine through physical exams and x-rays exactly what the injury is, but feel it's most likely within the shoulder." That makes me nervous. Okay. "Since the shock wave creates the irritation of the joint to bring in inflammation for healing, should I use oils that are counter irritants, like the shock wave? Or should I stay away from those and only use the anti inflammatory oils? Which of the two would be more likely to enhance the healing process?"

Dr. Roark:

Ooh, this is kind of a hard question. I want to see what you guys think on this one. This is so good for you guys.

Dr. Roark:

Vanessa, "Do we limit how many different oils at a time we are using with an animal? Combined internal, topical, et cetera." Yeah. If you want to go slow in the case like with Jamie's dog, who is sensitive and is known to be sensitive, her approach of doing it, like, okay, let's try one oil, and then try

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another, and then add is a really good approach for those types of animals. But sometimes you do, and sometimes you don't.

Dr. Roark:

But, yeah, is there a total limit? Yeah, there's a different limit for every animal, and a lot of it is based on size. So I try to do as little as possible that still gets the therapeutic benefit. That's my approach to it is a very conservative approach. Now, if you've got cancer, that's a different story. I go all in on that, and I just want to have the best quality of life possible.

Dr. Roark:

Let's see. For the shoulder injury. Oh, yes, you guys are awesome. Okay. Suzanne says, "Turmeric and frankincense." Audrey says, "Acupuncture." Veronica says, "Marjoram." Jennifer says, "Perhaps an adaptogen in this case so the body can determine what it needs." That's really smart, Jennifer. I really like that. Suzanne says "Aroma Touch." Heidi says, "Frankincense, lavender, or Aroma Touch." Dr. Abby says, "Circulatory oils." Marjorie says, "Diluted lemongrass topically, Aroma Touch." Veronica says, "Asked a really good question. What did he self select?" That's really important. Don't forget about your self selection, guys. Linda, "Marjoram and Aroma Touch." Regina, "Turmeric, copaiba, frankincense internally, and possibly the deep blue polyphenols." Kathleen, "Siberian fur, lavender, marjoram, lemongrass." Jenae says "Also TerraZyme."

Dr. Roark:

So the adaptogen information, Suzanne, is in level one in week four. I think we talked about week four and week three. So definitely go check that out if you missed it.

Dr. Roark:

So with shockwave therapy, you are increasing inflammation on purpose. So it's like you're increasing inflammation to increase circulation, like what Dr. Abby says. So you can do it either way. I would do self selection. I, personally, think that, with shoulder injuries and shoulder pain, there's already inflammation and irritation, so I personally don't think shock wave therapy is really the best choice. That's my opinion. I don't like shock wave therapy as a general rule unless it's really for a specific thing that it's really been studied for because does cause a ton of inflammation.

Dr. Roark:

So I would definitely be helping these dogs try to decrease the inflammation as much as possible, so I would do your anti-inflammatory oils, like what a lot of these people are suggesting. And if you don't want to worry, you can always do your topical oils as well. So topical and internal. I would definitely be doing that. I would not do yarrow in this particular case.

Dr. Roark:

For chronic, it depends. It depends. I don't have the whole story with this one, Jennifer, so it's kind of hard. So I just don't know. I would try oils first before I would jump to shockwave therapy. A couple people recommended the laser and the acupuncture. I would definitely do acupuncture on this dog. Shoulders and acupuncture are a great combination. You really alleviate a lot of pain, but for this chronic shoulder injury, it kind of breaks up the tissue a little bit, but there's so many better ways to do that with physical therapy, water treadmills, the whole thing. There's so many other things you can do besides

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shockwave, which is just like let's create inflammation in an animal that has chronic inflammation. It's very counterintuitive to me. I know some people really like it. I'm not one of those people. But it's one of those things where I actually disagree with a lot of veterinarians on that.

Dr. Roark:

So, all right, Joanne has a question. "Our eight year old female cat, eight and a half pounds, had a fractured upper canine tooth removed this morning under anesthesia. Picking her up this afternoon. She's being sent home with medium strength pain medication to be given orally every 12 hours. Not sure for how long as I haven't pick her or the instructions up yet. My question is two-part. One, helping her wound heal, and, two, detoxing from the anesthetic. Since I've never given my cat oils internally, I'm checking if a 1% blend of copaiba, frankincense and myrrh orally via syringe would be appropriate. Is fractionated coconut oil the best carrier for ingestion? Would you add colloidal silver? Are there any concerns about interaction with the pain medication, and is there a protocol for detoxing? Thanks."

Dr. Roark:

Okay. What do you guys think about this one? Where did my chat go? There we go. Joanne says, "Myrrh." Regina says, "Juniper berry for detox." Yep. Heather says, "0.5 dilution of myrrh." Veronica says, "helichrysum." Evelyn says, "Myrrh, frankincense, and copaiba." "Myrrh 0.5 to the gums." Yeah. Jennifer, hemp is awesome. Hemp is awesome for shoulders, too.

Dr. Roark:

Jacqueline says they do shock wave in their practice and really wonderful results. I guess, in the right hands, it's probably pretty good. I don't know. I don't like the science behind it.

Dr. Roark:

Okay. So back to this kitty that just had tooth surgery. Zendocrine? I would not do Zendocrine with a kitty. I guess you could. Yeah, I like E Stim too. I like acupuncture, Dr. Abby, for those. Yeah. Myrrh would be great. It's definitely worth a shot. It's one of those things that it's a great combo approach. Shoulders take a long time to heal sometimes, too, so keep that in mind.

Dr. Roark:

Okay. So this kitty, you could definitely do the 0.5% dilution of copaiba, frankincense, and myrrh. You could do it orally, or you could do it topically. I would actually do topically if your kitty's still grooming, because she's going to get it internally that way. So that's definitely going to help her wound heal a little bit.

Dr. Roark:

And then for the detox, I like a combination of copaiba and juniper berry just topically over the spine. So you can roll it on your hands and just roll it on her spine, and that's going to be a really gentle detox. That is going to be really good. And then as far as ingestion, the best carrier oil would actually be olive oil. Fractionated coconut oil is not the best carrier oil for ingestion. So a really good question. Thank you for asking that. I don't think anyone's ever asked that before. And then colloidal silver is awesome. And I would add that to her water dish though. I wouldn't squirt it in her mouth, but you could add it to her water dish. And then there's no concerns with interactions with the pain medications, so don't worry about that. But, yeah, the protocol for detoxing is just juniper berry and copaiba for kitties.

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Dr. Roark:

And you can definitely do emotional support oils as well. Diffuse, diffuse, diffuse. Yes. Okay. Jennifer says, "I have access to the acupuncture, so I'll try that." Yeah. That's what I do. I'm incredibly biased though, you guys. I do acupuncture. I love acupuncture. I don't do shock waves. So that's a very biased opinion. So just take it for what it's worth as one veterinarian's opinion. So there's a lot of other good stuff out there, and just because I don't like it doesn't mean it's not awesome.

Dr. Roark:

Oh, yes. Thank you. Dr. Abby says, "What about CBD as a carrier oil, or hemp oil?" Those are great for ingestion. Yes. Great for ingestion, especially in a case like this. Now, you do have to be careful with CBD with some types of pain medication.

Dr. Roark:

So, Heather, "Where can we learn more about colloidal silver?" Well, you can just research it. If you actually do a PubMed search, you can learn a ton. There's a lot of research out there about it. You can also go to the membership group. I talk about it a lot. It's really an ingredient. It's more of an ingredient. It's mostly water.

Dr. Roark:

Evelyn says, "The only thing colloidal silver can't do is fill your wallet with silver coins." That's true. Colloidal silver is not a big money-maker. You guys are cracking me up tonight.

Dr. Roark:

Okay. Really good, guys. Okay. Christine. I think this is our last question. Okay. So Christine, "I submitted my Bouvier, Ali, as my first case study in level one. We've been dealing with digestive issues for about 10 months under the direction of our local veterinarian. As I presented in my case study, we switched food three times. She's now on Purina ProPlan HA formula as Dr. Jensen suspects Ali has an issue with how she processes protein. We've been on a very restricted diet that includes the HA formula, kibble and can, and pumpkin for almost two months. Ali's allowed vegetables and fruit, but nothing else. She's not happy that the Costco chickens haven't come her way. No yogurt, no cheese, no eggs, nothing. I've stopped her probiotics and multivitamin to stick with her restricted diet. Dr. Jensen ruled out parasites, Addison's, and IBS. I've been adding a drop of Roman chamomile and black pepper into her food diluted with the canned HA food with pumpkin. I keep a log of her daily business. Last week, it appeared we finally are making progress. This week, setback. The only difference I can detect is with her activity. She and my husband have an ongoing battle with the deer population in the community. We've had the deer near our backyard in the last three days and she chased them off from the safety of our fenced yard. I also think I stress her out because I've been grooming her the past couple of nights. This morning, we had a normal elimination. Second one was loose. Third one was a drop of mush. She also threw up twice on our walk this morning. I added a drop of Digestzen to her food. When we got back, she acts just fine. We have our two month follow up with Dr. Jensen next week. I'm just not sure where to go next. I'm thinking I want to be referred to internal medicine folks at Summit in Tacoma. Any guidance would be appreciated. Thank you."

Dr. Roark:

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Yeah. Okay. What do you guys think about this one, about Ali, digestive? Yeah. Kathleen has exactly what I'm thinking about, "Is she eating deer poop?" So if you have that many deer in your yard, you probably have deer excrement. And so if she's eating that at all, that could ... Oh my gosh, there's so many different things she could get from that. And that could be just be what's sending her off on these ... When she's been good, and then all of a sudden, now there's deer. She eats fresh deer poop, and now she has diarrhea. So that could definitely be a factor. That's the first thing I suspected actually. But, okay, so "They're outside the fence, so I don't think she can get to that. The deer are not inside our fence." That you know of. Deer can jump pretty amazing fences.

Dr. Roark:

So that could be, but it definitely could be stress related. 100%. It definitely could be stress related. So I would really be focusing a little bit more on ... You can definitely diffuse some stress relieving oils and that should not affect your restrictive diet situation. Do some self selection, maybe do an iTOVi scan even. You can definitely do a Nutri scan. Yeah, you can do a Nutri scan from HemoPet. That that would be another option. That's not the be all end all.

Dr. Roark:

So DigestZen. What else? Pancreatitis, we would see bloodwork changes, and I'm pretty sure her vet's been doing that, Jennifer. So passive diffuser on the collar as well, yes. Copaiba, unless it's an aberrant responder, like Jamie's dog. Adding TerraZyme would be excellent. Probiotics would also be excellent if you could slowly add those back in.

Dr. Roark:

Oh, goodness. This is jumping around. Sorry, guys. Oh, "She self selected Roman chamomile and black pepper. I give her the TerraZyme, too. Could that be an issue?" The TerraZyme should not be the issue, but you could try taking it away and see if it improves.

Dr. Roark:

Yeah. Jacqueline has a really good recommendation as well, which is the microbiome. Do a microbiome. It's brilliant, brilliant. Yeah, I do the microbiome, possible fecal transplant. "She's also self selected frankincense." So that would be another good one to add for sure. And Regina says, "Melissa."

Dr. Roark:

So I would topical oils as well. So you said DigestZen in the food, but try to do Tamer, cardamom, maybe even ginger. All your digestive support oils. Do some self selection with those, and do a topical application and see if that makes a difference. And you can do it when she has those super loose stools. You can do it as often as every two hours, and you don't have to go that often. But a lot of times, I like to tell people with these dogs with this chronic diarrhea to do it about 15 minutes before they eat as well just to make sure that it's not due to when they're eating. And then for sure, yeah, the stress relieving oils, all the calming oils, the sedative oils basically for when she's having high stress days.

Dr. Roark:

Good. Good job guys. Okay. Let me stop my share. All right. What else? Oh, we have lots of raised hands. Okay. All right, guys. I am going to stop right at six because I'm so tired. So if I don't get to everyone, hopefully we'll get to you next week. So try to keep it fast. We will start with Regina.

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Regina:

Hey, just a quick question. You posted in the group a success story. She diffused six drops of, I think, three or four different oils in the diffuser, which kind of made me nervous.

Dr. Roark:

Yeah. I would have to look at that one. It was just what that person used. I'm not 100% sure.

Regina:

Would that be recommended?

Dr. Roark:

Huh-uh. Not in general.

Regina:

She just used six drops each of Adaptiv, ylang-ylang, and vetiver.

Dr. Roark:

That's a lot of oils.

Regina:

Yeah, that is a lot.

Dr. Roark:

I'd probably do two drops of each and see.

Regina:

Right. Okay. So we're sticking to the rule of around six drops for blends.

Dr. Roark:

Yeah.

Regina:

Okay. Thanks.

Dr. Roark:

Now, sometimes people will do things that are not within the scope of what I recommend, but they still have great results, and they're still great testimonies. So, all right, Victoria. Plus, we also know that combination is not toxic, right. That tells us that, so that dog did great with it. All right, Victoria.

Victoria:

Hey, Dr. Roark. I just have a quick question about dilution. I'm doing a Kill It blend with someone. If you use four drops of each oil in a 10 milliliter, are you measuring the four drops as a 2% dilution because it's

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four of each? But not the total of all the drops together. Right. And the oils dilute each other, is that correct?

Dr. Roark:

Mm-hmm (affirmative).

Victoria:

So a 2% dilution is four drops of each. Okay. Thank you for that.

Dr. Roark:

Yeah. Yeah. And it is something a lot of people get confused about because the total blend is stronger than that. It's stronger than 2%, but each oil is still only 2%. And that's what I want you guys to focus on. I don't want you to do all oils. Don't do 50 oils and make it just all pure oil. That's still going to be super strong. But we're using mostly carrier oil regardless. We're using five or six oils, and that's totally fine.

Victoria:

Thank you.

Dr. Roark:

Yeah. Jenae.

Jenae:

Hi. I'm on my same question as I was last week. It was with a golden retriever that's eight years old and has been on a low dose chemo for four of those eight years. He had his vaccinations when he was four, and they decided it's ITP. And so they put him on a low dose. He started out with lethargic, fever, and low platelets, and they put him on a steroid and the chemo. And then in two years, took him off the steroid, still have him on the chemo. And it is azathioprine 50 milligrams.

Dr. Roark:

Azathioprine, yeah.

Jenae:

50 milligrams every other day. But she would like to try to wean him off of them, but he just had his test on the 15th, just the other day, and he's low normal still. I don't know. It worries me to help her with that in a way. She feeds Darwin's and homemade and FROM kibble. I had her switch over to NuVet Plus and the joint health in that, and put him on Mercola's probiotic, TerraZyme, one to two drops of frank and copaiba two times a day just to start. Maybe some colloidal silver in his water. I haven't started him on Zendocrine or anything to detox him. They're out of the Zendocrine complex.

Dr. Roark:

So what are his symptoms right now?

Jenae:

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Well, he feels good actually. He gained a little weight over the winter, which he could lose, but he feels pretty good. She just wants to wean him off-

Dr. Roark:

Don't we all?

Jenae:

Yeah. That's what I said, too. And she just wants to wean him off the chemo, but his platelets drop so suddenly, she just can't do it. I said, "Could you ask him if you could lower it even more," but they didn't want to.

Dr. Roark:

Well, this is one of those cases where I would not disagree with the vet because they have a really intimate knowledge of what's going on with this particular animal, and they're tracking the blood work really closely. So if she tried to wean him off of it and-

Jenae:

They tested him for Lyme. They tested him for all sorts of things.

Dr. Roark:

Well, we don't know what causes it most of the time. You're not going to find a cause, but we can address the symptoms. And if he's doing good on what they're doing, I know it's expensive, but I don't know. I wouldn't touch that one with a ten-foot pole, to be honest. But especially if the vet's not on board with me trying to decrease the dose a little bit, or instead of going every other day, going every three days or something like that. If they're not willing to do that-

Jenae:

Have you ever seen adding oils or diet or anything? So if she gets this tested after doing this, even though she's still on the chemo, have you ever seen it go up?

Dr. Roark:

What go up?

Jenae:

His platelet levels go up by using oils and changing diets.

Dr. Roark:

Yeah. Well, this one's a tough one.

Jenae:

They're pretty sure it was caused from the vaccines. Because it happened-

Dr. Roark:

Oh, yeah, that's right. I remember now.

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Dr. Roark:

I don't know. What do you guys think on this one? ITP is the immune mediated thrombocytopenia from a vaccine reaction in this case, probably.

Jenae:

Yeah.

Dr. Roark:

Which is when the body thinks that red blood cells or the platelets are foreign and tries to murder them all.

Jenae:

So like DDR prime, or Melissa, or would you do citrus oils?

Dr. Roark:

Mm-hmm (affirmative), you could. Okay. So the focus would be on the circulatory system, right?

Jenae:

Yeah.

Dr. Roark:

And the immune system to try and get the immune system to do normal instead of stop attacking yourself, to get the immune system back to homeostasis. So that's where I would focus, and then go to some of those oils that help with that sort of thing. So a couple of people recommending DDR prime. I really like DDR prime for this for sure.

Jenae:

Would you give him the capsule?

Dr. Roark:

And frankincense. How much does he weigh? Golden retriever?

Jenae:

{?} at the moment.

Dr. Roark:

I would. I would. But I'm pretty aggressive on stuff. Well, no, I just told you guys I'm conservative about stuff. So if you wanted to do what I said and not what I do, then the smart thing to do in this case ... Okay. Let me tell you the smart thing to do. The smart thing to do in this case, since you're the one helping her, is the safe thing, which is let's start with just one drop. Let's start with just one drop, because the DDR prime does have several drops in it, the capsule. And see how he does, and make sure he doesn't have a crash or something like that, or a reaction. And then go a couple of weeks with that, and then increase.

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Dr. Roark:

And then he's doing frankincense and doing pretty good on frankincense and copaiba, right? So I think that's a great next step. And then I like the Zendocrine as well. I like any of the immune supporting oils. So DDR is endocrine, On Guard, a lot of have similar oils in them if you look at them.

Jenae:

But would you want to give him On Guard with the clove in it for bleeding?

Dr. Roark:

Yeah, I wouldn't. DDR has clove in it.

Jenae:

Yeah.

Dr. Roark:

So I would be looking at like ... Well, that's a really good point. I don't think I would worry about it. I would not worry about clove because he's not on any ... He's just on the ...

Jenae:

No, but if he would bleed internally or something with this.

Dr. Roark:

No, I wouldn't worry too much about that. It's always a risk with that disease anyways, but, yeah, I would definitely increase the frankincense, keep an eye on the blood work. I'd go slow. Victoria says, "Roman chamomile and copaiba," Jennifer says, "Helichrysum," and I like Helichrysum. And so for this dog, I think I would probably maybe do more topical oils as well since he is getting a chemotherapy orally. So we want to be a little more careful with the oral stuff. I'm actually working on putting together a drug interaction chart for you guys so you can have it. It might take me a couple of weeks to put it together, but I am working on it right now. So helichrysum, rose, boost the immune system. Never give another vaccine to that dog obviously.

Jenae:

Right.

Dr. Roark:

Jennifer says, "What about arborvitae?" Jennifer.

Jenae:

Oh, yeah. I did offer that, too. And he likes nothing. The only one he kind of liked was copaiba, but other than that, he likes nothing.

Dr. Roark:

Well try arborvitae. I like that. I really like that. It's really good thinking, Jennifer. I like that.

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Jenae:

So you would do all these on a topical?

Dr. Roark:

No, I wouldn't. I wouldn't. These are all just options.

Jenae:

Yeah.

Dr. Roark:

So when we throw out all these options, , what you then do is self selection, and try to pick the yeses and the neutrals. And then you can kind of start with one, and then increase slowly, or you can make a blend with three. Three or four is fine. So, yeah, with him, yeah, two to three would be perfect, a blend. If there's ones that he says maybe or yes to, or doesn't run away from as fast. I don't know. Got to go with their personality a little on that.

Jenae:

He doesn't like any of them.

Dr. Roark:

"I'm a cranky old man. I don't want anything. Leave me alone."

Dr. Roark:

And then, of course, diffusion, too. Yeah. So DDR would be a good one to diffuse. I would do that. He's on chemo. I wouldn't do DDR internally. I like frankincense better. I like the copaiba. Increasing those, and then doing some topical as well, and then diffusion. So that's where I would start, and if he's doing good, I wouldn't mess with it too much, honestly.

Jenae:

Okay. Yeah.

Dr. Roark:

Especially if the vet's not going to be on board, but let us know how the next blood work goes.

Jenae:

Okay.

Dr. Roark:

For sure.

Jenae:

It'll be interesting. Thank you.

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Dr. Roark:

Yeah.

Jenae:

Appreciate it.

Dr. Roark:

Okay. Let's see. Jennifer, "Two to three for a dog topically. How many drops for horses to start?" Oh, you can use tons of oils on horses. Let's start over. My horse clients, they just want one session and just be like, "Oh, we're done." I teach them how to do it, but I'll often do six drops of each oil, and a lot of times, too, layering. And I'll use 10 oils. So a lot of oils. Horse customers are the best because they always buy a lot of oils because they use a lot of oils. You have to use two drops and then have one roller bottle for six months, and they are just a sponge, and they do great. They, they process it really well because it's plants and they're herbivores. Think about it like that. It makes sense. And they're gigantic.

Dr. Roark:

Yeah, Victoria, you can do Symphony of the Cells. You can do AromaTouch. You can do Raindrop. You can do all of those different layering techniques out there. Now, for those of you that love Symphony of the Cells, that's fine. You can love Symphony of the Cells. What I would encourage you to do is come up with your own techniques based on self selection and based on what systems and what properties of those oils you want to use. So based on weeks three through six of level one when we're talking about, okay, well what are we trying to deal with here? Are we trying to support the liver? Are we trying to choose your choleric oils? Are we to support the digestive system? Maybe choose your digestive support oils and do a layering technique with those instead of just something that someone came up with that doesn't always make sense.

Dr. Roark:

If you do use the Symphony of the Cells protocols, because a lot of them are very good, and I've used them, too. I like them, especially if I don't want to think. But start with Balance instead of frankincense. That's my only recommendation. Start with Balance instead of frankincense. Okay. Balance has frankincense in it, so you're not going too far off of it if you're a die hard.

Dr. Roark:

Jenae, "Would a ketogenic diet make a difference with a golden dog I'm working with?" I would have to research that. I'm not 100% sure. I would really recommend getting in some support groups on Facebook that are for dogs with ITP just to learn about it. Because there's a lot of things people have tried that work in there that you can actually get some good insight on some of those. I would have to look into that, Jenae. I don't know that answer right off the top of my head, I'm sorry.

Dr. Roark:

Yeah. "Scott Johnson just came up with another layering technique." Thanks. So many. And, yeah, Dr. Shelton calls it the drip-and-rub technique just because that's all you're doing. You're dripping, you're rubbing. That's what it is, and I kind of like that she calls it that.

Dr. Roark:

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Yeah. It's like having your own signatures. We are AA. All right.

Dr. Roark:

Okay, Jennifer, I'm not sure what you want me to teach you. Unmute. What do you want me to teach you on that? It's literally a laser. You just take it, you turn it on. I don't have one right here. If I was in my office, I have it right next to me at my office. But here, I'll use my flashlight. You take it, you put it on the thing until it turns off, and then you take it off. It's the most easy thing ever. It's not hard. It's not hard. It's a red light therapy. It's a laser red light therapy.

Regina:

I have it right here.

Dr. Roark:

It's not a laser laser. There you go. Regina has it. There you go. Here you go. Here's what it looks like.

Regina:

You just touch this button to turn it on, and you put it on-

Dr. Roark:

And it runs for a minute, 45 seconds to a minute, and then it turns off on its own.

Regina:

And then you move it to the next spot.

Dr. Roark:

You move it to the next spot, and you can do it every single day, and it's amazing. It's amazing. I love it. All right.

Dr. Roark:

Linda, "The only thing I was worried to try keto with animals is the amount of fat that are supposed to be included in the diet. Pancreatitis." Right. Agreed. And so it's really not for everyone. Keto is not the be all end all answer for all animals. Just like any diet change, if you're changing to keto, you need to do it slowly. You don't just stop cold turkey whatever you were doing and put him on a high fat diet. You're going to trigger pancreatitis if you do that. So you transition slowly over weeks.

Dr. Roark:

We did keto with Logan when he was diagnosed with lymphoma. It's supposed to be really good for lymphoma, but I don't know. I think it might have helped a little bit, but, man, I miss that dog. He was a good dog.

Dr. Roark:

All right-

Minnie:

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Dr. Roark? I use Photonics red light therapy as some of the girls do, and it's blue light, not that you can see. Wait, green light for, calming and then red light. So the blue is for bacteria. So you get all three.

Dr. Roark:

Yeah. I don't have experience with that one. I have a lot of experience with the one that I use, so that's what I recommend. And I just have seen a lot of really, really good results with it. And it's just-

Minnie:

I'll send you some info if you want to look at it.

Dr. Roark:

Super benign. Yeah. Yeah, you can send me some info. That'd be awesome Minnie.

Minnie:

Yeah. Tammy's been using it on her dogs, and it's been working wonders with the legs and everything. And Johanna's been using it, too.

Dr. Roark:

Yeah. Any light therapy is something. It's super helpful. Don't use them on eyes, Victoria.

Minnie:

This one though you can use around the eyes, and it's okay if it gets in, except for the blue light. And they have a tip kit so that you can pinpoint it so you can really avoid the eye. You can also use it in the nose and in the mouth.

Dr. Roark:

But not on the eye. I'm saying we don't do any light on the eye. Okay? So no light on the eye. You can use any of them around the eye, so that's totally fine, but you just want to make sure you're not shining in the eye. Damage the retina. So thank you for that info.

Dr. Roark:

Janice, did you have another question, or is your hand still raised from before?

Janice:

No, I'm good. Sorry.

Dr. Roark:

Okay. Okay. All right. I just wanted to make sure we didn't miss you.

Dr. Roark:

All right, you guys. I am so, so tired, and I have food here waiting for me to eat. So I love y'all.

Dr. Roark:

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Oh, I do have an announcement. Dang. I should have done this at the beginning. Well, I had to tell you guys my story about trying to get to California. But hopefully my way home won't be as dramatic. I hope I never have that much drama when I travel ever again.

Dr. Roark:

But for those of you, we're getting towards the end of the year for some of you, and you're asking what's next. We are going to have an alumni option if you want to stay in and stay coming to the weekly meetings, staying as part of the network. It will be much lower cost. We're still finalizing those, but it'll be a great option if you want to stay on as an alumni. And for those of you even if you're not finished, maybe you didn't do your presentation yet, or you're still working on your case studies for level two, then you can stay on it as alumni and still have access to all this stuff. So as soon as you leave, you will not have access to this information anymore. So that is one thing about having it on the website. So you still have access to all your level one stuff forever. You guys all have that. But Level 2 is only for people who are active.

Dr. Roark:

So it's incredible news, and, yeah, it's going to be awesome. We're still going to have guest speakers come in. We'll still do the business talks once a month. We'll probably make it more awesome through the years as stuff comes up, and the trainings. We might even add some new trainings, depending on what people are needing if I'm finding that we're missing something of paramount importance.

Dr. Roark:

So, Minnie, level two is one year. So whenever you joined, it's one year after that. So, all right, you guys. I will see you next week for the training. I believe we have training next week. So I'll see you then. Reproductive and endocrine system this month, and I will see you then. All right, bye.