



How Connection To Your Internal And External Environment Optimizes Healing And Fulfillment

Tom Moorcroft, DO With
Christine Schaffner, ND



Tom Moorcroft, DO

Hi everyone. And welcome back to this episode of the reversing mast cell activation and histamine intolerance summit. And I'm your cohost, Dr. Tom Moorcroft. And today, this episode I'm super stoked because we are talking with our other co-host, Dr. Christine Schaffner. And, you know, I met Christine back, I think, at a conference in New Jersey when you were working with Dr. Klinghardt. And I was just like, the thing that I was so blown away by, was kind of like this marriage of like what the patient is experiencing, what the clinician is experiencing and like some pretty hardcore science. So I'm really excited to have this conversation today where we can sort of meld those worlds together. But Dr. Schaffner is a board certified naturopathic physician. She's helped a gazillion, I think she says thousands. I think it's really a gazillion at this point.

Christine Schaffner, ND

People through--

Tom Moorcroft, DO

In person work, her online summits. And her work really goes beyond sort of like biological and medicine and all the science, and really pulls together all different systems of medicine and healing modalities so that she can help patients reclaim their wellness and really reveal their brightest light. And her skillset seeks, you know, she continues to seek to improve access and outcomes and speed of recovery in people who are really struggling and don't always have that access to care. And really people travel from all over the globe to see her. And I hope we're gonna dive in a little bit to her eco methodology today. Because what she talks about is the ecosystem and the terrain of the body. And that surrounds you. You know, energy analysis, clearing blocks,



optimizing flow, all is part of the systematic methodology for helping you get better. So I could go on reading stuff about you all day, Christine, but thank you so much for joining us today and thanks so much for doing this project with us.

Christine Schaffner, ND

Oh, it's such an honor, Tom. I always enjoy our conversations.

Tom Moorcroft, DO

It's so cool. It's like, I love reading people's bios. And then I think back to all the things I know about people, and it's just, it's so neat. So really we're talking about mast cell activation and histamine intolerance. What brought you into kind of an understanding of this and sort of what kind of brought you into thinking about medicine this way?

Christine Schaffner, ND

Yeah. No, absolutely. And, you know, I think it really is our patients, right? We learn with our patients every day and our knowledge in, you know, school and our training is just like step one. And then our clinic experience and our patients actually teach us really what's going on and what's working. And I've been practicing about 12 years. And from the very beginning, there was just a handful of patients that were just these highly sensitive beings, right? On all levels. Like a drop of this would set them off, or they would feel energy in the room or the electromagnetic radiation in the room. And it was just like, we of course believed them and trusted them, but our mind didn't understand it yet. So I've been thrilled that we actually have a narrative and a framework, especially over the last, I would say six or seven years, that really like identifies why they have this highly sensitive system.

And so again, it was patient-driven, and for whatever reason, I have a, you know, growing number. I think it's not only the condition is growing, but also, you know, my knowledge is growing in the highly sensitive population. And they keep us on our toes, right? They allow us to constantly innovate and try to find ways to unlock their system so we can really start treating them. And so it's really been my patients bringing their sensitivity towards me, and that really made me strive to try to understand more and more what's going on, so we can really give them the tools to help them heal. And I'm happy to dive into whatever we wanna go from there. But my patients, you know, I didn't seek this out. My patients told me, yeah, I gotta learn this.



Tom Moorcroft, DO

It's so interesting, 'cause I know we were talking a little bit before we got started. And it's like so much of what happens, it's like, at least in my patient population. 'Cause I think we've been in practice about the same time and we see people that are similar. And one of the things I notice is like, it's almost like the new sensitivity, that they are more aware of in the moment, maybe that they weren't previously, is almost like labeled as wrong. And then I just hear you saying this about this. I remember like, why are all my patients like this and what? Oh, wait, yeah, it's my responsibility to take the message and learn. So how do you coach people though? Because it's hard for me to be receiving all these messages and then for our patients who are suffering with Lyme or mold illness and mast cell activation to all of a sudden also have this side... Well, what a lot of other people say is the side piece of being hypersensitive. Like how do you even like start with them and help coach them through this process?

Christine Schaffner, ND

And just to piggyback on that, as we dive into that, you know, I think that in this patient population, there's a lot of trauma and fear and you know, there's a lot of self-doubt and a lot of, maybe because they have been tuned to the medical mainstream paradigm for so long, they get this, by the time they come see us, there's this, "What's wrong with me?" Like, "Why can't I tolerate things? I'm trying so hard." And there's a lot of like, you know, unfortunately like they're beating themselves up in some ways when they like, honestly--

Tom Moorcroft, DO

Exactly.

Christine Schaffner, ND

That's the last thing they need to be doing. We need to understand them. And I was laughing with you before the call. I mean, we have to, you know, our weird sense of humor, right? That these patients are actually the ones who are ringing the bell and saying that this is going wildly wrong. And we need to look at every aspect of how we're living on this planet and it's not gonna lead anywhere good if we continue down this road. So I actually am grateful that they are ringing this alarm and making us look in this way because you know, again, we have to turn the trajectory of our health and what we're doing in medicine and what we're doing on the planet to really, you know, I believe in regeneration and healing whatever's possible, but if we keep doing this, we're just gonna, you know, see a path that none of us wanna see. So from that perspective,



you know, I'm a real big terrain person. So I am a naturopath and then I've studied bio regulatory medicine. I'm also also very much into the bioenergetics, but this idea that's in my methodology called, you know, we look at the ecosystem essentially and the environment and the terrain is that, you know, it's not about an external environment as much as our response to that environment, right? And so how can we allow our bodies to become more adaptable and resilient? And the human body, my goodness, it is a profound, you know, work of art that is profoundly adaptable, resilient and what's happened is, you know, so much life has gotten in the way that it prevents our ability to self regulate and heal in the capacity that we're, you know, all I think have. All of us can have access to this. None of us are different in that we have an innate ability that our body is always trying to heal and repair and has those mechanisms. And the doctor's job is to first start with, and I feel that this is a really complicated illness, but at the same time we can bring it back to some simple principles. Okay. Like what are the stresses that are most like such a priority in your system that we have to deal with? And we just kind of unpack them, right? We look at the onion analogy all the time, but it's just--

Tom Moorcroft, DO

Right.

Christine Schaffner, ND

The prioritization of stress that we walk through with each patient. And so each patient, I have this in mind and of course with mast cell and highly sensitive patients, I'm gonna tweak and I can share, you know, how we tweak things to help them, but I just wanna get this framework out. And so often with my, you know, first patient visit, I'm sure you have a very similar intake. We're looking at what has been missed, right? What has been missed in their health history, that could be those really key aspects? In bio regulatory medicine we call them interference fields. So we look at the mouth, there's a lot of dysbiosis toxicity and this chronic poisoning of our lymphatics with neurotoxins and biotoxins that are hidden from us in the mouth. So that is really, really important. We also look at scar interference fields. These seem simple, but they're profoundly impactful to our fascia, our lymphatics, our extracellular matrix, our emotional terrain in that we hold trauma in our tissues. So even just as much as mercury in the body can create dysregulation in our physiology, a traumatic event can be a stored memory that is also affecting our physiology so we can, you know, unpack that of course as well. So most patients we go through the list. Of course, we look at them at home environment. I believe that none of us are living in an utopia right now, and we can't live in a bubble, but obviously while we're going



through the healing process, we're trying to control and make a healing environment as much as possible. So we gotta look at mold, we gotta look at EMR and EMF. We've gotta look at, you know, this patient population isn't not gonna have any perfumes or personal care products that are, you know, toxic. They've .

Tom Moorcroft, DO

They cleared some of those out already.

Christine Schaffner, ND

Yeah. They've already been like, "Hey, there are neurotoxins in these things, please don't put them on our bodies." So, you know, doing as much as we can in our environment. And so that's my checklist. And I guess I can, just to dive into this piece, Tom too. So I've already mentioned scars and the fascia and extracellular matrix and the lymphatics. And this is an area that I'm really passionate about because I think it really is the future of medicine and how we look at the body. The more that we deepen our understanding of this, and it's really been a key component of bio regulatory medicine. And maybe I'll start with the inspiration that I've had lately. There is that French hand surgeon, Dr. Jean-Claude Guimberteau, who has those YouTubes of he, you know, looks at living fascia and his hand surgeries. So you and I did cadaver lab, right? And we're just get through the fascia and just kind of, it's just the Saran Wrap. It's not supposed to really--

Tom Moorcroft, DO

Right.

Christine Schaffner, ND

Do anything, but hold our structure. But I really think a lot of the magic in our body is in the fascia. And the fascia is this interconnected fabric in our body. And so what Jean-Claude saw was that it's not this just structural kind of Saran Wrap, but it is a highway of communication and delivery, exclusions on water in the body. And meaning the more you study it too, it's a highway for electrons, light and sound in our body. This is the area that Lyme loves to hang out, toxicants like to, you know, embed and destroy. Glyphosate, it likes to interrupt, you know, you name it. It starts in this fascia fabric that it starts to degrade the communication network in our body. And so mast cells hang out in this tissue, right? Mast cells are our first line of defense, right? They are surveying our environment and letting us know whether or not to signal the alarm or not. And so when we look at this fascia network, it's kind of, I'm sure you see this a lot too, Tom, it's like this



terminology. It's like, fascia, extracellular matrix, interstitial tissue. You know, like there's all these words for the same space. And it's like--

Tom Moorcroft, DO

Right.

Christine Schaffner, ND

I don't know if many of us really understand, but that's why we just say all these different words. But my, I love saying fascia, at this point as an umbrella, 'cause the length is within the fascia network. The extracellular matrix is within the fascia network. So I see it as this umbrella turn. And then as we go to the microcosm of the physical body and we look at the space in between the cells, that is a big piece of where treatments need to target, because that is, again where if we're not getting our lymphatic fluid moving out of that space and that thing, you know, that space builds up with basically toxicants and infections in that space. That's where mast cells, right? Are gonna be more bombarded and they're gonna be ringing that alarm bell more and more. So our lymphatic therapies, our fascia therapies are key to allowing drain toxicants and improve immune response in modulation so our mast cells can be way more happy, let's just put it that way.

Tom Moorcroft, DO

You know, it's interesting too, there's a small group of osteopathic purists, like they call 'em, traditional osteopaths. And that's my, you know, background. And it's this interesting thing because I had an opportunity, we were one of the few anatomy labs in the United States that have fresh tissue.

Christine Schaffner, ND

Wow.

Tom Moorcroft, DO

Which it's not as gross as it sounds, for everybody watching. But a lot of us study cadavers that are preserved. And to preserve them, to make them not like a biohazard to the people, working on them and to have them preserved for a long period of time, we do things that make... We change the original function. But there are some people who are so generous that they say, "Here's my body to study," in a fresh, frozen situation. So not like, you know, a live hand--



Christine Schaffner, ND

Right.

Tom Moorcroft, DO

But really close. And one of the things that I kind of flash back to, as you're talking about that is the beauty of the fascia is, if you make a contact with the fascia on the front of the shins, and someone is holding, like we actually did where they had some of the membranes within the head, you can actually put gauges on them, move the front of the leg and it will move the inside of your head like this. And it's like, and then think about the life and the energy that you're talking about. This is a living, breathing tissue. And the other part that I remember is some of the folks I studied with, they would actually try to break the fascia, and it's next to impossible with almost any amount of force, yet in a living tissue, they can actually pull or push on it and create an electrical, that peso electric sort of flow that you're talking about. And it was just like, it just, it brings joy to my heart hearing you talk about-- This is where it's a lot because for those watching, if you don't know about fascia, this is literally embryologically and developmentally where everything grows into the fa... The fascia is literally the energetic framework for which our human structure comes. So I wanna hear more about the way you deal with this, 'cause I'm like really stoked about this.

Christine Schaffner, ND

Yeah, no, and I love your background, being an osteopath because you know, when we think about this network, right? And I have recently, I mean, there's moments, right? Where we all just go down the rabbit hole learning and getting--

Tom Moorcroft, DO

Yeah.

Christine Schaffner, ND

And this is an area that continues to just inspire me as I keep going through this rabbit hole because it's really, I call it too, the intersection between toxicants, pathogens and trauma in this space. And then kind of zooming out and then we'll zoom in again, it's all this fabric, right? And Jean-Claude's book, and my good friend, Gina Bria looks a lot at this as well, it's our inner internet. And I keep on thinking about like two ideas I wanted to share. So we can go into the sensitives, that this is this fabric, right? This fabric that actually connects us to the field. And so I



know that sounds wacky, but it is. So basically there is we have receptors and antennas. So we think of the body stopping at the skin, but we have a bio field, and on the other side of that, we have the unified field. So we have this sea of energy and information that we always have access to. But in quantum physics, it's the observable effect, right? So the more that we observe these fields and work with them, the more that we can harness them in order to heal and to connect. I mean, I think our bodies are a big barometer for our spiritual and emotional insight. I mean, I think that's why we're on the planet. I mean, obviously we get to explore life in these physical bodies that are, you know, beautiful and with all our sensory experiences. But I mean, in my perspective, in my framework, you know, this is a spiritual experience on many levels, right? And so when you go and you geek out on the fascia being this fabric, that basically on the other end, we have these fields and then Jean-Claude and James Oschman have a very similar definition.

And Dr. James Oschman wrote a book called Energy Medicine, and he calls it the living matrix. And I've always really resonated with that. And then Jean-Claude just illustrates it, right? And it's this idea that from our skin to our DNA, we are connected by this fabric. And that's why osteopaths have such a powerful impact on the body because by treating the physical fascia and putting hands on the body, you actually have the direct line because of the fascia connects and all the extracellular spaces. And then those structural proteins basically cross over the cell membrane and connect inside the cellular environment through integrins and then getting into the microtubule, which is the cytoskeleton of the cell. And then over the nuclear membrane. And then there's where the DNA is, which affects, you know, a lot of how we, you know, create physical health or just health in our body, right?

Tom Moorcroft, DO

Right.

Christine Schaffner, ND

And so we are, you know, hands-on work with osteopaths and, you know, skilled body workers who do craniosacral or myofascial work, and we can get into other therapies and they have that direct line of creating, you know, life as when you learn energetic principles. Like, again, it's complicated, but then I think of life as the more coherent information and communication we have in this network, the more health follows, right? So our job as doctors and practitioners is to create more uninterrupted flow of communication, right? And so with your hands, there's one, that's one aspect of being able to ease restrictions and move blockages of energy and, you know,



adhesions and scar tissue can create traffic jams in this fascia network. And that's why scars, even really seeing, like how does a little scar here affect my, you know, neck here? You know, because of what you were saying, like, you know, touch the shin, you can feel the brain, you know, right?

Tom Moorcroft, DO

Right. Well--

Christine Schaffner, ND

There's all these connections, right? So--

Tom Moorcroft, DO

Yeah. Well, I have a question that just keeps coming to mind, to share this micro personal experience. And then as from your perspective, I would love for you to share, because I recently had some injections in a knee and a shoulder that were busted up from high school, right? Just bothered me, I wanted to, you know, do a little regeneration and feel a little bit better. But the thing that was really interesting was as they worked, 'cause they worked in the two joints, but then they did a couple of, you know, they didn't call them interference fields, but I mean, they used their words, but I knew what they were. But it was amazing, for almost two weeks, I felt like I had our favorite COVID. I didn't, I got tested 180 times. I've already had, it felt a little different. But like literally like as soon as I got the injection, so I was like this rush of energy and I was like, "Oh, my God, everything's moving." But then it like, I was so happy for the next two weeks that I was feeling like dirt.

But what is going on there? Because I think a lot of our patients have an experience. They get a treatment, they have a particular reaction and then that reaction is labeled. And depending upon how you label it, you can either have it be a positive or negative experience. And even when you're talking about like, you know, there's this continuum of body, mind, spirit, or whatever words you want to use, but it's, you know, our physical being and our energetic being are one thing and they're just, we describe them differently. So if I were your patient coming to you, what would you explain to me like happened? And how can we... 'Cause I know so many people watching, maybe they didn't have an injection, but they took a supplement. Like why is your body reacting in certain ways?



Christine Schaffner, ND

Yeah. You know, it's multifactorial, right? For you--

Tom Moorcroft, DO

Big can of worm here, right?

Christine Schaffner, ND

Yeah. For you, you know, I think, you know, you're basically, you know, putting energy to an area of trauma, right? That has been, you know, often closed off from really circulation, lymphatic drainage or hyper inflamed in that tissue where it's just creating and perpetuating uncontrolled inflammation and you know, really aggravating that tissue. So I often, and not that we want this, but when we start working with the fascia and the lymphatics, it's not uncommon for people to have sometimes flu like, or kind of, you know, not feeling well for a few days after they do this therapy. And then they think, "Oh, I'm never doing this again." But in my framework, this is actually the thing that you need, but how do we slow it down or support you more? Or, you know, we're getting assistant moving, that's been stuck, right?

And then all of a sudden you're able to actually move toxicants out of these spaces and your body's having, you know, a, you know, it can be so many things that's going on with your immune system, but there's kind of probably a heightened immune response. Whether, you know, you're doing things that could create a Herxheimer, that's what's happening or aggravating, you know, mast cells and having a dump of histamine and all the prostaglandins and inflammatory cytokines. But the goal is that I really wanna get out there, I remember Christine Gedrich doing a talk on this and I thought it out, she was just so wise to continue to remind us in this community is that our job is not to have prolonged suffering and treatment protocols, right? That is not the goal to have people have, you know, again, prolonged suffering and reactions in their treatment protocols. But there is, you know, if we have these ideas of what we call a, Herxheimer reaction, they should be one to two, maybe three day events.

Tom Moorcroft, DO

Yes.



Christine Schaffner, ND

And there's an improvement after, you know, after that. And then there's a recalibration of the body after that. I really try. I mean, I'm a very kind of busy clinician and I get really, you know, I'm booked up, but I'm always like, "Please reach out to me. You know, if you're having like any of these symptoms," because you know, this patient population, God bless them, they are used to suffering so much that they're like, "Oh, if I just push through, if I just, you know, I have to get worse before I get better." And I really, I don't believe that. I think there are, you know, healing can be bumpy and saying it's always comfortable as we grow. However, the idea that you have to suffer and struggle for three years before you get better, no. You know, that's not the case. So--

Tom Moorcroft, DO

Totally agree.

Christine Schaffner, ND

You know, that just kind of, that's where I put that up and need to share. I mean, do you see that a lot too? And people are like, "I just gotta push through."

Tom Moorcroft, DO

Well, I think it's, and I'm interested in what you think about it though, too. 'Cause it's yes, the patients are there pushing through, but the other part is one of the things that I'm trying to change, like I, the definition of a Herxheimer, you just gave and Christine gives, is spot on and it's like this six or 12 month Herxheimer. That's not a Herxheimer. That's not like I didn't prep the terrain. I didn't prep the person, I'm not working on their tr... I'm not working on all the stuff you've highlighted well enough. Or maybe I'm trying too hard. But yeah, I mean, our patients feel like they're supposed to be suffering more and more and more. And I'm just like, "No." It's like, "You're actually worthy of healing."

Christine Schaffner, ND

Yeah.

Tom Moorcroft, DO

And you're here to shine your light.



Christine Schaffner, ND

Yeah.

Tom Moorcroft, DO

On the planet. Not to hide your light. And so I'm always like, "Well, what's going on here?" So yeah. So how do we work through those things though?

Christine Schaffner, ND

Yeah. So with--

Tom Moorcroft, DO

Because I feel like the whole system tells everybody they have to suffer more and the more you suffer, the better Lyme patient you are or the better mast cell patient you are. 'Cause you have a worse story. I'm like, "That's bullshit."

Christine Schaffner, ND

Right. I know, I know. So I mean, we're bringing it to the mast cell, you know, perspective, right? You know, I again have changed my approach over the years because again, what I'm learning and everything. And you know, we have a pretty good understanding of the underlying causes of like it's not just mast cells gone awry and you know, there's something wrong with you, but they're responding to, you know, stresses, right? Often Lyme, mold, EMR, you know, other environmental toxicants, allergens, you know, you name it, right? So we know there's an underlying cause and framework that we have to address. But honestly, here in Tanya DMC continue to speak, there's this thought that we actually, you know, some of us will like, okay, treat the underlying cause and the mast cells will get less reactive and the body will get better.

And you know, that is a idea which we have to continue, but we have to stabilize the heck out of those mast cells first, right? So we're gonna start moving, you know, fluids and getting the lymph moving, then we're gonna start, you know, targeting drainage and detox and, you know, infections. We have to have a really solid mast cell protocol that we get the patient to, you know, tolerate first or as kind of the, you know, overarching theme that's in like the initial piece of this. So that's gonna be, you know, and I'm a naturopath, but whatever works for the patient. So I'll use compound H1-blockers and we use mast cell stabilizers that are compounded. You know, some people weirdly tolerate over the counter, that's fine. You know, I'll use those medications if



needed. And then again, the goal is not... My success criteria is not to be on them for life, it's to be on them through treatment, to tolerate treatment so that we can deal with underlying causes. And that, you know, I will use a lot of other like nutritional therapy. So there, I mean, we all have our favorite products from Beyond Balance to you know, different like blends of all the things that I know Beth has some really good products. And, you know, BAL and signed, you know. So you're just, you know, you're finding that mix. I muscle test. And so I use that. I use bio residents in muscle testing to, you know, individualize treatment for, you know, my patients. So what is one person's protocol is not gonna be the next. And so I start there and then when they're having these reactions, so, you know, we feel like a broken record, right? In the Lyme community.

Tom Moorcroft, DO

Yeah.

Christine Schaffner, ND

How do you take the binders? How are you coping? Is your bio moving? You know, what are, you know, like what detox things have you done? What drain and remedies are you on? But, do we need to increase your mast cell treatments going through these, you know, flares or pretreat with kind of loading dose of mast cell support when we're going into interventions so that we minimize as much as possible, you know, these reactions. So that's like my starting approach. And then we can totally, I'm happy to share other aspects of my approach, but I think that was a shift within me with my treatments within probably like three years ago that I, you know, once I started doing that, I was like, "Oh, wow. Like people can tolerate treatment, finally." I'm not like, "Okay, put this one drop on your belly button." And you know, like, you know, like doing all the things that, you know, you do to introduce, you know, treatment to sensitives.

Tom Moorcroft, DO

It is interesting though, too, because like, it's sometimes hard to get folks to take actually more. Like, "Hey, let's pretreat with more," but you're like, well, you know, because we're gonna avoid the thing, that's gonna really kind of open the floodgate. So it's a cool play. One of the things that we kind of started to talk about, and I think it's really interesting because you talk about our reaction to the external environment, and then really kind of focused in on like all this cool SI... Like that's what I love. Like we're talking about bioenergetics and like kind of almost woo woo stuff. But it's like all based in science and the more we study, what I found over, and maybe you've seen this too, is over the years is like all this stuff that we innately know, and that as



multiple clinicians have proven clinically over and over and over ultimately like 20 years later, science picks up on it or maybe even longer. So it's really--

Christine Schaffner, ND

Oh, yeah.

Tom Moorcroft, DO

Yeah. So what's going on though? Like, we were talking about terrain and you had mentioned earlier about like our response to the external environment. And I know that you and I have had conversations about the external environment and our living in, and being a sensitive person relating to the whole. So I'm hoping you could unpack a little bit of that for us.

Christine Schaffner, ND

Oh, yeah. You know, I'm happy to, you know, share, you know, my perspective. So, you know, I think that that toxic bucket, you know, analogy is always like a good one, especially in this, you know, part of the conversation. And I think, you know, with the environment, right? We're not starting from ground zero anymore, right? We know that, you know, babies are born with many, you know, just chemicals that we know to identify in their cord blood. And you know, that's not even, you know, thinking about the synergistic reactions between them. You know, we know like the individual, but we don't know, you know, the combination and kind of how much we're playing with fire, right?

Tom Moorcroft, DO

Right.

Christine Schaffner, ND

You know, and this is kind of like when I try to explain to people, so a lot of times they will be like, "I feel like I got like," some patients, not always, but like, "they're almost like worse overnight," right? Like, they're like, "I did this. And then I was like, my health did the decline." And I'm like, well, you see that and you feel that, but maybe it's like, again, no judgment, but like maybe you were a C-section baby. And then maybe you had, you know, the normal schedule of shots and things. And then maybe, you know, like you went to a dorm in college and lived in a very moldy environment and then maybe you're going through a divorce. And now all of that hell is, you know, and not to mention all the vector-borne exposures we're having. Like it's not just a tick bite



in Connecticut, you know. It's all these things that we're just currently, you know, exposed to Lyme and co-infections and parasitic infections and all of that. And it's like all of these kind of life events then, you know, culminating in that mess that we just have to unwind and unpack. So I think the biggest insults to, you know, our health are water, I think the genetically modified food and herbicides and pesticides that are ever growing. I think that's way more of an issue. Like we know about glyphosate, but that's like one ingredient in Roundup, there's, you know, way more of a on top of a depleted soil, right? You know, so like all of that, you know, and then of course like this whole rabbit hole, even of microplastics, I don't know if you've gone down that one, but you don't really want to, it's just like just full of plastic, right? At this point. And then the ever increasing exposure to electromagnetic radiation, electromagnetic fields.

And I think we've, you know, I'm sure you've already had talks on that here. And just think about it. Like I maybe just to share with you, like that perspective. So, you know, we think a lot of, you know, my understanding is evolving in the body that, you know, it's beyond biochemistry, that we actually have all these field interactions before we have this lock and key of hormones and receptors for biochemicals and, you know, messengers and receptors. You know, like that lock and key model is I think, outdated. I think there are all these electromagnetic field interactions bringing these two things together. And so when you think about it, the mast cell is not only gonna be very sensitive to physical stressors that we went through already, but there's gonna be these disruptions in electrical information that are probably, again, I don't know anyone who's studying this yet, but please, if you do, let me know.

Tom Moorcroft, DO

Right. Yeah.

Christine Schaffner, ND

Like it's just kind of a observation. And a working idea that I think is probably there's truth in it, right? That the mast cells, as the electromagnetic environment is becoming way more stressful in our everyday life and our modern life on top of already, like all the things that I just even mentioned, a couple of them, right? That were up against that. I feel like, you know, those field interactions and that radiation stress is actually disrupting our communication network more and more, and creating a hypervigilance and more easily releasing of these, you know, molecules of inflammation that we've gone through. So I think, I really feel like, and there's a happy story on the end of it. I'm not gonna be a bummer, but I feel on, you know, like on one level that these



individuals are highly sensitive, energetic beings, right? And so they're responding to way more, I think, in disruptions, in their electromagnetic environment than we realize. And so on the flip side of that, there's a whole emerging field of energy medicine, right? And that's gonna be the world of looking at the biofield and looking at frequency and looking at sound and light and, you know, all sorts of different devices that are coming out. I know we're both friends with Harry . You know, I'm also friends with the people at FREmedica and Wave Station. And, you know, I think the medicine of the future is gonna be way more acknowledging this part of health and bridging this part of health. I don't think we have to throw away our understanding of biochemistry at all. I think we just need to put this as part of the equation and allowing things to work better, that we need--

Tom Moorcroft, DO

Yeah.

Christine Schaffner, ND

You know, treatments in the field that work with field, you know, field science and our biochemistry to really, you know, create more in my bio and say, we're always trying to make our treatments better, right? And I think these tools have the potential to accelerate and stabilize these patients more. And they work. I mean, these are energy sensitives. And so I do a lot of energy medicine with my mast cell patients.

Tom Moorcroft, DO

You know, it's just so important, 'cause I feel like I was super sensitive. And then everybody around me told me it was wrong. Like they didn't know what to do with me 'cause they had blocked it off. And then--

Christine Schaffner, ND

Yeah.

Tom Moorcroft, DO

So then I get chro... Yeah, I get Lyme and heavy metals and Babesia and all this fun stuff that was part of my healing journey. And during that process of going through chronic illness and healing, not only did I learn a lot about the physical and the emotional aspects, but I learned that I was fighting my original birthright and my original way of being on the planet because of an external



factor. And I changed my story because I didn't know. I was just looking to the people around me, but then the gift of my chronic illness was I realized that that sensitivity wasn't bad. It was just something I didn't know what to do with. And then I learned that like, "Hey, I can be wide open," or I can learn to tune it down. But that awareness allowed me to understand it. Some of what I had labeled as negative before wasn't. And some of it, like you were saying, the reaction I had to the shots and the reactions I had, like when I used to go in stores and I felt like the fluorescent lights were literally like tacking me. It's not like it's fun and pleasant and it's not okay. But at the same time, it's just part of my experience and I can learn with the... And also sometimes I needed a lot of treatments, but I could learn how to be in the world where, when the moon, like we were talking earlier, like the moon changes and it changes a lot with the ocean and we can see the gravitational pull, but it affects me. And I can learn to like rejoice in that and be aware of it and then turn the rheostat up or down.

Christine Schaffner, ND

No, I love that. I mean, on the, really the beauty of this conversation is how highly interconnected we are from our, you know, nucleus to, you know, beyond, there's a fabric that connects us and we are connected being, I don't know, across the country or a couple of states.

Tom Moorcroft, DO

Yeah.

Christine Schaffner, ND

You know, like there is this reality once you realize that none of us are separate, and we're all interconnected through this invisible field of information and energy. And the more that we embrace that, the more there is this magic of life that I'm, you know, a student of and I'm trying to learn in my own life and my own experience, but it's, you know, I've been amazed when I've learned these principles and really try to embrace them and try to do the work within how the environment around me changes as well.

Tom Moorcroft, DO

It's so good. And the thing you just like inspiring me is like, I feel so connected in our conversation and I feel so connected to the world when you work this way. So many of us in this sort of sensitive, chronic illness world, one of the things we're missing is community. You know, we're feeling more separate. Even when we get into Facebook groups and whatever, like you're



sort of connected, but it's kind of like more connected through bitching about the things that didn't work rather than feeling the life force and supporting each other. And this is really, such an invigorating sort of conversation. When you talk to someone who's sensitive, right? As we kind of bring the whole thing together, 'cause I mean, we could talk about all the principles and all the nuances for, I feel like for days on end, what is the hope and what is sort of that principle that brings it all together for your patients?

Christine Schaffner, ND

Yeah. Yeah. I think the goal is resilience, right? And I think there is this conversation of feeling our environment and controlling our environment in order to thrive, in order to live the healthy life. Because if we do that, then we'll be safe and there's a lot to unpack there of, you know, lots of, you know, traumas and childhood messaging. And you know, not to say it's not real, but like I'm very much like we have to embrace how much more of a participant we are in life. And you know, all the things that make us unique in who we are from a conscious and unconscious level. And I think the more we're willing to do that, the more empowered we are and the more life starts to shift.

And so, you know, my, you know, perspective, I'm sorry, I'm probably dancing around your question, but to bring this, you know, into, you know, an empowering conversation, I mean, I guess, I just wanna maybe end on this visualization for people. So I'm really into, obviously, I really respect the physical body and I really try to learn as much as possible, but as you probably can gather, I'm really inspired by this other realm of healing. So I had a patient, she actually worked with my colleagues. She, we couldn't see each other 'cause, for whatever reasons, but she worked with my colleague and my colleague was keeping me up-to-date with her care. So she was a highly sensitive mast cell, blah, blah, blah.

And my colleague did all the things, of course. All the right things, the mold, the parasites, all the things. But she told me, and she sat me in the hall and she said that some of the most profile work she's doing is with the work of Jodi Spenzo, which I'm really into, but there's many paths to this truth, right? But I think he gives us a modern day language for this truth. But she said that this work has been really profound. And then part of her morning meditations is visualizing herself, eating a chocolate croissant in Paris with her son. So she was like limited to like three foods, right? And so that reality, from point A to point B was like, that seemed like a wild gap, but she stayed because of those principles. She stayed connected to that vision of her future, for



every day. She put work into that every freaking day. Not for like two minutes, for probably hours, right? And so when we got that picture of her having a chocolate croissant in Paris with her son, that is when I could not turn the back, "Oh, it's possible for people." And so I really think that we're way more powerful than we ever could even think of and that I don't want this, anyone who's listening to think that healing is just living in a hole and controlling my, getting the best mold-free, EMF protected house, please do that, 'cause that's smart. But at the same time, you know, that's not like you gotta go out and live life and be connected and you know, and not limit your experience of life. And so I just share again, everyone's gonna walk their path, but that story, I hope is a story to inspire you, of not putting yourself in a box and thinking you have to live in there forever.

Tom Moorcroft, DO

I love it so much. And it's so funny 'cause like so many of the stories that people often tell about like how you can, you know, what you focus on, you know, you create that as your reality or like Joe says, what you think about you bring about and all that stuff. It's always this big ass thing. It's this crazy like, "Oh, I thought about a million dollar yacht and I manifested it in five years." But the reality is we're overlooking this simple beauty of being with a family member in a place that really inspires our heart. And I mean, I think most of us know, a chocolate croissant, unless you really hate chocolate, it's pretty yummy. You know? And it's like, I just, as you're saying, it's like, it lifts my heart. And everything you've talked about, I think it really inspires me. And I hope everyone listening gets inspired to know that all the work that Christine is doing is like helping you to like live in the moment and like uplift your heart and like the emotion behind all of it. 'Cause you got all the science and all the biomedical and all the energy medicine down. But it's really like finding that thing, that really resonates deep in your core that is you. Because you don't wanna be Dr. Christine or Dr. Tom, and you don't wanna live our lives. You wanna live yours. And so Christine--

Christine Schaffner, ND

I love that.

Tom Moorcroft, DO

I mean, oh, my God, how inspirational.



Christine Schaffner, ND

Oh, thank you, thank you. No, thank you for giving me the opportunity to partner with you and Beth to get the summit out there. I think it's gonna help so many people, 'cause I just feel like there's so many people who can identify with this framework and I just push all of us to see it, embrace it, but move beyond it.

Tom Moorcroft, DO

So well said. So with that everyone, check out Dr. Christine Schaffner at conveniently, drchristineschaffner.com. And we have all of her information for you as she's our amazing cohost on this event. And thanks for joining both of us on this episode of the reversing mast cell activation syndrome and histamine intolerance summit. And we'll see you in the next episode.