

Kathryn:

She is ... Whoops, hold on. Got it. She is an older dog. I don't have a super duper hard situation like a lot of these people do, because I haven't had a lot of cases come my way. But she is one that I'm sure a lot of us have been faced with or will be faced with because she is very old. I've had to deal with a lot of issues with her. So Tasha the super mutt, and I'll tell you why she's a super mutt in just a minute.

Kathryn:

So background on Tasha, we adopted Tasha back in 2009 from an animal rescue called Lucky Dog Animal Rescue in Washington, DC. She originally came from a high kill shelter in South Carolina. We didn't know any of her background. We just know that this shelter was a pretty high kill shelter. So we were lucky that we got her. They said she was probably about two years old, so that makes her about 14 years old. We celebrate her birthday in November. I don't know why, but we just celebrate her birthday in November. She's a spayed female. So we never knew what exactly she was as far as like what her breed is. Even vets and groomers, nobody could really figure out.

Kathryn:

We figured she was some sort of sled dog or something because she loves the snow. So just recently we did a DNA on her, and it came back that she was, like you can see, Australian shepherd mostly, which just blows my mind because she doesn't look anything like an Australian shepherd. A little bit of lab, some Siberian husky. Even the DNA people could not tell what she was. They said she's 13% super mutt, which I believe that because she is a super dog, and she is a super mutt. She weighs about 30 pounds.

Kathryn:

She's always been very active. She loves to run, jump. She's just a dog's dog. She loves to be a dog. She loves to go hiking and be outside and play and everything. When we went to adopt her, we went to the foster home where she was staying at. My daughter, Abigail was two at the time. I always say she actually adopted us because we walked into the backyard of the foster home. My daughter, like I said, was two. Tasha just ran up to my daughter and sat right in front of my daughter. As my daughter walked around the yard, Tasha just sat in front of her and would walk over and sit in front of her.

Kathryn:

So I just looked at the person and I said, "Okay. So I guess this is our dog." She's been our dog ever since. This was in March when we lived in Maryland, she moved with us in Maryland. I deployed for a year to Afghanistan. So Tasha moved to Florida for a year and lived with my parents, moved back. Then she moved across country with us to Wyoming. So she's moved all over with us, but we just think she's the best dog ever.

Kathryn:

So she got older and of course slowed down a bit. I talked to the vet about that. Probably about four years ago, maybe five years ago, he put her on Rimadyl 25 milligrams a day for pain in her back, and specifically like her hips and her lower back because she just seemed really painful back there.

Kathryn:

She also suffers from real severe anxiety with thunderstorms and fireworks. So he put her on fluoxetine. I apologize, I did not get the milligrams for that. But he put her on fluoxetine for her anxiety. Also just

separation anxiety at home. She's not destructive or anything, but she just gets really, really worried at home. She also has some fear aggression, which is of course separate from the anxiety. But she actually has attacked other animals before with her fear aggression. So with the stiffness in her back and in her hips, I also had put her on Dasuquin, the glucosamine and Chondroitin supplement for several years. Just to help that as well. She also has severe tummy issues with any changes to anything.

Kathryn:

So she goes to the kennel, she'll get like gastric issues for several days to a week after that, where I've actually had to take her to the vet to get her on medication, to straighten her stomach out. Goes to the vet. The first thing that happens, she gets nervous and poops on the floor of the vet or can't even take her to Petco to have a fun day because she just gets, excuse me, nervous. She just gets really, really upset with all that. So she gets a lot of stomach issues as well.

Kathryn:

So my concerns back last summer were to get her off of some of these long term meds. I was still worried about the stiffness in her back end because when she goes out to go to the bathroom, it looked like it was really hard for her to even squat to go to the bathroom. Old age is a beast. So her hearing is pretty much gone. You can go right up behind her and clap or yell, and she doesn't hear a thing. She also groans very loudly when she's getting up or trying to get down. So that was also a concern of mine. I wasn't sure if that was painful or if that was just a communication technique of hers. So that was one of my concerns. I wanted to make sure she wasn't in an increasing pain.

Kathryn:

So I did some self-selection with her. I didn't list all the oils I used, but for anti-inflammatory, I used copaiba, frankincense, lemon eucalyptus, Roman chamomile and Bergamot. For analgesic or pain relieving oils, I use Copaiba, ginger, Roman chamomile, Siberian fir, and peppermint for her to do some self selection. Those were the ones I had on hand. I know there's many, many others I could have used, but that's just what I had already in my inventory. So she self-selected ginger and Copaiba. She really loved the ginger. I mean, she just wagged her tail and licked at the bottle. So the ginger for the analgesic properties and Copaiba, for the analgesic and anti-inflammatory properties. I know she's old, and her sense of smell might not be perfect anymore, so I chose oils also based on needs.

Kathryn:

So I added the frankincense in there because of its super wonderful, fantastic properties of the anti inflammatory to that she needs. So initially, I tried with her two drops each of copaiba and frankincense in her wet food twice a day. I went ahead and ordered the new joint supplement because I wanted to get her off that Dasuquin. I wanted to do a spray with the copaiba, frankincense and ginger 10 drops each in a bottle with some fractionated coconut oil to use as a massage and tried to do that with her two to three times a day on her hips and lower back.

Kathryn:

Let's see. So she didn't really like the massage that much. I think because as there was a lot of pain back there, I tried to be really careful with her, with the spray. I think it was the spray itself that she didn't like, maybe trying a different technique would've been better. She definitely did not like oils in her foods. So I switched to a veggie cap with two drops. Initially two drops copaiba and frankincense with a

little bit of olive oil in the veggie cap. I didn't know initially that I could give it to her without a carrier oil. So I gave that to her with olive oil in there and NuJoint DS instead of the Dasuquin.

Kathryn:

Even now I still keep Rimadyl on hand for her just in case we have an active day. Like sometimes we go camping and stuff, and she's doing a lot of walking. So I keep some of that Rimadyl on hand for her. So here's a little video of her now. This is now. So this is jumping ahead a little bit.

Kathryn:

So she is very active now. So this after I've done a little bit more adjustment. I changed her food. She was on kibble, and I tried to give her the healthiest kibble I could find. But I've changed her food to Farmer's Dog, which both of my dogs are ... Actually all three of my dogs absolutely love. Then after a month of those veggie caps, I changed the veggie caps, the two drops of copaiba, two drops of frankincense and two drops of CBD oil with a drop of turmeric as well. Then like you can see in that little video, she's amazing now. She's like a puppy again. She plays with the dogs, plays with the cats. She jumps like that, which she hasn't done that for years. She jumps up on my bed now at night. I used to have to pick her up and put her up on the bed at night.

Kathryn:

She still can't hear, but there's nothing I can do for that, unfortunately. But it's amazing. Any doubts I had about whether or not these oils could really help an elderly animal have completely dissipated because she's very happy. She still groans a lot, but I think that's just kind of ... She can't really hear at all. So I think she kind of communicates like that. She barks and groans a lot, but it doesn't sound painful. It's just like her just sounding off. Otherwise, she's still our super mut. She's still around, and we're going to try to do everything we can. The only other thing that I might do is add that veggie cap a second time if I see her starting to get more stiff again. I'll add that veggie cap twice a day because I still only do it once a day. Of course any suggestions anybody else might have, I'm open and ready.

Dr. Janet Roark:

Awesome, great job, Kathryn. For all the new people that just came in, that is an example of a case study that we do in here. Kathryn did a really good job explaining it. I do have one question just for your grade. You said that initially you did a spray with 10 drops, copaiba, frankincense and ginger in a bottle, but you didn't say how big the bottle was.

Kathryn:

I'm sorry, Two ounce, I think, bottle.

Dr. Janet Roark:

The two ounce. Okay. All right.

Kathryn:

I'm sorry.

Dr. Janet Roark:

Yep. Two. I just needed to know the dilution. Right? Make sure it was appropriate, which that is totally appropriate.

Kathryn:

Okay.

Dr. Janet Roark:

Good job. A couple of suggestions, Suzanne suggested instead of spraying her for the massage, maybe spray it into your hands and then try that. Then Tracy's like, "Keep going super mutt." Awesome presentation and case. Did you think about the deep blue polyphenols possibly in place of the Rimadyl? Then also possibly offering something like one of the blends, like aroma touch for topical use as well. That's one suggestion, Veronica listed a whole bunch of them, Vetiver, spikenard turmeric for copaiba, frankincense can solve, especially for her like anxiety, getting her off of the fluoxetine. Were you able to get her off of that? The fluoxetine.

Kathryn:

Off of what? Yes, yes.

Dr. Janet Roark:

Awesome, awesome. She's off of everything. Yay.

Kathryn:

Yeah. I just-

Dr. Janet Roark:

I'm absolutely just so happy.

Kathryn:

All this was amazing that somebody said that, I'm just wondering that right now.

Dr. Janet Roark:

That's awesome. Okay. Great job changing her food. Gently, gently massaging. Some dogs just don't like to be massaged, guys. That's okay. I actually need to do a little bit of this for Bella. Bella is now living with me. She came up lame, pretty lame yesterday. She's having trouble getting up and down all of a sudden. So we're going to be implementing some of these things. Thanks Catherine for the reminders. Awesome. Yeah, it's definitely possibly doing. Oh. You stopped sharing. Okay. Possibly doing like a layering type technique for a topical application. Let's see. Diffusing calming oils. Yep. She did do that. Also acupuncture may be really helpful, Kathryn. I'm a big fan of that. Then if you don't have one of those little lasers, they're awesome. I just love those things so much. Those little photozos or however you pronounce that. Marjarom might be a good one too for topical use, and then some of the acupressure things that we've talked about. I'm not sure when you came in, if you actually got access to the acupressure one. If not, you'll get it soon. Of course, everyone says you did an amazing job. Obviously, it's always a good job when we can make our old puppies feel better.

Dr. Janet Roark:

I just love that video of her jumping up and down again. That is just unbelievable. I mean, I hope you post that on social media. That's absolutely incredible. So good job, Kathryn. Yay. So, so proud of you. All right. Let's get to some of these posted questions. Oh yeah. So a lot of people are recommending that a CC as well, the CC loop or CC mats, which is a PAMF. If you haven't heard of that, it's technology. It's a pretty good one for these older guys. I really like that as well. Just another thing to add if she starts to slow down again, you definitely are getting great results with what you're doing too. So there's some other things about that. Okay. All right. Let me do some of these questions that are posted before our next one at 5:30.

Dr. Janet Roark:

Here we go. Okay. So we have one from Ingrid, two questions. Are we going to be learning about the blend in detail as we did the individual oils in level one? Well, the problem with that is that this is like a non-branded class, even though I know a lot of you use doTERRA, not everyone does. So we're not really going to talk about the blends like we did in level one, but here's the cool thing. You learned about all the single oils, and you know what's in the blends based on what the single oils are. So you can kind of figure out kind of what's going on with the blends based on just what oils are in there because it's just a mix of all the single oils. So we're not going to do that. Super crazy. We're not going to get into that a lot.

Dr. Janet Roark:

If you have specific questions, of course I'll talk to you about it. Jennifer, can we use blends in our case studies in level two? Yes, you can. So I wanted you to get the purity of the single oils. But just keep in mind that some animals are sensitive to the blends because there might be just one oil in there that they don't like. If that's the case, it's not that all of those oils are out the window. You might have to go back to your single oils. So don't forget about your single oils. It's convenient to use blends, but what happens is you get into this habit, and I'm guilty of it too, of just only using the blends instead of going back to your single oils. You don't want to just use blends because there are some animals that do really, really well with maybe ... Well, like Kathryn's case ginger. She really liked ginger. Right? That's a single oil that we might not reach for if we're always reaching just for our digestive blend. Right? So something to keep in mind there.

Dr. Janet Roark:

Would you use DDR prime for neurologic issues? Yes, most of the time you use it for neurologic issues. With epilepsy, it really, really depends on the animal. So you can try it. I would try diffusing it at first and making sure that doesn't lower the seizure threshold for that particular animal before you use it internally or anything like that. But I have used it in certain epilepsy cases. I tend to up my copaiba, up my frankincense, quite a bit in those cases first. But DDR is definitely an option.

Dr. Janet Roark:

Okay, Paula, I think I answered your question. You emailed this to me, but she's wanting an Italian translation of my book, and we were working on that. So the company that did the publishing is working on some European translations. That is in progress.

Dr. Janet Roark:

So Tara has a couple of questions. One, I can't seem to find the alternative therapy consent form with the animal aromatherapy logo you mentioned from the workshop on Monday. Where should I look for this? So you should have gotten an email with a link to the Google folder that has all of those in there.

Tara, check your email for the link to that Google folder that has all of them in there. So if you can't get it, shoot an email to Support@EssentialOilVet.com and we can get that to you.

Dr. Janet Roark:

I'm also interested in any other forms. Yeah, those are all in that folder since you got that particular one. So shoot an email over to Support@EssentialOilVet.com, and you'll get access to those. That's for people who took the How to Earn Money as an Animal Aromatherapist workshop. Number 3, I am looking at the GCMS reports of specific oils, how important is it if certain constituents are off by a few percentages? I suspect the top three are the most important. If a company offers third party, random third party testing, as opposed to testing by the batch, is that sufficient to trust the quality of their oils? Thank you so much.

Dr. Janet Roark:

It depends. It depends. So it depends. Random third party testing is good. It's better than nothing, but certainly not as good as doing every batch. Right? So as far as the percentages, get yourself a reference book that has some of those ranges that are acceptable. As long as it's within a certain range for that particular plant. I recommend that Medicinal Essential Oils book by Dr. Scott Johnson. That one has all the different ranges that are acceptable. Then it lists the clinical, kind of like the clinical preference for the percentage range, which is a little bit tighter.

Dr. Janet Roark:

So if you look it up, and it's within that clinical range, that means it's probably therapeutic for what it is that you're looking for for that particular plant. So grab a reference book if you want to do it. But if it's off by like 0.3% or something like that, I don't get super worried about that. The main thing is it's within that range, the main range. Then for therapeutic purposes, I do want it to be in that clinical range, which is a little tighter. So hopefully that helps. Let's see, it's this one. It's the Medicinal Essential Oils book. So if you guys go back to your level one, in the welcome unit, the first unit, I always post like recommended books. The one man, this is my most used essential oil book.

Dr. Janet Roark:

I just really like it because it also has all the research. So that is my personal preference. There's lots of other good ones out there. There's certainly other ones that identify the chemistry. That one's really clear and easy, and it's goes by plant or by essential oil. So it's a really good one. Jennifer, I already answered your question. Heather, question about a current client, Rhodesian Ridgeback, female, spayed, 75-pound, Orijen grain-free food diagnosed with periodontal disease. She's going to a specialty vet in a few weeks. I'm having her self select with thyme, copaiba, and clove because of their antibacterial properties. Awesome. I also have her self select with frankincense because of the analgesic and anti-inflammatory properties have just begun with her. I wanted to see if there was a typical protocol for this type of disease. So anything with oral health, I always do myrrh as well. What else would you guys recommend in this particular case for Heather? Periodontal disease, periodontal disease. Anyone?

Dr. Janet Roark:

Roman chamomile, frankincense. She's going to try frankincense. Yep. Victoria says OnGuard. So as far as blends go, that would be a good one that I use a lot. Victoria says neem. I wouldn't necessarily go with that one for oral use. Peppermint's another really good one, Janae. I like that one. Vanessa says

thyme, which she is using thyme. Lemon's another really good one, Janice is recommending. That's another really good one. Yeah. Good job guys. Okay.

Dr. Janet Roark:

So let's see if we have time, we have two more minutes. So we'll do Kiyoko's, and then we'll come back to the rest of them. All right. Kiyoko. I'm dealing with a dog, Noah, who has liver cancer, heart disease, periodontal disease, respiratory issues and kidney disease. Wow. This is a hot mess. She's a 17-year-old dachshund. Oh, that's probably why. She's old, was diagnosed with liver cancer in Christmas Eve of last year. The owner didn't choose surgery or chemotherapy because of the age and with these health issues. She had seizures a few times last month that the vet thinks the cancer has metastasized to her brain.

Dr. Janet Roark:

But since she used essential oils, she doesn't have seizures. Awesome. She got results of the blood work two days ago and found that GPT was elevated quite a bit in the last couple of weeks. We wanted to increase the dilution ratio of oils for cancer, currently 1%, but it wasn't easy because basically Noah doesn't like oils except for frankincense, copaiba and balance. My questions are, what the owner wants to do is shrink the cancer, but she wants to treat other health issues too. I feel like it's too many kinds of oils for an old and small dog if she uses oils for all of Noah's issues. What do you think? I think the dilution ratio of the Kill It Blend is 15 to 18%. Is that too strong for a 10-pound dog? Nope. It's actually only 2% because remember, we're like ... Honestly, this dog is on its last legs. I hate to say it, but you definitely can use that.

Dr. Janet Roark:

Remember that oils like copaiba, they're good for cancer. It's good for cancer. It's good for heart disease. It's actually good for oral health and respiratory disease. Guess what? It's good for the kidneys too. So one oil can cover all of those things going on with this particular dog, and you don't have to necessarily use a separate oil for every single one, especially since she likes copaiba. I would definitely up that one, up the percentage of that one or maybe even give it internally for that particular situation. So any other suggestions for this dog, for Kiyoko, guys?

Dr. Janet Roark:

Yeah. She is. I think you're on track. But I would definitely increase the frequency and concentration of the frankincense, copaiba and balance. Certainly there, yes. So Suzanne says maybe diffuse. So you can certainly diffuse some of the other oils that are really good for the heart, adding in Marjoram or for the kidney or Juniper berry are definitely not going to hurt anything. Certainly the Juniper is also really good for the liver. Juniper berry and copaiba are two of my top oils for liver as well. So those would be really good, frankincense is good for cancer. She's already doing that one.

Dr. Janet Roark:

So yeah, Juniper berry, copaiba, I would up those ones quite a bit. You can add in marjoram as well. Tammy says basil would be another good option. Yep. Good job guys. Okay. So I would not hesitate to get pretty aggressive with this little dog when it comes to oils because I don't know how much time she's got left. So we want to keep her quality of life as good as possible in the meantime. All right. Let me stop my share. Then Nikki is our next person. Where are you at, Nikki?

Nikki:

Here?

Dr. Janet Roark:

Here you are. Okay. So let me pin you. So I should have been Kathryn too. Okay. You should have access to the screen if you want to share it. If you don't, that's okay too. You can go ahead and take it away.

Nikki:

Okay. Thank you. I don't have anything to share on the screen just because I don't do anything technological at all, but actually I was going to do a different case study and then I decided to do my cat for two reasons. One, he just had a serious, serious issue. I think that this is the craziest story in the world. Two, because I kind of already talked about him before with everyone. It's Brew, and he's the one that likes to attack other cats and is pretty vicious with them. But in any other way, he's the sweetest and most amazing thing in the world. I don't know if anyone can see. Nope, the camera doesn't. There he is. He's my handsome boy.

Nikki:

So Brew is a four-year-old neutered tabby cat. He's a failed barn cat. He's 21 pounds. My mom actually got him as a kitten to be a barn cat. By the time he got all of his shots, he refused to go outside to the barn. We dragged him on a harness. He was clawing at the door, he just did not want to be outside at all, not even on the deck. So he wanted to be an indoor cat. But unfortunately for him, my mom had a 23-year-old cat who he wanted to attack, and that's something that's been in his family line for a long time. So I ended up taking him because my other cat is younger and a lot more agile. She would just jump on top of the fridge, and he couldn't catch her up there.

Nikki:

But on January 9th, I came home. He had a little bit of an issue. So health-wise, he's been amazing. Super fit, not the fastest because he's so fat. I shouldn't say fat. He's just a big boned boy. He eats raw and was super picky about which raw meats he wanted when I transitioned him. He chose kangaroo and venison. That's all he'll eat. He gets beef tripe and beef liver added to his food, gets pumpkin as well. He won't take any supplements on his food. He'll literally starve himself if I add anything else to it. He's on no meds. Super cuddly, very talkative, pretty active. He's the naughtiest thing ever and quite destructive. He'll sit on a counter, look at me, like don't you hit that, and he'll just knock a glass right off and run away.

Nikki:

So on January 9th, I came home, and he just couldn't walk straight. He kept falling over. His one eye was squinting a lot. His head was tilting to the side. His ear was drooping. He'd shake his head often and then just fall right over. He seemed very confused and had no appetite, which was really, really weird for him. I trip over him every time I'm trying to give him food. So I just waited a day to see, and it kind of got worse the next day. So I called my vet. Unfortunately, she was on vacation. So the next day, I just saw a vet that was at the same clinic. They ran blood tests, did a THC test, did poison tests. I had just moved. So I thought maybe one of the movers could have had something on their clothes that fell on the ground or I don't know. But everything came back normal. I was told that his body seemed fine.

Nikki:

There was nothing physical to worry about and to just kind of monitor him. So for the next, two days I monitored him and his symptoms were the same. He just kept falling over. His equilibrium was totally off. He was still not eating, but he was really eager for his food. He would just go up to it, sniff it and then leave it or he'd fall over while sniffing it. It was pleasant for my other cat because he wasn't attacking her. But he seemed really sad and wasn't active or destructive, wasn't talking at all anymore. So I had a phone appointment with my vet. Then she wanted to ... Or actually not my vet, but the one that had seen him the first time. She wanted to give him appetite enhancers. But I declined that because he clearly wanted to eat, he just couldn't.

Nikki:

She also wanted to put him on anti-nausea meds, but that came with a lot of side effects, and he didn't seem nauseous to me. So I also declined that. I just started giving him water through a syringe just to make sure he wasn't dehydrated and tried all kinds of different foods and treats. He would once in a while eat dehydrated liver treats. But obviously that wasn't enough to sustain him. So the symptoms continued for the next 10 days and things started getting worse. He was losing weight. He loved kneading blankets. He stopped doing that. He seemed scared of any sound, like a door opening would send him into shock and then he'd fall over shadows.

Nikki:

If my dogs were walking over him, he was like cowering as if someone was going to hit him all the time. I found that his mouth was open quite often. I didn't know if that's because it was dry or he just lost control of his face completely. He started peeing out of his litter box. He'd fall out of it while he was peeing. My litter boxes are all in kind of cabinets with a door that's always open. He would be scratching AT the wall, not going through the door, like he wanted to get out, but didn't know how to.

Nikki:

So yeah, there was just a lot going on. He looked like he was in pain, especially around his head. He didn't like being touched anymore. It also seemed like his senses were quite heightened and he was like more, he was looking at ghosts or something like he was more aware of things that weren't there. So I finally on January 23rd got to see my vet when she came back from vacation. I asked if she could just rule out that it might be vestibular disease or an ear infection that was missed just because his head was so wobbly and weird, if he could have had a stroke. But again, he was only four years old or if maybe he caught COVID because I had had it the week before all these symptoms started. She said that basically everything was all negative. They just couldn't tell what it was.

Nikki:

So her thought was that it was a neurological issue and that it was probably due to some kind of injury or blunt trauma. Maybe he fell off of something. Of course in that moment, I remembered that the day that I found him on the 9TH, one of my dogs had a scratch right above his eye, AND tiny little cat scratch. So I thought maybe the dog pushed him off of something or he scratched him and startled him in his sleep or something like that. So it could have been something that one of my dogs caused. Then the vet had said, I could go to a specialist and a neurologist, but that would of course cost almost \$10,000 to get the results that wouldn't have anything that I could treat. So I would know that it was a neurological issue, but that was basically going to be him for the rest of his life, which of course was heartbreaking. This poor little guy just couldn't move or do anything.

Nikki:

The idea of him being like that forever, she said, "All we could do was just give him painkillers and hope that he wasn't in pain," which also came with so many different side effects. So I just said I'll see what I can do with him and go from there. My vet, while she is absolutely wonderful, is very opposed to anything natural. She's a lot older, probably going to retire soon, which also breaks my heart. But she's really not into anything natural at all and always wants to prescribe something. So she was like, "Well, good luck. Your cat's going to be in pain on top of living like this forever." So I just decided to pull out all the oils possible. I went all out with his self-selection. So to address, I wanted to first address the musculoskeletal system.

Nikki:

So I chose clove cinnamon, thyme, black pepper, peppermint, pine, Juniper berry, and Rosemary for any pain and numbness that he might have. Then I picked clary sage, Roman chamomile, lavender, helichrysum, yarrow, ginger, lemongrass, patchouli, frankincense and bergamot as anti-inflammatories in case there was swelling that we couldn't see. I also wanted adaptogens. To address the nervous system, I chose ylang-ylang and neroli because they're stimulants, but can relax emotionally. I also wanted oils that could help with nervous tension and lack of strength. A lot of the musculoskeletal oils addressed that, but I added vetiver, celery seed and Melissa to my list, and then copaiba because it's my favorite go-to for almost everything, and it enhances the benefits of any of the oils that it's paired with. So needless to say, our self-selection took over an hour because I had so many things. But surprisingly, he was really, really obvious about what he wanted.

Nikki:

I almost felt disheartened. Like he just wouldn't want anything. Then he sniffed Cypress. Immediately he just started rubbing himself on it, falling over while doing it. But he really liked that one. He chose frankincense and ylang-ylang. So I just put it in a diffuser immediately. I diffused three drops of each on an intermittent setting for 10 hours. In 20 minutes, he got up from where he was laying, meowed like 10 times, which I hadn't heard him speak in two weeks. Ran towards the fridge, pawed at it. I was like, "He's hungry." So I opened up the fridge, fed him and he ate an entire three ounces of meat so fast. That night, he jumped up on a chair, which he hadn't done in a long time. Then he jumped into bed and slept with us. He walked quite a lot steadier, but he was still really slow in his movements.

Nikki:

In the morning, he ate a complete meal. So I diffused again all day intermittently with the same amounts, just three drops of each. Then I saw kind of small improvements that day. He had more movement. He was cuddly again. He kept rubbing his face on me. So obviously he wasn't in pain around his head anymore. He was falling a lot less. He stopped shaking his head a lot. His one droopy squinty eye opened up. Still noticeably smaller than the other side, but definitely way bigger.

Nikki:

He would only seem lethargic again after a nap. He was a little bit out of sorts, but he'd perk up pretty quick after that. By day three, he was a hundred percent back to normal and attacked my other cat like full force. Grabbed her by the neck and took her out. So as awful as that is, it was just amazing to see him completely back to normal. So I chose to diffuse just for another full week to make sure that everything was in balance for him. he's been absolutely fine since January. I decided in my new house to

build a whole bunch of different shelves, mostly for the other cat to get away from him, but for him to be able to climb.

Nikki:

He is running all over the place, having the time of his life. I was just beyond shocked to think that my vets, well, two vets said that there's nothing for this cat, and like a total turnaround. Not that I didn't think that I could help him, but I didn't think it would be that fast. I didn't think he'd be a hundred percent back to normal. I just thought it would give him a little bit of quality of life. So yeah, it was amazing. Absolutely amazing. My baby's back. Now, I'm going to go broke using all the rose oil because that's the only thing that keeps him from attacking the other.

Dr. Janet Roark:

They always pick the most expensive ones for that. That is so amazing. That's a really incredible case. It is really incredible that it worked that quickly. These oils continue to amaze me, even though I've seen miracle after miracle like this. It's really, really good cases. So I really like how clear he was with what oils that he wanted. Then you just kind of went with that. So I'm kind of glad that you chose all the oils that you did and did self selection with all of them. Because I mean, I wouldn't have recommended Cypress, frankincense and ylang-ylang as a combo. You know what I mean? But he knew. He's like, "This is what I need." You listened. I mean, the response like within 20 minutes, he already ... Man, that's really incredible. Oh my gosh, that makes me so happy. Were you like crying? I think half of the people here are probably crying, just like, "Oh no."

Nikki:

I was crying every day when I'd see him fall over. But yeah, it was definitely tears of joy. I had both of my brothers who are like, "You're a crazy witchy person now with all your oils." My mom was there and all four of us were just like, "He's moving, he's running. He's eating." So yeah, no, it was just crazy. In just 20 minutes.

Dr. Janet Roark:

So did you tell your vet?

Nikki:

I did. She said that it must have been a coincidence, but ...

Dr. Janet Roark:

Whatever. Yeah. Real coincidence that 20 minutes after you started diffusing.

Nikki:

Yeah. But the farm vet that we use for our horses and chickens who actually orders a lot of oils from me because he's always like, "Oh my god, I can't believe these things are working." I told him and he was just floored. So he's like, "I want those three oils." I'm like, "I don't know if you'll ever need them." I don't know. I didn't think I ever would. But yeah, it was ...

Dr. Janet Roark:

Well, especially if he works on horses, those are great ones for horses and goats, and goats. Okay. Let's see. Oh my gosh. Everybody is just like, "Unbelievable." Let's see. Yay. Any questions for Nikki, guys? Really good case. I'm glad you chose this one to share. That's really incredible. Yet another example of why we will always use essential oils with cats. No matter what people say. Ha, ha, ha. No. So another really, really cool case. Margie, is that about Nikki's case? Is yours about Nikki's? Okay, go ahead.

Margie:

Yeah. What we have now with this cancer case, with this Bernese dog, they have removed the spleen. They've done the biopsy of the liver, and I'm pending some blood results and biopsy results on that. Right now, the dog is still pretty anemic. They said that the liver looked pale and really wasn't functioning the way it needs to. So they brought him home. He's anemic. They brought him home with the feeding tube. They've been shooting the oils in, mixing it in with the food and everything. He's still not eating on his own, has very little appetite. Shows the anemic, and none of the counts have really changed. My question really is around is there ... I know that at first, we've kind of talked about feeding the dog, get him to eat anything. He's on a Hills prescription diet with that. I think it's Emergency Care or something like that.

Margie:

I kind of told her, I said, "Just get him to eat anything if he'll eat anything." Right? Kind of going along those deals. She took him in today because she felt that he was not breathing right. So he looked like he's retaining some fluid. I don't know if it's in his lungs or in his heart. But she's real happy with the vet care that she's getting, which was the recommended care that we got from the team a couple of weeks ago. Okay? I want a shout out to the team to come to the rescue for that. She's happy with that. So I guess, do you have any further advice now? We're still doing frankincense and Copaiba, DDR prime, and she's doing some Zendocrine.

Dr. Janet Roark:

Yeah. For the anemia with the DDR prime, adding in lemon might be helpful for anemia. Then for sure, are you doing the Yunnan bayo?

Margie:

I don't know if she's still doing that. I know she's doing the mushroom. I don't know about the Yunnan bayo, if she's still doing that

Dr. Janet Roark:

Yunnan bayo is going to help him get his blood count back a little bit better for the anemia.

Margie:

Okay.

Dr. Janet Roark:

That's more for the anemia, the bleeding stuff I would for sure. I would for sure do Yunnan bayo. That would be the one thing that I would for sure, for sure. If we even like drop everything else, if she only did one thing, the Yunnan bayo is what I would choose. No, I don't think she should stop the other things by any means. But I would definitely add in some lemon, which has been shown to be very

helpful for anemia as well. Then part of the not ... The anemia does cause inappetence. So yeah. Getting him to eat anything, chicken, liver, it doesn't really matter. Liver is nice because it's high in iron, which also helps with anemia. So ...

Margie:

Yeah. She tried some liver, and he didn't have nothing to do with that stuff. He didn't want any of that. So ...

Dr. Janet Roark:

Gently cooked, even if it's just like gently cooked rice or anything. The prescription, the Hills prescription diet, that's kind of high calorie to help with animals that aren't eating. So it's not really like, "Oh, he needs this prescription." It's just like, let's just ... it might be a little gentler on the stomach maybe, but I wouldn't worry too much about that. I would just try and like-

Margie:

Anything.

Dr. Janet Roark:

Hamburger, like chicken, turkey, venison, dehydrated beef apparently is what Nikki's cat really liked. So like anything, chicken baby food is another one. Heating it up a little bit to make it smell stronger can sometimes help.

Margie:

Okay.

Dr. Janet Roark:

Yeah.

Margie:

Okay.

Dr. Janet Roark:

Yeah. AD from Hills because an emergency care. Yep.

Margie:

I don't know if the fluid, it's in the lungs or around the heart. Don't know where that's coming from.

Dr. Janet Roark:

I don't know.

Margie:

But she's got them in, they were going to try to do some checks on him, do some sonograms and see what's going on with that.

Level 2 Meeting March 15, 2022

Dr. Janet Roark:

Ultrasound. They'll probably drain it if they find it, if that's what is. Yeah.

Margie:

Okay. All right. Thanks for that. I'll pass that on.

Dr. Janet Roark:

Okay.

Margie:

This is a tough case.

Dr. Janet Roark:

It is. Cancer's never easy. Of course we'll be talking ... We talked about cancer last week. You guys, stop with all the cancer cases. It's making me like really, really sad. We are talking about cancer on Friday in the membership group too. So be sure to hang out there. I mean, it's really just ... It's all stuff, you know already Margie. You've been in there. But it might be give you ... Because I'll be presenting it. You might be a good kind of way. I want you guys to walk ... Especially those of you that are been around a little while. When I do those webinars, pay attention. If you're like, "Well, I already know this information," pay attention to how I'm presenting it as well. That might actually be really helpful to you for when you do presentations.

Dr. Janet Roark:

I know Steph, you are starting to do more and everything. That's so cool. But just how I present it and the structure of a presentation, I'm starting to do. We're also going to do give this week. So be sure to be live if you want a giveaway. You guys know I give away really good stuff. So I love it. It makes me happy. So definitely pay attention to that as well. Sometimes you might get some different wording of how to talk to people when you do get a cancer case in a way that's compassionate. But also we need to be realistic about expectations too. Right? So this is a really hard case.

Dr. Janet Roark:

They're really doing everything that they can for this dog. I really hope he turns around. If we can get rid of the anemia, it might be really good, but I'm a little worried with the breathing because a lot of times, with hemangiosarcoma, it does affect the heart base. It's really a common location for it. If that's the case, man, they're going to just ... It's like you drain it. Then it's like, okay, how long before it fills up again? You're just kind of buying time at that. So very hard.

Margie:

Well, if we find it's the heart, should we try doing like the heart blend or ...?

Dr. Janet Roark:

You can-

Margie:

Anything around that?

Dr. Janet Roark:

Get your diuretic oils to help with the food. For sure. Then certainly the heart support because it's the fluid around the heart is going to put more pressure on the heart, and we want to support it as much as possible. So yeah.

Margie:

Okay.

Dr. Janet Roark:

Yeah.

Margie:

All right. Thank you.

Dr. Janet Roark:

Ylang-Ylang is one of them. All right. All right. Let me go back before I go to Janae and Sarah. Let me go back to the posted questions because I can't believe I forgot to go over those last week. I never do that. That's the first time it's happened.

Dr. Janet Roark:

I was just so excited about all the new people. They were all alive. Okay. We got Kiyoko's, all right, Ingrid. Yeah. I didn't miss it, Ingrid. I totally didn't come to this page. So I'm really sorry. I got to it today. All right. Julie, "I'm in the UK, so it's a little late to join, but would like to ask advice on a case study. A horse reacts badly to insects. He's been rubbing his mane so much in places ..." He's going bald. He reacts to coconut oil. I did a patch test, avocado oil and his armpit, which he was okay with. But I applied it a little bit to his mane, and he started itching loads. I've also tried calendula oil and that's fine.

Dr. Janet Roark:

The owner would like to get his mane to grow back. But I explained that if we could try to get to the root cause of the problem, then the insects won't bother him as much. For now, I did five drops on guard, two drops copaiba in his feed twice a day. He chose these to boost his immune system. I have also introduced spirulina to him. I've heard good things for allergies. At first, he hated it. But now, he's used to the smell and accepts it in his feed. My questions are, have the things I've done so far, correct?" Yeah. So what you're doing is great. Two, should he be given anti-histamine oils as well? If yes, how much of each for how long?

Dr. Janet Roark:

Yes, for sure. I would do. I mean, I would do three to five drops of each for internally, twice a day until he stops to itching. So he can have it long-term. I have people that do that throughout the course of fly season when they have fly bite hypersensitivity. Can you mix the mane tail conditioning serum with just the calendula oil as the carrier. Yes, absolutely. Should he be on a prebiotic and/or aloe vera? Yes, always. Definitely. So yes, I put all animals, pretty much almost all of them on a pre and probiotic and aloe vera.

Dr. Janet Roark:

As far as the itchy mane, sometimes they can get that with different parasites. So if he does have ... It might just be a fly bite hypersensitivity. But he also might have something likely or something like that. So you have to treat for the parasite first. So you're absolutely right about getting to the root cause of the problem first. So you can stop the itching. But if you don't get rid of the parasite, then that's going to still cause more itching until the parasite's gotten rid of. So we have to get rid of the parasite for sure. There's definitely some good things for that.

Dr. Janet Roark:

So I would definitely be using some of our antiparasitic oils topically. Cedarwood is excellent for the skin and coat as well. Lavender. Lemongrass, you have to be careful with because it's strong, Suzanne. It's very strong. If he's got irritated skin, like if he has been scratching himself, and it's open, and he has got oozing sores and things like that can hurt very badly. So I would be really careful with lemongrass. Yeah. Even diluted. It stings. It's very, very strong oil. Consider it like oregano when you're putting using it topically.

Dr. Janet Roark:

Nikki, do you use aloe gel or juice? So topically, you can use either. Topically, you can use either. I tend to use juice if it's in a spray. Internally, I use juice or there's aloe pellets that you can get. So you can have the aloe that's formulated as like feed basically. Like Smart Pack has one. There's several brands. Farm Aloe is a really good brand that I really like that is specifically formulated for horses so that they have pellets. They have like a 60 CC syringe, that preloaded syringe, you can buy. That's the gel and all sorts of good stuff. So really, really good. She's already using OnGuard, Tracy.

Dr. Janet Roark:

So that's good. We really have to address the parasite problem for sure. Then the other thing is just keeping up with the fly spray of some sort to prevent it from happening. But yeah, you can definitely use the Mane & Tail conditioning serum. Use soothing oils, if there's any oozing sores or anything like that until it heals a little bit. Then you can start using some of the stronger oils. Tea tree is not too strong, Suzanne. That's actually a really, really a good one to use in this case. So I would use a combination lavender, tea tree, maybe some Roman chamomile. You can certainly do copaiba topically, frankincense.

Dr. Janet Roark:

Helichrysum would be a good one in this case too as well as myrrh. So those are all good options. You can definitely use cedarwood. Yeah. It's lots of different good options for that, if it's oozing and open sores. Now, if it's not and he's just pulling the hair out, then you can use some of those stronger oils for sure. Peppermint's another really good one, but I use peppermint a lot as a great repelling oil. Horses really like it. So as long as you don't have any open wounds, you can definitely use peppermint. Absolutely. Cypress is pretty good. Let's see. Vetiver is another good one. Yeah. So yeah, but yeah, I would definitely be using tea tree on this one for sure. All right. Good job guys. Okay.

Dr. Janet Roark:

Next is Tracy Simpson. Okay. "Hi everyone. I asked this question in our wonderful Facebook group. They all gave me the correct way to get an animal to throw up, which I think you covered. The lady concerned actually called her vet before I could give her the answers. The vet told her to give her dog OMO, which

is a clothes washing powder in South Africa. Dr. Janet, would this be better or suggested way to get an animal to throw up after eating peanuts and raisins?" No, I would not. I don't know what that is, but if it's a dishwashing powder, I would not give it. That sounds really awful. But peanuts are not toxic to dogs, but raisins are. Okay? Grapes and raisins are toxic. It can cause kidney failure. But with vomiting, what I just recommend 3% hydrogen peroxide. So 3% hydrogen peroxide, which you can just get at any pharmacy. Then they usually vomit with it.

Dr. Janet Roark:

You do like about a teaspoon per five pounds of body weight, but no more than three tablespoons. You're going to give that. Then in about 10 to 15 minutes, they should vomit. They might vomit for like half an hour, 45 minutes, even up to an hour. That's what I would give. Now, you don't want to induce vomiting. Certainly if like the dog is having a seizure, if they are super lethargic or they have swallowed something like glue or sharp objects or anything like that. So make sure you don't do that. Or if that dog has megaesophagus or some other like abdominal problem, then you don't don't want to do that.

Dr. Janet Roark:

But yes, like 3% hydrogen peroxide works like a charm very quickly at that particular dose. If it's been like an hour, and they still haven't vomited, you can try a second dose. If they still haven't vomited, you need to go to the vet. But I don't know what this OMO is. So I certainly wouldn't recommend it. I would not recommend giving clothes washing powder at all. But we might have something totally different than what you guys have. I don't know. Maybe the clothes washing powder is just hydrogen peroxide. If that's the case, then it's totally fine. But I don't know that. All right. Newer comments.

New Speaker:

Then second question. "I have a client with a bearded dragon who hurt his spine. They're trying to get the little guy to poop amongst other things. I suggested Zengest, (DigestZen) diluted and spray out of the hands before handling him. Is there anything else that anybody can think of that will help this little guy out? He's on copaiba, lavender, grapefruit, helichrysum sprayed onto him at the moment. They cannot pat it onto him at the moment. Anything else? Thank you in advance."

Dr. Janet Roark:

I would definitely add frankincense to that. For sure add frankincense to that. But if he's paralyzed, then he's not going to be able to poop. So he might need to go to a vet if he can't because that can cause some problems. But I would definitely add in some frankincense. Anybody else have any other recommendations for this little guy? The digestive oils are going to help. But what I'm worried is that he doesn't have nerve communication to that area of his body, which is what I'm worried about.

Dr. Janet Roark:

Yeah. Oh. Thank you, Audrey. The ingredients of the OMO washing powder. Oh my gosh. I would definitely not give that internally. That's terrible. Okay. No vomiting for glue because it can actually cause more problems. You actually have to go in and surgically remove some of those sometimes, Nancy. Stuff. I would not worry about it with bloat risk. Only if it's an active bloat case, maybe. Like if you know your dog is bloating, then I would not give it. Or if your dog just had abdominal surgery or something like that. Yeah.

Dr. Janet Roark:

Oh yeah. Warm water bath with some oils. That's a really good suggestion actually, Suzanne. Yep. Helichrysum for neurologic, she's already doing that. So warm water bath, warm water bath with maybe some calming oils can sometimes. If he's a little constipated or something like that, can help loosen that up a little. So I really like roman chamomile as a digestive support oil. It's great, great in baths and things like that. So roman chamomile, warm bath. Really good suggestions, Suzanne. Good job. Okay.

Dr. Janet Roark:

Paula. "Hello, Dr. Roark and all my colleagues. I have a new consultation, four and a half year old sterilized dog, mixed breed, 55 pounds. About six months ago, Azura developed red itchy skin between her legs, under her armpits, around her navel. Since four weeks from now, some pimples came out on top of her belly as well. The dog has coprophagia and barks quite loudly to everything that move was around the house.

Dr. Janet Roark:

When left alone, she plays hard with her sibling causing the break of some teeth, biting the fence net to try to escape from the garden. About six months ago, the owner's wife moved in. Azura couldn't stay close anymore to him. As soon as the first child was born last November, the dog was a bit ignored. The issue hasn't caused any problems to the other dogs or cats in the house, but Azura became a bit depressed and developed red skin. I try to keep it short. The grandmother is a doTERRA person, has many oils, sent a picture of Azura's skin to her vet and said it could be anything from fungi to bacteria and so on. The dog isn't on raw, but is on a good food diet. She's healthy overall. I was thinking about one TerraZyme daily. Following the webinar about allergies, I would suggest to give internally one drop each lemon, lavender, peppermint, frankincense, copaiba, add omega-3 and apple cider vinegar. Apply oils topically as well. I love roman chamomile, Arborvitae, and aloe vera. I can do self selection too. I know the healing salve or skin rejuvenating or hotspot would work well for sure. I would love any advice from you. Thanks."

Dr. Janet Roark:

What do you guys think about this one? What do you guys think? Yeah. Diffusing for mental health, for sure. I definitely say do the Arborvitae Ashley says I really like Arborvitae for this dog. Now, a little bit of a red itchy rash. So red is heat. Right? So we want some cooling oils or cooling. Maybe some aloe vera topically is very cooling. I would definitely address gut health for sure, especially since we've got some pimples on the belly. So that to me says probably it's bacterial. So I would probably do some antibacterial oils internally as well or even topically. Yeah. So yep. I really like all these. Then I would add in some probiotics too, Paula. I know you didn't say that, but I know you usually recommend that. So good. We got some suggestions of copaiba, lavender, Melissa, helichrysum topically, digestive oils, DigestZen or Tamer.

Dr. Janet Roark:

Yep. Tracy, Yarrow|Pom. I would not use Yarrow|Pom in this case, Tracy. I know it's sometimes good for allergy cases. Especially if there was broken skin maybe, but yeah. Definitely address the emotions. So I would do some oils for emotions as well. Emotional support oils, feeling abandonment, maybe even some grief. Yeah. The pimples probably are just like a little bacterial infection. Yeah. Okay. Suzanne's got myrrh. I would definitely use myrrh topically on this dog. For sure. For sure. Kathleen, lemongrass could be an option. It probably wouldn't be my first choice. But it could be an option for sure. I like the Arborvitae. I like myrrh. Sarah says helichrysum and vetiver. So other options. Okay. All right. That looks

like the last question that's posted. I'm glad there wasn't like a million and I was way, way behind. Okay. I know we're past an hour, but let me get to Sarah and Janae since they've had their hands raised, and then we'll end it for this week.

Dr. Janet Roark:

Don't forget, tomorrow we have our business Q&A at 4:00 PM central. So if you want to hop on that, it's optional. You don't have to come if you don't want. Oh, Jennifer says geranium for that dog. Yes. A hundred percent geranium. I really like that for this good antifungal and antibacterial. It's very gentle on the skin. So that would be a good topical use for that particular dog for Paula. All right. Janae, why don't you start?

Janae:

I'm sorry. This is kind of a long one.

Dr. Janet Roark:

Okay.

Janae:

Of course. Right?

Dr. Janet Roark:

Try to go quick.

Janae:

I have an eight year old golden retriever that weighs about 85 pounds. Four years ago, he had his vaccinations and became autoimmune. He got a fever, lethargic, platelet count plummeted. They put him on steroids and a low dose chemo pill of Azathioprine 50 milligrams every other day. After two years, they took him off the steroid. But he'll be on that chemo pill forever. She would like to get him off of it if possible. She feeds Darwins and makes her own and from kibble. She gives a senior formula vitamin supplement with glucosamine from Pet Honesty. I'm not sure there's some stuff in there I'm not sure I like. But I just didn't know if there's a way. He's been on that chemo pill for four years now. He's doing good, but I just don't understand. So that's ...

Dr. Janet Roark:

Yeah, I'm not a hundred percent sure why. I mean, has she talked to vet about taking the dog off of it?

Janae:

I think they tried a couple years in. He didn't do good. I don't know exactly what happened. He gets back all that autoimmune problems, like lethargy and fevers and stuff.

Dr. Janet Roark:

I mean, I would follow like an autoimmune protocol. Yeah. We have quite a few. There's definitely been some good ones, even key studies that people have presented. Then yeah, I would get the dog on some oils. Then know if the dog is still doing good, try to wean him off of that. It's not something I would do

just like cold turkey. But see if he could go to decreasing the dose or decreasing the frequency that it's being given and see how the dog does because it's one of those things you can always add it back. If they've tried it before, it's something you can always add back. But I would go back to your ...

Janae:

I also told her to try to do ... She's not given a probiotic. I suggested the TerraZyme and a probiotic, frankincense and copaiba until I knew better.

Dr. Janet Roark:

Yeah. I mean, that's a good place to start.

Janae:

And omega oils.

Dr. Janet Roark:

Yeah. So go back to like your immune system oils, like from level one, the immune system oils and start there. When did you join, Janae? Have you been in-

Janae:

I've been in your group on Facebook, and then I joined your level one in this last fall, early fall.

Dr. Janet Roark:

So did you join level two? Did you see Dr. Z?

Janae:

Yes. Yeah.

Dr. Janet Roark:

Okay. So go back and watch Dr. Z's training. He talked a lot about inflammation and autoimmune. I think he had a lot of really good point that I think you can really implement in this case. So I would do some. Then start there, do some self-selection, see what the dog chooses, and then go from there. But I mean, you just got to try stuff. I mean, there's definitely autoimmune protocols and the membership group and all that sort of thing. But you've just got to try some stuff and see what the dog chooses. Then see how. Then do it for a good two weeks before you start weaning off the medication. Then see how the dog does.

Dr. Janet Roark:

Then this is going to be a long term case that is going to take months and months to figure out. So I don't have an easy, fast answer for you where it's like, "Oh, just add a drop of lavender and everything's going to be fine." Or like Nikki's case, just diffuse some ylang ylang and some cypress, and all of a sudden he'll be hungry again. I wish all of them were that way, like that. They're not. This is a really complicated case. You're just going to have to do it step by step and see how the animal does.

Janae:

Would you do a detox? Because what set it off was having the vaccinations.

Dr. Janet Roark:

For sure. Yeah.

Janae:

At this point after four years, would you still-

Dr. Janet Roark:

A hundred percent like detox. Well, we don't even know what other underlying situations. Is this a lyme dog? There's not enough information to really know exactly what's going on. But yes, support the liver always. So that's what detoxing is, supporting the liver and then kind of going from there.

Janae:

Okay.

Dr. Janet Roark:

Yeah. Okay. Suzanne, that's a question for tomorrow when we talk about business stuff. All right. Nikki, asthma. We talked about asthma. We talked about asthma in week one. The safety week of level one. Go back to that. All right. Janae, I'm sorry. But I'm going to move on. Sarah. Keep us posted on that dog. We'll definitely help you more when we have a little more time.

Janae:

Thank you.

Dr. Janet Roark:

Okay.

Sarah:

I will be very fast. It's my dog. Yesterday she start to have a very bad, bad eye, her color blueish pink. So I went not in Google. I went not in the group. I went in your website. The suggestion with that is immortal and helichrysum. Of course, I have not one and the other. What can I use? Because this evening, I have a vet visit in urgent care because my vet has that service. Next week on Wednesday, I'm already the highest doctor visit. Not to waste time because I know that we need not to waste time when-

Dr. Janet Roark:

What's going on with the eye?

Sarah:

He become a little bit it's blue and pinkish. I went to look at study a lot of picture here and there. What it's look like is keratoconjunctivitis dog. It's what it look like, but I'm not a vet. So I take on my appointment as soon as possible.

Dr. Janet Roark:

Does it look red and irritated and swollen? Okay. So I would do for sure, so we've got inflammation going on. Right? So we would use some anti-inflammatory oils like frankincense or copaiba and lavender in a cold compress. So with red, we want to use cold. That means heat. So we want to use cold compress. So I would do a lavender and frankincense or copaiba, which do some self selections. You can even use like roman chamomile instead of lavender. So do some self selection with the dog, see what they choose. Then just do a couple of drops of each in a like two cups of cold water, dip a wash cloth in there. Hold it over the eye with the eye closed and then hold it there for five minutes. Refresh it to keep your washcloth cold. But that's really, really helpful in those cases. But yeah. Don't mess around with it and keep your vet appointments. Okay?

Sarah:

Yes. Yes. In emergency some hour and immediately they go, "Please can I use the tea made with chamomile to put there? Because I use only the tea for the moment to be sure what substitute. Right. Thank please.

Dr. Janet Roark:

Yes. Perfect. Yeah. Tracy says frankincense. Since you don't have helichrysum, you can do diluted frankincense around the eye socket after you do the compress. So ...

Sarah:

Like one, 2%.

Dr. Janet Roark:

1%. I would just do 1% for the ... Anything around the eye, I go really dilute in case they get some in there. Okay. Kiyoko, I already answered your question. Did you have another question?

Kiyuko:

Yeah. Sorry. One dog.

Dr. Janet Roark:

Okay.

Kiyuko:

I do quick. So the dog, she is a Maltese and three years old and 10 pounds. She has hypothyroidism and also Cushing. I check the protocol on your page, but I'm not sure which I should start from, treating from Cushing or hypo-

Dr. Janet Roark:

Cushing.

Kiyuko:

Cushing.

Dr. Janet Roark:

Yeah. Hypothyroidism, you almost always have to supplement those guys. You have to give a thyroid supplement. But if you treat the Cushing's, you're going to be treating ... If you support the animal for Cushings, don't say treat. I keep making this mistake today, apparently. So don't say treat. If you support the animal for Cushings you're going to be supporting it for hypothyroidism, but not necessarily vice versa. So start with Cushings. Yeah.

Kiyuko:

Okay. All right.

Dr. Janet Roark:

Okay?

Kiyuko:

So how long can I give her Zendocrine and Zendocrine complex?

Dr. Janet Roark:

Forever.

Kiyuko:

One month? Forever.

Dr. Janet Roark:

Well, I mean, I would do it for a while. You could do it for a month and have them recheck numbers, blood work. But I usually like see how they do after about three months because it tends to be another one of those like long term cases, long term diseases. They should be tracking it every three to six months anyways with their vet, get some blood work done support the liver always. Go from there. Cool?

Kiyuko:

Yep. Thank you.

Dr. Janet Roark:

Awesome. All right. Okay. Just a couple more questions in the chat. Steph, I'm tempted to try one of the others too just because it's so time consuming. You're asking about lasers. Steph, unmute and ask me your question.

Steph:

I was just curious about the whole eyes, the laser that you had recommended. I'm used to the class four where you need to cover the animals always in the eyes.

Dr. Janet Roark:

It's like red light therapy. You don't actually need to use the goggles for it because it's so low, which is why I recommend it, it's because it's super, super safe. Now you don't want to do the laser over the eye.

Steph:

Right.

Dr. Janet Roark:

Any bright light like that can be irritating. I have one that I can use over the eye, and it's awesome.

Steph:

Wow.

Dr. Janet Roark:

But you guys can't do that, it's that one.

Steph:

Well, I have a class four, which is technically a vet one too, but ...

Dr. Janet Roark:

I know how did you to get a class four? That's pretty sneaky, Steph.

Steph:

Because I got it donated for the birds technically.

Dr. Janet Roark:

Awesome, awesome. I don't recommend that everybody goes out and get a class four laser.

Steph:

No, no, no.

Dr. Janet Roark:

But yeah. Certainly with the class four, you have to be really careful. Yes, you have to wear eye protection a hundred percent.

Steph:

Yeah, yeah.

Dr. Janet Roark:

With the Photozo, you don't have to adjust it. I think it comes with some. So if you want to, and some owners will insist on it. So that's fine. If they want to wear sunglasses, they can or protective glasses, they can. But I never do with those particular ones. All right. Yes. If you go to, Janae. I don't know. Can somebody post my Amazon affiliate link for the laser? I don't know if I have it right now. Yeah. It's a really good one. I really love it. I rent mine out on occasion to people I trust on a weekly basis. So it's another way to bring in a little bit of income.

Steph:

You rent your Photozo or your other one?

Dr. Janet Roark:

No, my Photozo. No, I don't rent out my laser. Oh my goodness. Okay. Linda. "When you mentioned layering, were you referring to symphony of the cells?" So Symphony of the Cells, aroma touch, the raindrop technique, the drip and rub technique. There's like a bazillion names out there that are all trademarked. All it is layering, guys. It's just when you take one oil, and then you do another oil, and then you do another oil. All of them have like different oils that they like and that sort of thing, Symphony of the Cells, yes, would be a type of layering technique. Sorry, I got a little snarky right there. It's been a long day. I apologize, guys. So I love Symphony of Cells, but it's a lot of oils. It can really overwhelm our small animals. So just keep that in mind.

Dr. Janet Roark:

Make sure you pre dilute them before you use them, if you're going to be layering. Some of the protocols use oils that are not safe for small animals. Don't leave those ones out or you can sub. You can certainly sub, for example, Melissa, for tea tree, you can use Melissa instead of tea tree. Or you can ... I do recommend using the blend balance instead of starting with frankincense although you can do both. I really like starting with balance for my doTERRA people. I love, love, love that oil. Just I'm obsessed with it.

Dr. Janet Roark:

So all that being said, we've gone a little over tonight. So I apologize. But I will see you guys tomorrow. We'll be talking business. Suzanne, bring your question because I'm probably not going to remember it. I will see you guys tomorrow at 4:00. It's just going to be a Q&A. I don't have any guests. So please bring questions so that we can have some good discussion. Again, this is a newer thing, adding in the business side of things. But I'm happy to give you guys my two cents for what it's worth. We can have a little mastermind. All right. Good night, guys. Bye.