

## Level 2 Weekly Meeting February 15, 2022

Dr. Roark:

Hello everyone. I have a cold, so I'm not feeling super great. Sorry. Can you guys hear me, okay?

Stephanie:

Loud and clear.

Dr. Roark:

All right, Stephanie, how's your puppy?

Stephanie:

They went did the whole shebang on her and everything came back clear. They thought it was gastritis and she still hasn't been eating very well. So we actually took her to the vet, our regular vet again today. And she gave us something to coat her stomach in case there's ulcers or something that we're not seeing. And said to just stick with one food and she's doing blood work again. She's not sure if maybe Addison's could be playing a role, but she wants to also eliminate the possibility of us giving her too many options for food. And see if she's not thinking, oh, well, if she doesn't like that, then we'll take it away. She'll get something else, so we're just going to give her something to eat and if she doesn't eat it, then take it away and see if that it kind of fixes things. She doesn't get other food.

Dr. Roark:

Okay. That sounds good. That sounds good. Especially if she's not having other symptoms other than just a decreased appetite, for sure. Okay.

Speaker 3:

How's your baby?

Dr. Roark:

She is still broken. So, my Valentine's poem to my husband went something along the lines of roses are red, Violet is broken. I like your hugs, bring coffee if woken or something like that. And he thought that was pretty funny, but she's good. I actually snuggled with her today because I was just laying in bed for several hours trying to get over this thing. Luckily I didn't start feeling bad until last night. So I made it through all my mentoring and all of my trip to California until I got back. And then of course on Valentine's day started not feeling so great, but that's okay. I do think it's just a little cold because my husband had this about a week ago. So I made him stay away from me because I knew I was traveling, but seven day incubation period for most colds.

Dr. Roark:

And he never tested positive for COVID or anything. So hopefully this is just the worst day of it, since it's my first full day. I'm using lots of oils and herbs and all of that fun stuff, but let's answer some questions. Violet's doing good. She's loving her life of sedation. She hates being kenneled all the time. It's very boring for her little Terrier brain, so she does have to be sedated. She does a lot better when we are diffusing oils. Her favorite right now is a combination of Balance and Serenity. That seems to be doing the trick when the drugs aren't quite enough. And she's been good about not ripping up her bandage too much and tomorrow she's getting another set of x-rays. So hopefully we are on the mend. She's

## Level 2 Weekly Meeting February 15, 2022

being good about not using it too much and not being totally crazy. So I'm hopeful everything will be good. So all right. Let me answer a couple of questions before we have two presentations today.

Dr. Roark:

Yes. Everyone should be allowed to be saying it. I know I don't get sick very often you guys, but when I do it's because I'm doing too much and I need to slow down a little bit. And it's very obvious that, that's what's been happening to me lately. January was my busiest month. I was out in the cold, quite a bit working with horses. And so it just kind of caught up with me. Yes, I'm actually taking Nacpro + as well. So yes, I'm taking Nacpro+ four times a day.

Dr. Roark:

So lots of all of the things. All of the things. I know all about them. All right. Let me answer some questions because we do have a couple posted before our presentation. All right. Margie has our first one. Mr. Bojangles a Bernese Mountain Dog, six years old, 130 pounds. Owner reported dog not eating. Lethargic vet identified there was a mass on the spleen and nodules on the liver. Initial visit results from exam mass on spleen and nodules on liver. I received a copy of the blood work; hematocrit 36.8, red blood cells 19, is a little anemic, Albumin 2.4. Vet reported cytology report came back as cancer, but they don't know what type. Spleen has lots of blood, liver not working well. They said a biopsy of the liver would most likely shorten his life so they don't recommend it for their testing.

Dr. Roark:

Unsure if chemo or other treatments would help. My initial chat with her recommended giving frankincense and copaiba in the food, two drops of each. Instructed on oil selection: frankincense, myrrh, and copaiba. He selected copaiba, wanted to eat the bottle. Could this possibly be not confirmed hemangiosarcoma? Spreads quickly, often not found until later stages. Often in the heart, spleen, vascular blood related internal bleeding. Yeah. I would say this is a hemangiosarcoma until proven otherwise. That's how I would approach this one Margie, for sure, even though it's not confirmed. That's okay. Based on the location and based on the anemia, that's what I would call it. Current state switched from good from kibble to cooked. Making their own food: long grain, white and brown rice, chia seeds, sweet potato, carrot, spinach, dried cranberry and blueberry, cooked bok choy. Eating well, drinking water again, still not as active, but had a good day yesterday.

Dr. Roark:

A little tired today. She's watching the gums. A little pale seemed to be happening more in the evening. Iron deficiency gums are pale thinking about adding seaweed. No vitamins at this time, suggesting VMz or all LLV. Concern of liver metabolizing several oils before I recommend any more internally. What about topically? I'm considering the kill it blend. She currently is doing frankincense and copaiba in the food, two drops each. Adding DDR Prime, when the order comes in, Zendocrine complex capsule, Yunity Turkey Tail mushroom, TerraZyme, and she's diffusing frankincense, copaiba, and lavender. Thoughts? Ketogenic diet? What do you guys think on this one? Margie, are you on? I don't see you.

Margie:

Yes I am.

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

Okay. But yeah, I would definitely consider this hemangio until proven otherwise, especially with the anemia. So I would for sure, for sure add in Yunnan Baiyao for this one and I wouldn't worry too much about the liver metabolizing the oils because that's not going to be an issue with this dog. I tend to be pretty aggressive with these types of cases because they're not even recommending chemo or anything at this point. So Dr. Abby Holtman, a splenectomy. Yeah. Doing a surgery would be ideal, but since it has already spread, I don't know if that's something that is possible or something they're wanting to do. These dogs can do really well even if you just take out the spleen because it kind of could stop the ongoing bleeding. But Yunnan Baiyao for sure. Let's see. Sarah, DDR internally and hepato protecting oils. Tracy Simpson, lemongrass and turmeric. And anybody else?

Margie:

I was staying away from turmeric because of it being such a bleeding nature.

Dr. Roark:

Yeah. I'd probably stay away from turmeric too.

Margie:

And the dog also has some hip issues and stuff like that. So we were looking at Deep Blue Polyphenol or something like that. But they said that there was quite a bit of blood already in the spleen.

Dr. Roark:

Yeah. So Kathleen has a good recommendation. Decrease or eliminate the amounts of starch, which equals sugar. So I'm fine with the homemade food, but I would probably lean towards ketogenic for this dog. Maybe get rid of the starches, the sweet potatoes, the carrots. Stick with the greens, so spinach, the blueberries, that kind of thing is fine. And then primarily meat. I don't know what meat she's giving right now.

Margie:

Chicken.

Dr. Roark:

Okay. That's fine. And then liver, feeding liver. Chicken liver, beef liver is going to be really helpful.

Margie:

What about a supplement? It seemed to be a little deficient in iron. Do you think the Lifelong Vitality Pack would be good or?

Dr. Roark:

It's fine. It doesn't have a ton of iron in it. So feeding liver will help a lot with that.

Margie:

Okay. Okay.

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

So let's see. I know that it's listed in the cancer protocol, but go to KetoPet Sanctuary and they can calculate the keto diet. Yeah, so that's what I recommend in the cancer protocol.

Margie:

Okay.

Dr. Roark:

Which is the KetoPet Sanctuary because they can go in there with whatever foods they have and enter them in to make sure it's complete. And then Darwin's Pet has a cancer diet too, but it's prescription. Let's see. Vanessa says the Pet Wellbeing Mushroom Immune Gold. Not sure if this is commonly used. It can be, but she's already giving the Yunity Turkey Tail, so yeah. Life Gold. Pet Wellbeing Life Gold is also another good one.

Margie:

Okay.

Dr. Roark:

Yep. And so that's what I would do. I would do the full cancer protocol with hemangio, and then throw in some of your helpful blood supporting oils. Yeah. Yunnan Baiyao, already talked about that. So for sure, for sure Yunnan Baiyao I'd just keep him on it at this point until we can get his anemia taken care of. But he's going to have anemia because he's having bleeds and is probably what's happening. And so it's not so much the anemia because of low iron, he just has anemia because he's got internal bleeds probably from these cancers, which is not a really great prognosis. And so I'd be throwing all of the oils at him all the time. Seeing if we can get as good of a quality life as we can, as long as possible. I would definitely talk to a veterinary oncologist to see if chemo or surgery would be an option for this particular animal being that he's only six years old. But without seeing the scans or anything like that, I can't really speculate on that one. All right?

Margie:

All right. Thank you.

Dr. Roark:

Yeah. Good luck on that one.

Margie:

Yeah.

Dr. Roark:

Heading down the right direction for sure. And then I for sure would do A vitamins. So you can do the VMz's or the new vitamins. That's what I usually do just to have a complete vitamin. Bonnie, I've inherited my mom's dog and she has terrible periodontal disease. She's a Toy Poodle between 10 and 14. No one seems to know how old she is. Four years ago, the vet pulled six teeth. She lost a tooth last year. We just went to the vet who showed me her gums. They're horrible and she's ready to lose two more teeth. What can I put on her gums to help heal them? Is it too late for these two teeth? Or it is too late for these two teeth, but I would like to preserve what she has left and keep her from too much pain.

## Level 2 Weekly Meeting February 15, 2022

Dr. Roark:

Yep. So I just use myrrh. Myrrh in the mouth on a regular basis, but I would for sure get the dental done and take those two teeth out because they're only going to cause pain. So I would definitely just do myrrh. Oh yeah, Christine's recommending IV vitamin C, which is another option for you, Margie, for your dog, your patient. All right. Carrie Purcell has two questions and we only have two minutes. Well, let's just start and we'll see where we get. Two questions. One's about a 10 year old male cat fixed that's diagnosed with saddle thrombus. Right side leg was paralyzed and he did regain feeling and seems to be going through that process okay at the moment.

Dr. Roark:

The owner's aware of the poor prognosis of this and the cat was slated for euthanasia. However, she's having a hard time putting him to sleep when he's regaining interest in the world again and trying to walk. She wants to know how she can support him naturally with oils. So far, I've worked energetically with him and began applying frankincense over the site because that's an oil she has at the moment. She doesn't have many of the oils, but we'll get them. I'm suggesting helichrysum, frankincense, and copaiba over the clot area. He does have a heart murmur. So for that cypress, marjoram, helichrysum, spikenard if available, and copaiba. Also, recommended a heart support supplement, not sure if we should be looking for something for an anticoagulant and what your thoughts are about adding something for that.

Dr. Roark:

Would he need vet supervision if we go that route? Also, being a cat, do you think we should add anything orally? Not sure if he's going to be in the mood for grooming anytime soon, I would like to show her some acupressure massage over points that can help, but I'm not sure if that's appropriate so close to the event. Happened February 2nd, I believe. Anything else I should be aware of to support him in the short term? So what do you guys think about this one? Do you dilute the myrrh? Yes, I do dilute myrrh for oral application just because it's so strong and so bitter. Ylang Ylang and Yarrow Pom really good options for this cat, Carrie, for sure. That's from Heidi. I like those. Anything else? I think you could definitely do acupressure. It's dangerous having a clot because if the clot comes loose, who knows where it's going to go.

Dr. Roark:

So, that would be of course just make her aware of that, but I would definitely continue with oils. And if he's improving, sometimes cats can get over that. So I would do some acupuncture as well, but you can do acupressure for sure. And I wouldn't hesitate to do it if the other option is having this cat euthanized. So like I said, I'll throw everything at them if I'm like, oh, our option is do as much as we can or euthanasia. I will do as much as I can and I would not hesitate. Would not hesitate to do all of the things, so I like that.

Dr. Roark:

I would add geranium probably in with this cat just to make sure, help support the cardiovascular system a little bit. I like the addition of Yarrow Pom. Anybody else? I like helichrysum, all the ones that you suggested Carrie are right on. Right on. Spot on. Jennifer says, "Stronger maybe on the ear tips." And I wouldn't worry about anything internally because if he's getting it topically, he's getting it systemically. So I wouldn't worry too much about that too much. All right. Well, we are past our 5:15 start, so I'm going to stop my screen share and we're going to pass the mic over to Kathy Rountree.

## Level 2 Weekly Meeting February 15, 2022

Kathy Rountree:

Hello?

Dr. Roark:

Hi Kathy. For her presentation. All right, Kathy, go ahead. Take it away.

Kathy Rountree:

All right. Gosh, I made this small and now I can't see where the screen share is. Let me find it again. Share screen, right. Oh goodness. Sorry guys. Just when I think I have it all done, it says I have to \_\_\_ and give it that access. Sorry. Don't know why I have this problem. Anybody know how to allow screen sharing on a Mac?

Stephanie:

There's a green button down at the bottom.

Kathy Rountree:

Of what?

Stephanie:

Of a Mac, right? If you're in the Zoom, there should be a green button down in the middle of the screen on your Zoom that says screen share.

Kathy Rountree:

Then I go to desktop.

Dr. Roark:

And then share your screen, the desktop and then click share again.

Kathy Rountree:

It says, "Allow Zoom to share your screen." Okay. And then it says, "Open system preference."

Stephanie:

Okay. So you had the problem that I had last time.

Kathy Rountree:

Security and privacy. The grant access. Hold on, sorry guys.

Dr. Roark:

Yeah. So you have to go to your computer settings and allow it.

Kathy Rountree:

Okay, I'm in privacy. I'm not seeing share screen here. Stephanie, do you remember which one it was? I'm in privacy.

## Level 2 Weekly Meeting February 15, 2022

Stephanie:

I'm looking in right now.

Kathy Rountree:

And I don't see. I see camera, microphone input monitoring. No.

Dr. Roark:

So the other place you can look is on Zoom. If you click the little arrow next to where it says stop video. Click the little arrow and then under settings, there's a share screen button. And then you might be able to click some of those things as well. I don't have a Mac, so I can't be very helpful on this one.

Kathy Rountree:

Sorry.

Speaker 6:

I thought it was in the advanced preferences.

Kathy Rountree:

Oh gosh. Yeah. It's still not. Advanced preferences in the Zoom?

Speaker 6:

Yes.

Speaker 7:

Do you have the green button at the bottom that says share screen?

Stephanie:

Yeah, but it's wanting her computer to give access to share the screen.

Kathy Rountree:

Yeah, that's my problem. It's the computer that's not allowing me. Gosh, darn it guys. I'm so sorry.

Stephanie:

When you're in privacy it says, "Allow apps and services below to determine." Make sure that Zoom, the little Zoom icon is in one of those.

Kathy Rountree:

Zoom apps.

Michelle:

Are you in system preferences?

Kathy Rountree:

## Level 2 Weekly Meeting February 15, 2022

I am now.

Michelle:

If you scroll down, you got the on the privacy. You scroll down, you see screen recording. You hit that and you should see the Zoom icon.

Kathy Rountree:

Ah, thank you. I'm trying that. But I see it, but it's not allowing me to add it. Goodness. Now it's asking you for my password. Okay. Now let me try it. Look at that. Thank you whoever gave me that.

Michelle:

That was Michelle. That's no problem.

Kathy Rountree:

Thank you, Michelle. Okay. Can y'all see my screen?

Stephanie:

Yeah. Now we're good.

Michelle:

Yes, we see it.

Kathy Rountree:

So I apologize again. That took how long? A long time. All right.

Dr. Roark:

It was actually less than five minutes, so no worries. It just seems like a long-

Kathy Rountree:

It felt like forever to me. So yeah. And I'm like, sorry for putting y'all through that.

Dr. Roark:

You're good. You're good.

Kathy Rountree:

Okay. Let me go to that. All right. I'm Kathy Rountree. Y'all figured that out watching me stumble through that. And this is my case study, obviously. Oh goodness. All right, there we go. Today's case study is on Lennon, and Lennon is a male dog, three and a half year old and he's 122 pounds. He's a Great Pyrenees Anatolian Shepherd Mix. He's super cute.

Kathy Rountree:

Lennon's family originally contacted me for a consult because in November they had just moved to Santa Fe, New Mexico and he had been suffering just then, just started suffering from allergies. So

## Level 2 Weekly Meeting February 15, 2022

itchiness, runny nose, runny eyes, aggressively chewing and gnawing on his legs and his paws. Lennon also has a history of valley fever, which was diagnosed in December of 2020. And more about that to come. He was also experiencing low energy and appetite. He also had frequent episodes of vomiting. All of that typically happens first thing in the morning. Because of his valley fever, he also has occasional dragging of his back foot and occasionally falling. That's generally after they've worked him pretty hard and he's gone on a four and a half mile plus hike. Just a note that he had just received his annual vaccinations. They were doing a diet change and they moved all within those two week period of when his allergies became, so a lot going on.

Kathy Rountree:

Lennon's valley fever history. And he was diagnosed, as I said, in December 2020. He had a very severe infection. He was very lethargic, he was incontinent, and then he had also lost mobility of his hind quarters. Earlier in that year, his owner had also noticed that he no longer played with his toys like he used to. So he didn't shake his neck and shake them as much, so she thinks it probably started in earlier 2020. At the time that he was checked, she took him in. His fungal titers, Dr. Roark I don't know how to say this, positive one 16th, which I believe is pretty high. And he was put on Itraconazole.

Kathy Rountree:

Please forgive my pronunciation of things. 300 milligrams in the morning and 200 milligrams in the PM. She also consulted with Dr. Roark in January of 2020. And Dr. Roark, you had recommended two DDR Prime soft or DDR Prime soft gels, two to three times daily. One to two drops of OnGuard, Oregano, and Melissa, every 12 hours alternating with the DDR Prime. This protocol she followed for about 30 days. And that's when he showed significant improvement. Lennon also had extensive therapy and acupuncture to get his mobility back, and mostly recovered by about April 2020. In June, she had his titers taken again, this time it had reduced. And also keep in mind here too, this family travels a lot. They've moved all over the country. So Lennon is going to a different vet every time he's seen.

Kathy Rountree:

So this vet continued the therapy that he currently taking and said, no, he didn't recommend taking him off the antifungal therapy unless the titers were negative and remained so for six to 12 months. So here we are about a year later. She just did his bloodwork again and it's definitely continuing to come down. So he is now at a positive one fourth. This vet who's in Santa Fe said, "Continue the Itraconazole, but reduce it from 400 milligrams or 500 milligrams to 400 milligrams to help alleviate liver and cholesterol values, which are currently a little bit elevated. The vet also suggested Decameron supplement for liver support and may need to take the Itraconazole for life.

Kathy Rountree:

This is just his most recent bloodwork, so looking at calcium here indicating low. And I think, but most importantly, the vet was concerned a little bit about the liver and cholesterol. Do you need a second here to look at this or can I go on? All right, moving on. So I've done all the meetings with Lennon and his mom over Zoom, and we did do self selection over Zoom, and it was with some of the oils that she did have on hand at that time. But he had a very positive response with frankincense and copaiba, and then more of neutral with lavender, peppermint, Aroma Touch, and Balance, but didn't have... Definitely not negative. And then a more negative response with lemon. I didn't see the negative response, so I'm not sure exactly what he did. Lennon's diet at the time, this was in November. She was in the process of switching from Raw Instincts Salmon Food, and at the vet's recommendation due to high mercury and

## Level 2 Weekly Meeting February 15, 2022

fat content, they recommended her changing. So she was changing to the Taste of the Wild grain free food.

Kathy Rountree:

At that time, due to the onset of his allergies, I suggest she back off on changing his food until we kind of figure out what's causing the allergies, if we can figure out what's causing them. So fast forward to today, I've met with her three times now. So fast forward today and what he's currently doing is taking two TerraZyme. Remember he is 122 pounds, so he is a big guy. He's taking two caplets or one caplet of TerraZyme with each meal. He was taking the Grizzly Salmon Oil. She just started that back in January. And when she started that she noticed that he started shaking his head a lot. So we're taking him back off of it, and then she's trying the IQ Mega today, which kind of surprised me because his diet is mostly salmon diet. But anyway, we seem to think that the Grizzly Salmon Oil may have contributed that. Greek yogurt for his probiotics and he loves it.

Kathy Rountree:

It's like a treat to him. And then just recently in January, we had begun the slow introduction of Taste of the Wild food back into his diet with no issues. The owner is reluctant to use raw diet just because of his size and the cost. For essential oils we added frankincense and copaiba. Two drops of each with each meal for ongoing support. For his allergies, he's getting a TriEase soft gel, one caplet with each meal. And then for his hind leg, or hind quarter weakness, we're using AromaTouch massage regularly and especially after long hikes. And then he does have still occasional vomiting. It's always in the morning, so I did recommend or tell her she could rub DigestZen on his belly.

Kathy Rountree:

So the results and observations are his appetite and energy levels are high again. She says that he gallops through the house now and he's playing, and he is generally a happy dog and full of vitality. The allergies are almost nonexistent. There are times where she'll see and where he has a little runny eye and stuff like that, so she is treating that, woops, sorry about that, as well. But overall, she said that the TriEase, it helped almost immediately with his allergies. The valley fever titers are down significantly from his onset, but the liver's now slightly elevated in high cholesterol and calcium is a bit low. The owner did determine that the vomiting occurred after they gave him salmon skin after they had salmon for dinner. So they've quit giving him salmon skin. The vomiting is much less, but it does still happen on occasion.

Kathy Rountree:

One of the other things that I noticed is she was feeding him kind of at not real regular times. Sometimes it'd be first thing in the morning. Sometimes it'd be almost 11 o'clock. So, because he is vomiting in the morning, I also suggested getting him on a schedule for his feeding. The additional recommendations that she's not currently doing, but I'm going to suggest is Milk Thistle to support his liver. And then I'm looking to add DDR Prime back in. She hasn't had DDR Prime, but I'd like her to add a DDR Prime capsule back in or four drops with each meal, that's the equivalent of a capsule. His titers are still high, so to support that and continue to hopefully bring those down and maybe they are non-existent. And then also acupuncture to support hind limb weakness. And I've given her actually based on Dr. Abby's recommendation, acupuncture that in her area.

Kathy Rountree:

## Level 2 Weekly Meeting February 15, 2022

My reflections on this is I expect that all the dietary changes and the continued oil therapy continue to improve his valley fever and hopeful that his Itraconazole may no longer be needed at some point. I'm sure that's going to depend on a lot of factors. At the time that I got this case, I had not even heard of valley fever. So I had to do a lot of research in it to begin with, to kind of understand better what I was dealing with. And then it was really nice working with a client that already had oils. She loves oils, and she had had such success when Dr. Roark worked with her earlier. So she was very willing and ready to do pretty much what we were recommending. And then, although I would've preferred to visit with Lennon in person, the Zoom calls still allow me to talk with the client and observe their self-selection, which is kind of cool. I've got clients actually getting on the floor with their pets and it's working well. So anyway, that is my reflections and that is my presentation.

Dr. Roark:

Awesome. Awesome. Great job, Kathy. Great recommendations. Continuing ongoing support. I love that. I definitely would keep up with the DDR Prime. I don't know why she stopped it. I would just keep him on that all the time until we get free of that valley fever. So, all right...

Kathy Rountree:

I do have a question. You also have done OnGuard. Would that be ongoing as well, or is DDR Prime-

Dr. Roark:

I would just stick with the DDR since it's going well. I mean, it's got a lot of similar overlapping oils in it that are also really good for it. And especially since he's just still got that little bit of neuro stuff going on, I like the DDR a little bit better with the antioxidant support. Suzanne does recommend something that I would recommend, which is you could do 10 to 20% raw if possible with kibbles. You don't have to do raw, but doing that 20% whole food topper when giving a kibble, even if it's cooked would be really awesome. And if she's giving a salmon based protein, because he's shown some issues with salmon, obviously in the past and because it is so high fat.

Dr. Roark:

And with liver and high cholesterol that he's got going on right now, we might want to decrease the amount of fat he's given. Maybe switch to a poultry based protein or something like that. That would be a little bit less if they're giving a salmon based kibble right now. So that would be something that I noticed that I was like, yeah, the vomiting might be a little bit of sad pancreas. I'm not going to call it pancreatitis, because I don't think that's what it is, but it might be a little sad pancreas with the amount of high fat that they're giving this dog. So maybe a lower fat kind of moderate fat. Still high protein is still good, so I think that would be my biggest suggestion there. Anything else?

Dr. Roark:

Yeah. Lisa says, "Sometimes they vomit in the morning if their belly is too empty. Regular feeding helps this." So another question to ask them is what time do they feed at night? And then what time do they feed in the morning? A lot of times people feed eight o'clock in the morning and then five o'clock at night. And so they end up going longer overnight and that can lead to a little bit of acid buildup in the morning that can cause a little digestive upset in the mornings. So feeding a little snack right before bed or a little snack first thing in the morning before they actually get going, can sometimes help with that early morning nausea.

## Level 2 Weekly Meeting February 15, 2022

Kathy Rountree:

Perfect. Yeah. We tried to adjust his eating schedule and I think it did help a little, but that's a good idea too.

Dr. Roark:

All right. Yeah. CME for liver protection or I really like just straight Milk Thistle. And I think higher amounts of Milk Thistle for him is probably going to be really helpful.

Speaker 9:

What is Decameron that she mentioned they were giving him for the liver? What is that?

Dr. Roark:

I think that's probably a Milk Thistle supplement. It's probably just a brand name. I don't actually know it off the top of my head.

Speaker 9:

Okay. Thanks. I thought it was a different drug.

Dr. Roark:

Yeah. I can look it up real quick. Yeah. I'm not 100% sure. So, all right. We do need to switch over to our next presentation with is Tomoyo. Ms. Tomoyo, are you ready?

Tomoyo:

Hi. I'm ready.

Dr. Roark:

You're ready? Awesome. Take it away my friend.

Tomoyo:

Thank you. Can everyone hear me?

Stephanie:

Yes.

Tomoyo:

Hello. Oh, thank you. So, hello. My name is Tomoyo from Japan. Excuse me. My English. This is a case study; unexplained drooping of the head and chronic rhinitis. Please don't share the pictures that you will see in this presentation. For this case study, I examine his name is Pitch. Canine, 11 years old, neutered male, Toy Poodle, seven pounds indoor dog. There are no other dogs or a cat in the house but him. His diet consists of regular dry food mixed with vegetables, such as tomato or carrot. He doesn't take any supplements. In terms of his medical history from 2013 to 2021, the first recorded event was when he collapsed for the first time in 2013. He was three years old, since then he had seizures up to three times a year until 2018. His consciousness was normal during seizures, but his legs were rigid.

## Level 2 Weekly Meeting February 15, 2022

Tomoyo:

In 2019, at the age of nine, he had a major seizure, fell unconscious and was taken into critical care and luckily survived. After that no seizures, but neck started to drop gradually nose to the floor. In 2021, his head had kept dropping and start new symptoms of yellow nasal discharge starting May of 2021. Due to the highly viscous nasal discharge, his nose was blocked by the mucus and he was breathing from his mouth, sometimes causing cyanosis. He would wake up several times during the night. The family vet experimented with different antibiotics and changing the medicine every second week but to no effect. August 26th, 2021, he took MRI and blood test at a university hospital to determine the cause of dropping neck and nasal discharge. There were no significant findings in the spine, spinal cord, nerves, teeth or nasal structure, and no major problems with the blood test too.

Tomoyo:

He was prescribed Pregabalin for two weeks for nerve pain, just in case. On September 21st, 2021 since the symptoms didn't improve, endoscopic nasal lavage and biopsy of the nasal mucosa were performed at the university hospital. The nasal mucosa was red and swollen, but no tumor or foreign substances were found in the nasal cavity. Also, there were no major problems found in the larynx, but the soft palate was long. I didn't know how to say in English. Biopsy showed some inflammatory cells, therefore, steroid nasal spray was prescribed. Two days after the examination on September 23rd, 2021 reverse sneezing started probably due to endoscopy. The reverse sneezing occurred several times a day and sometimes without it again in cyanosis. The nasal cavity was now subject to even higher mucus. Oh, sorry. Mucus discharge and blockage.

Tomoyo:

The veterinarian diagnosed the dog, his neck droops of unknown cause and chronic allergic rhinitis. Conditions that the owner is most concerned with is there's no improvement with medication or hospital treatment. His long soft palate causes cyanosis due to reverse sneezing and runny nose. This happens several times a day and several times during the night. The first consultation was on September 24th, 2021. This is the condition of the neck on this day. Other physical examinations showed no major abnormalities as you can see here, but his breathing was slow. There was a constant nasal discharge sound due to congestion. The following are oils I recommended. I'm using doTERRA oils. Since the nasal discharge was yellow I gathered oils with strong antibacterial properties. I also include some oil that work against allergies and help with breathing.

Tomoyo:

Self-selection. Because of the blockage he didn't react well to the smell of the oils. And, therefore, the first choice of the oils were not made at this stage. The first oils we tried were frankincense, lavender, copaiba, lemon, and cardamon. Frankincense and copaiba were diluted to 2% and applied to the neck and back twice a day. We also use aroma diffuser to diffuse one drop of each cardamon, lavender, lemon, and copaiba intermediately for six hours. His reaction showed that he was more relaxed than usual. We made a follow up appointment for a week later. The mucus substance changed from yellow to clear color and the frequency of discharge had decreased from about six to once or twice a day. He was also waking up less often during the night.

Tomoyo:

The next follow up was on October 10th. The reverse sneezing had not yet gone away, so peppermint was added to his therapy, but his breathing speed increased as a result. We changed the peppermint oil

## Level 2 Weekly Meeting February 15, 2022

to arborvitae oil at the next follow up on October 20th. The arborvitae was very effective and the reverse sneezing stopped the same day and never came back. Recently, the diffuser was implemented in his treatment once every two days. No reoccurrence has been observed. My recommendation is diffuse at least six hours daily. Select four drops of oil, always including arborvitae. Massage with the recommended oils behind the neck and ears twice a day; 2% of diluted frankincense and copaiba. If the nasal discharge turns back to yellow increase the arborvitae or lemon.

Tomoyo:

Reflection. What went well was the reverse sneezing has completely disappeared and breathing is back to normal. The frequency of bacterial nasal discharge, which is the yellow one, has decreased. Exposure to debris and pathogens from the ground has been reduced due to the improvement seen in the neck dropping. Pitch now socializes more frequently with other dogs on walks. What did not go well was if he consciously raised his head, it would go up for a few minutes, but his head never fully rises back to normal position. Knowing what I know now, what I would do differently if I could, I would've strongly recommended supplying copaiba internally, although the owner was hesitant of the process. I learned that the right oils vary from individual to individual and from symptom to symptom. Not to give up and keep looking for the right treatment. Also, that peppermint is good for allergies, but if they have a breathing problem, it had adverse effect to the breathing. Recent result in January, not always but he is able to lift his head and see his friends' faces on walks. He looks very happy. Thank you very much. That's it.

Dr. Roark:

Awesome job, Tomoyo. Very, very good.

Tomoyo:

Thank you.

Dr. Roark:

Very good. And you are really able to help this little dog. Your English is amazing by the way. So very well done.

Tomoyo:

Thank you so much.

Dr. Roark:

Long soft palate, it just means elongated. Elongated is the English word for that, for the soft palate. And I'm wondering if he's lowering his head because it's easier for him to breathe that way. And now that he's breathing better, that's why he's raising his head and it's less of a pain issue, especially since it's just a really interesting case and I'm hoping we can get him to keep his head up more often. It's just really interesting. Any other questions or comments? Yeah. Suzanne has what I was thinking, doing an AromaTouch massage on the neck, in addition to the frankincense and copaiba. So, some of those oils like marjoram, cypress, those help with circulation and that sort of thing. And you might just need to rebuild the muscle there because he's been hanging his head down for so long. It might need a little physical therapy as far as that goes.

## Level 2 Weekly Meeting February 15, 2022

Dr. Roark:

So some stretching exercises with treats and things like that might be helpful to talk to the owner about as well to support those neck muscles a little bit more since he's been hanging his head for so, so long. The other thing that I just want everyone to take away from this case, and Tomoyo observed it very well and corrected it very quickly was that he was still having some problems. So she added peppermint, which is usually one we can use for respiratory support. And one we recommend very often, but this particular dog did not respond well to peppermint. His respiratory rate increased and you'll see this a lot in dogs that do get cyanotic like that. They just have trouble breathing and you add a strong oil like peppermint and it makes them worse almost. And so she very quickly made the change to arborvitae and was able to immediately... That dog really responded to that particular oil, which is when we don't always think about for respiratory support right away, right? But it is really, really good for that.

Dr. Roark:

Any of the tree oils can be very good for respiratory support. So really, really good observation that I want everyone to take away from. Don't just stick with peppermint just because we know it's good for respiratory. There are some cases and especially if an animal has asthma has trouble breathing. Those types of animal can actually struggle with peppermint, which is why I always kind of put it on my use with caution list. You'll see it on my use with caution list a lot. It's great for a lot of animals, but in cases like this, it can actually be not good. And Tomoyo did exactly what she was supposed to do and switched the oil and the oil she switched to happened to be kind of that magic oil that, that dog did really, really well with.

Dr. Roark:

So yeah, Veronica, she talked about self selection because this dog couldn't breathe very well. He was not very obvious with his self selection. So they just kind of went with the oils that they knew would help him. He did not give any response. He was very neutral to everything and you'll find that. Like right now I can't smell very good and so I'm not going to give you a good response, right? Because I have some congestion going on. So she did do self selection, but it was not super responsive. And so it would be interesting, Tomoyo if you could do self selection now that he's breathing better to see if he gives you a different response with different oils. I would be curious about that.

Tomoyo:

Thank you. I will try.

Dr. Roark:

Yeah. And then Christie talks about chiropractic for the neck, any structural issues, that sort of thing. So chiro or acupuncture would be a good option, stretching. I really like stretching massage, acupressure for that sort of thing. So really, really good. And of course the frankincense and copaiba we know are helping him, but I would probably add in a few more of those musculoskeletal support oils, like marjoram, cypress, AromaTouch those ones as well. Yeah. Good, good, good. Very good. Excellent work.

Tomoyo:

Thank you very much.

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

Let's go back to, let me try to share my screen again. All right. Where did it go? I have too many things open guys. Where did it go? There we go. All right. So the second question from Carrie Purcell was about a rabbit. It has tooth rot and bone decay around the tooth. The owner's leery about putting the rabbit under, but her vet wants to pull the tooth. She was using oils to help with the initial infection, but then had to leave the country for work for three months and her husband did not use the oils while she was gone. They used peroxide mixed with propolis to clean it out when she got back. She wants to know if it's realistic to assume there's anything holistic that can save the tooth and regenerate the bone, which is why she reached out to me regarding oil support. I said, "Not that I know of," but wanted to check. On the other side of that, she's afraid of her rabbit not waking up from anesthesia. Is there anything she can diffuse leading up to surgery?

Dr. Roark:

My thoughts were frankincense since it's gentle, but addresses support of many systems. So I would try myrrh on this rabbit. I would try myrrh for a week and see if there's any difference on that tooth diluted to 2% probably, and see if there's a difference. And then if that tooth needs to be pulled, it needs to be pulled though. And the infection's not going to go away without, so doing myrrh and even OnGuard or one of those oils. I like myrrh and OnGuard together. Actually could really help, especially if there's still an infection going on. So I would definitely do those for this particular bunny. And yes, as far as leading up to anesthesia, frankincense, copaiba or lavender are great options. If it's a veterinarian that's well versed in rabbit anesthesia, it is a pretty big risk. It's a bigger risk, I would say with rabbits than it is with some other species. Same thing with sheep. Putting sheep under anesthesia, they all just seem to die. It's pretty crazy. So at least back when I was doing a lot of that in vet school.

Dr. Roark:

A lot has improved in the last 20 years though, as far as that stuff goes, but I do understand her concern. And so, I would definitely recommend trying some oils, but if it is really, really bad, she does need to get that pulled and that scraped out and cleaned out so that it doesn't spread. It doesn't continue to spread. So, I would try it for a week while she kind of decides if that's the way she wants to go. So I would just diffuse, Victoria. So how do you apply pre anesthesia oils? They aren't for pre anesthetic, it's just overall system support. And I would just do diffusion for a bunny, but I mean, certainly you could do it topically as well, but I just would diffuse. I don't want anything to interact with the anesthesia, so I would probably stop it a few hours before she takes them in. Is the rabbit old? I don't know. She didn't say. I don't know if Carrie's on here. It doesn't say.

Dr. Roark:

All right. That is all the questions that are posted. Does anyone have any questions in here that are live? We're at six o'clock right now. So I'm fine with ending. Evelyn, go ahead.

Evelyn:

Hi everyone. Dr. Roark, I'm sorry. I have to... I just saw a client yesterday with a little Yorkshire Terrier. Lovely little thing. It's a work doggy, supposed to look after her mom who's got mild Alzheimer's and she herself is a sufferer of anxiety induced epilepsy. Her mom was placed into frail care about two years ago. Well, not frail care, more like an old age home and with the COVID, she took her mom back home so that she could be with her mom. And then after COVID her mom went back. Now here's the thing. The dog is six years old, but it started with a breathing issue about four years ago. With wheezing, struggling to breathe, gasps for air.

## Level 2 Weekly Meeting February 15, 2022

Evelyn:

But she picked it up while the dog was playing. But since she retired, she realized this is an ongoing problem and not just a seasonal problem. So she took the dog to the vet and the first vet gave no diagnosis. The blood works, everything said the dog's fine. And last year with the regular checkups and everything that the blood works and everything, again, nothing wrong with the dog, but the dog very obviously gasps for air. What she would like to know is, is there any way to politely ask a vet to do certain types of tests or to make suggestions for certain tests?

Dr. Roark:

Yeah. Just say, "Well, I'm really concerned about the way my dog breathes. Is there any way we can maybe get some x-rays or is there a respiratory specialist you could refer me to. I really do want to pursue this further." That's what I would ask. And most veterinarians would be happy to refer you. Usually, if you take the dog to a university hospital, they have everybody, all the specialists there. So a lot of specialty hospitals will have people who specialize in cardio and respiratory support as well, so...

Evelyn:

Okay. Then the other question that I have is in terms of a steam vaporizer, I don't know why, but I sort of feel she's using it in her house and she's an art teacher. So it's a very cluttered house. I'm wondering if that could not also be an underlying problem here.

Dr. Roark:

It depends on what she's putting in it. Steam in and of itself is not bad, but if she's using a lot of camphor or something like that, the chemical things that you put in some of those are really not very good for dogs at all. Especially little bitty ones like that. So, absolutely. And if she has a lot of paints and things around, if she's an art teacher that in and of itself have a lot of vapors and things like that, that can definitely irritate the lung mucosa, the respiratory mucosa in general. So yes, I do absolutely agree with you on that, but there's a lot of oils that can help too. So, just starting with something gentle, like cardamom, diffusing cardamom and seeing if it makes a difference can be really helpful.

Dr. Roark:

When they gasp like that or wheeze and especially if they first noticed it when the dog was playing, that kind of makes me want to lean towards maybe its asthma, as opposed to something else that's going on. And of course with asthma, we talked about that in level one, we talked about, well, anything can trigger asthma. Any respiratory irritants can trigger it. And certainly high exertion can cause that as well. It being a Yorkie, I would also be concerned about heart problems, which can look like respiratory problems, coughing, things like that. It's just really common in that particular breed. And they go hand in hand, heart and respiratory systems are sister systems, so they go hand in hand for sure. So, all right?

Evelyn:

Okay. One more question.

Dr. Roark:

Okay.

Evelyn:

## Level 2 Weekly Meeting February 15, 2022

In terms of raw feeding, okay. I also feed raw, but I prefer things like ostrich, venison, beef, chicken, duck, those types of meats. What's your opinion on raw pork seeing as there's lots of controversy regarding that?

Dr. Roark:

It's controversial and so I'm like, just cook it a little. In the US we really don't have trichinosis really here. Most of the pork here is farm raised very, very sterile raised in the United States. So it's not something I'm super concerned about, like I would be more concerned about with wild hogs, that sort of thing. But if someone's concerned about it, I'm just like just gently cook it. It's going to kill whatever it is in there. And cooked food is not bad either. Raw is great, but some animals do actually do better with cooked food, as long as it's a whole food. That's the big thing that is the most important thing. But I prefer it a little gently cooked. That's how I do it.

Dr. Roark:

So I'm not a huge fan of pork as a protein source in general, just because there's so many other great ones out there, like all the ones that you just listed: venison, duck, beef, all of that sort of thing. Even chicken and turkey I prefer over pork just because all of those meats have healing properties of some sort, whereas pork is a little bit of an inflammatory food in general. So I don't know. I could go off for a while talking about nutrition, but I'll move on to the next question.

Evelyn:

Thank you, Dr. Roark.

Dr. Roark:

Yeah. Dr. Holtman.

Dr. Holtman:

I have a case. I have a patient named Bode. He's an 11 year old male neutered Lab. I started seeing him in November because he has a supraspinatus tendon injury. So one of his major tendons in his left shoulder has been a problem. I think he injured it initially in March of last year. And they did a lot of imaging at that point to get the diagnosis. So right now he's on Cosequin and fish oil. We started copaiba capsules form in Deep Blue capsules. I also have him on Boswellia, Ligaplex, Gotu Kola Complex and Calcifood wafers from Standard Process.

Dr. Holtman:

And we did some mild muscle formulas since he's got so much muscle loss in that leg. I'm also doing acupuncture for him, laser therapy, and we're doing some oils, topically. We did a blend of copaiba, turmeric, and frankincense. I'm doing some E-stim for him as well. He's just the best patient ever. Whatever you want to do, he will do it. But we were getting better end of December, beginning of January. And now he's starting to get worse again, as far as his lameness goes. And I don't know. I'm just wondering if I'm missing something or if you have any other suggestions or anybody else does of anything else I could add for him.

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

Yeah. Heidi says, "AromaTouch massages." So with the topical application, I would definitely focus on your musculoskeletal oils and circulatory support oils. So things like cypress, marjoram, which are in AromaTouch, which is why I like that blend a lot. But adding that in instead of just doing the anti-inflammatory oils would be super helpful. How often are you doing E-stim with him?

Dr. Holtman:

Right now I'm seeing him once a week.

Dr. Roark:

Okay.

Dr. Holtman:

So, once a week we do it.

Dr. Roark:

Are you doing E-stim every week?

Dr. Holtman:

I was for a while and then we stopped because he didn't seem to be as painful, but then we... About two, three weeks ago.

Dr. Roark:

Yeah. So E-stim, I like doing E-stim every other week if you're seeing him weekly because doing it too much can actually do the opposite effect of what we're wanting just with E-stim in general. And then maybe alternating laser or something like that instead would be something really good. And then making sure that the owners are massaging in between sessions and doing range of motion, physical therapy, that kind of thing with it as well. Stretches that sort of thing. Yeah. Suzanne says, "Oils and massage three times a day topically." Yeah, well at least twice a day. At least twice a day topically, but I think you're on target with the oils and things like that and really even everything else. The supplements and everything sound really good, it's just I think sometimes we can overdo it with E-stim so that's why I asked about that. Especially with these cases and then just choosing different points. Making sure that you're getting local distal and treating the actual pattern as well, depending on what's going on with them. So, all right.

Dr. Holtman:

Okay. Thank you.

Dr. Roark:

Was that helpful? I don't know how helpful that was.

Dr. Holtman:

I don't know. I haven't tried cypress for him or I can't remember if I've done AromaTouch.

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

AromaTouch.

Dr. Holtman:

Yeah, he's like that. I used to massage him then he gets crazy with it. That it just, he was too excited and we couldn't get under control so that...

Dr. Roark:

I'm sorry. I missed that. You're kind of cutting out a little bit.

Dr. Holtman:

Oh, sorry. Yeah. I haven't been doing any massages for him...

Dr. Roark:

Am I the only one that can't hear her you guys?

Stephanie:

No, she's still cutting out.

Dr. Roark:

Type it into the chat, Dr. Holtman. I'm sorry. For some reason it's fading into nothing and I cannot hear you. All right, Laura, go ahead. And then Vanessa, and then we'll be done.

Laura:

Hi. I just had a general question. So I have a cat that has this really big gash on the side of his head. Self-selected doing really, really great. However, this cat will not wear a cone, will not wear a donut, will not wear cat socks, anything to protect. And he undoes all of the progress that we've done. So any suggestions? The oils are working great, but just can't seem to keep him relaxed enough. We're diffusing Balance and Peace, but still not taking it down a notch.

Dr. Roark:

Yeah. Yep. Tammy says, "Vetiver. Vetiver. Vetiver."

Laura:

Vetiver.

Dr. Roark:

... And those guys. It's my super sedative oil.

Laura:

Okay. Just put that on the neck?

Dr. Roark:

## Level 2 Weekly Meeting February 15, 2022

Yeah or diffusing. But the other thing is, as far as the cut, making sure it's... Okay. Is it kind of beneath the ear? Is that where the cut is? Is he scratching it?

Laura:

No. So he's starting to scratch it, but it's in that soft part on the head between his ear and his eye. And so it's pretty much just very bare, no fur and it's exposed skin. But like I said, once I'm able to put the frank, the myrrh, the lavender, helichrysum with the colloidal silver gel, he's fine with it. It's just when he wakes up, he's just like, hey, I want to wake up and take off the scab.

Dr. Roark:

Yeah. So I would make sure you're cleaning it really well in between oil applications and drying it really well, making sure it stays dry, that can kind of make a difference sometimes. And then I would keep trying different soft cones, that sort of thing to find something that will work for him and then just make sure his nails are trimmed really well. You can actually get the soft paws to actually cover up his nails. If he's scratching it open, that would be another option. And then of course the other calming oils that are out there, lavender, Vetiver, cedarwood, some of those ones and see if that's enough to kind of take the edge off. Yeah.

Laura:

Okay. Thank you.

Dr. Roark:

Yeah. And then Suzanne says, "Also, honey." You could do a honey thing.

Laura:

Okay. The honey bandage.

Dr. Roark:

Yeah. The honey bandage. Dr. Holtman was saying, "I've not been doing the massages. He gets too excitable, but I can have the owners try at home with more oils. Should I do a massage laser in one week and then acupuncture E-stim the next?" So I would do acupuncture every week, Dr. Holtman, I would just alternate your points. So I would not use the same points every week. I might switch sides, not do them bilaterally. I mean, I'd be hard pressed not to put in gallbladder 21 every single week, just because that's my favorite point on the planet. And since it's a supraspinatus injury, that's probably what I would do, but you could dry needle it one week and then E-stim it another week. And then I would probably do oils every week for sure.

Dr. Roark:

And then I would do laser probably on the weeks that I was not doing E-stim. So that's how I would do it just depending on, and you could play with it and see. You could even spread it out even more since you're seeing them every week and these are really awesome clients. You could just play with it a little bit and see. Space it out every three weeks. We're just going to do laser this week and laser and oil. Oils you can do every week, because it's like, they're helping the body get back to normal. Whereas laser and acupuncture we're actually stimulating histamine reactions and things like that in trying to stimulate

## Level 2 Weekly Meeting February 15, 2022

those nerves. But we don't want to stimulate on so much that we're overstimulating them and not letting them regenerate on their own.

Dr. Roark:

So, I would just play with him and see. Go intuitively what you're thinking and then just trust your intuition because it's probably right. It's probably right. I know it's hard to do that. Sometimes you just want a protocol, but sometimes you just have to go with your intuition on frequencies like that for sure. All right, Vanessa, go ahead.

Vanessa:

Hi there. My question's a quick one. I hope you feel better soon. Thank you for taking it. I have 10 pounds of Darwin's kidney food in my freezer and my cat is like, no thank you. And my question is, can I cook it? How much? My understanding was that taurine gets destroyed with the cooking. Would I be able to cook it fully if I need it to kind of get-

Dr. Roark:

It doesn't destroy it. It doesn't destroy it. I'm not sure where you heard that, but you can totally cook it. You can cook it all the way, you can partially cook it. You can kind of see what your cat prefers. You can also contact Darwin's and say, "My animal won't eat this. Can I return it?" And they'll probably refund you. So they have pretty good customer service, so okay?

Vanessa:

Okay. Thank you so much. I'll try the cooking thing.

Dr. Roark:

All right. All right. You guys, I will see you next week. Stay tuned. I believe this week I sent out an email about when the business class is going to be or not class, but business Q&A, which will be next week. I think on Thursday is when I scheduled that. So hop on that one if you are interested in learning more about business stuff, it's really just going to be an open discussion. I'm not going to have any agenda so to speak. Although I might bring in somebody occasionally to give you guys some... I have some pretty good connections on things like business type stuff, so all right. Thank you guys for all the well wishes I'm actually doing pretty good. It's just, my nose keeps running and it's really annoying. So I love y'all and I will see you next week. Okay. Bye.