

How To Resolve Long COVID Naturally In 4 Steps

Laura Frontiero, FNP-BC
with Evan Hirsch, MD



Laura Frontiero, FNP-BC

Welcome back to the conversation. Today, I'm talking to Dr. Evan Hirsch, an old friend of mine. This is the multiple we've done this multiple times together. I'm trying to say thank you for coming back to the mitochondria summit.

Evan Hirsch, MD

Thanks for having me on.

Laura Frontiero, FNP-BC

I am so pleased to bring you because we are going to talk about a really important topic that's on a lot of people's minds. We're going to be talking long COVID today and a process, a simple four step process that you have to help people solve that. So even if you don't have long COVID, I would say tune into this because chances are, you know, somebody, because we'll be talking about what those symptoms are. And some people don't realize they have it and you might have it and not realize it. And also, we're not out of the woods. You could get exposed. So this is really important information for you to know, wouldn't you say?

Evan Hirsch, MD

I would.

Laura Frontiero, FNP-BC

Yeah. Okay. So for those of our viewers who don't know you, I want to introduce you real quick before we jump into this topic that you are really, truly a world renowned energy expert. You're a bestselling author and a professional speaker. You're the creator of the Energy M.D. method. And that's a science backed and clinically proven four step process that helps resolve chronic fatigue and long COVID naturally. And our viewers can see you on your podcast, which is actually top rated. It's actually in the top 5% internationally. It's called the Energy M.D podcast. So make sure and go find Devon there. So even as we talk about this really important topic. Could you start off by letting us know how does somebody know that they have long COVID? What would be the symptoms? Let's unpack that first.

Evan Hirsch, MD

Yeah, a lot of people are looking for something definitive, like a laboratory test and looking to see how their immune system is reacting potentially to the virus. But the reality is, is that those those tests are highly inaccurate. And so in order to know whether or not you have long COVID or basically persistent symptom forms of COVID, you need to look at the chronology. You need to look at the timing. So if you had a viral illness and sometimes people had very little symptoms and sometimes they had a whole bunch of symptoms, sometimes they tested positive for COVID, sometimes they were negative. But if you had a viral illness since November 2019 and you had symptoms that persisted from that moment and oftentimes weird symptoms, then it's highly likely and probable that you have long COVID. Now, sometimes those symptoms persist right after you get COVID. So you get the flu ish symptoms and then those symptoms persist. But sometimes those symptoms go away and then they come back in a month or two and you're like, Where did all these weird symptoms come from?

Laura Frontiero, FNP-BC

Okay, so the weird symptoms, what would they be? I'm sitting here thinking, Do I have the weird symptoms? I'm pretty sure I've had COVID four times, three or four times at this point. And that's because I refuse to stop living my life. Right. I'm just like, I've got the tools. I can heal myself, I can get better. And so I'm out there doing all the things. I'm pretty sure it's been three or four times now.

Evan Hirsch, MD

Yeah, I had it. I think once or twice so far, and it was pretty intense. But I got over it. I did all the things that, you know, we talk about in our program to make sure that I didn't get long COVID. But these weird symptoms are, um, are going to be fatigue, brain fog. Um, and then they get a little bit weirder. So then oftentimes there's the loss of smell and or taste. There can be sweating. So oftentimes these are spontaneous sweats, whether they're happening during the day or at night. And all of a sudden you feel like you're the hottest person in the room. You could also be the coldest person in the room, and you could have cold cans, cold feet, you could have muscle pains. So sometimes people have pain in the bottom of the feet, muscle cramps, headaches, migraines. They can have orthostatic hypotension, which is basically where you go from a sitting to a standing position and you get lightheaded. There's actually over 200 plus different symptoms that you can have from COVID. So that's part of the whole long COVID picture. So that's why it's years.

Laura Frontiero, FNP-BC

I hear a lot of people having ringing in their ears.

Evan Hirsch, MD

Yeah. Tinnitus in the years and years. But yeah, it can be any new symptom that you have that you didn't have before you had this sort of flu like illness. Mm hmm.

Laura Frontiero, FNP-BC

Okay, so now we know it's this broad spectrum of things, and I'm sure people are thinking, oh, my gosh, you know, we all think, oh, I have it, I have it. So take us through the steps. When you first have somebody in front of you who says, I'm coming to you because I've seen other practitioners, I've been trying to solve this. I just haven't felt myself since. And they can usually pinpoint since this happened. Right. And and I know that there's a process that you determine that you take people through to determine, like, is this the next step for you? And this is important to know because people are going to walk away with pearls here. And if your practitioners that you are working with are not guiding you through something similar. I would say ask for it. Right, because so this is going to be really helpful for everyone. And obviously you can't help all 50 plus thousand people that are going to be viewing this summit. But you sure can help all those people know how to pick a practitioner, right?

Evan Hirsch, MD

Absolutely.

Laura Frontiero, FNP-BC

Okay. So what are the important things that must be in place as you're evaluating this?

Evan Hirsch, MD

So in terms of I've got a four step process that I take people through, but I think probably what's most important coming back to kind of talking with your practitioner is that you want to make sure that the practitioner is actually addressing the live active virus. Because the reality is, is that if you have symptoms of COVID, you still have live active virus. So you want to make sure that it's being addressed with an antiviral. And most of the time we're using herbal and more natural antivirals and having lots of success with those. The prescription antivirals will stop the future replication, but they won't necessarily get at what's currently present. So you want to make sure they're addressing the live active virus.

Now, what's really important about this is that you can't just go after the infection. You have to take a look at the number of other causes that are present. So when we take a look at our four step process, the first step is to figure out all the causes that somebody has. So most of the time, people know whether or not it was triggered by some sort of flu like illness. And if it's happened in the last couple of years, they generally think and then they understand that it's probably COVID. So that's one of them. But there's some other ones that are really important because they kind of set the stage. You know, not everybody gets long COVID. It's about 30, 35% of everybody, which is a really high number.

Laura Frontiero, FNP-BC

But that's what.

Evan Hirsch, MD

One out of every three people, three out of every ten people. It's a ton of people. Right. But it's it's really important to look at some of these other things. So there's reasons why you got it and somebody else didn't. And it's because of these other causes. So there had there's heavy metal toxicity, there's chemical toxicity, there's mold toxicity. There's and then there's other infections that were already in the body that set the stage. And then the COVID was the straw that broke the camel's back.

Laura Frontiero, FNP-BC

Yeah, the way that I kind of understood this a little bit, too, is that your immune system kind of had a handle on these things, right? So your immune system was dealing with the toxins, the pathogens, the parasites, the bacteria, the the mold, toxins, whatever it is. That's in there. And then along comes COVID, and now we talk about reactivation of that. So the thing was already in there and your immune system was handling it and now it is no longer able to handle it. So now not only do you have COVID, you've got raging this over here that used to be handled, is that kind of what's happening here?

Evan Hirsch, MD

Yeah, that's absolutely correct. So when functioning correctly, the immune system is going to keep a bunch of this stuff in check and actually, you know, there's a there's a balance that exists, you know, as in this human form or about 10% human cells and about 90% bug cells. Right. So there is this balance that has to be that is that is present and created. So a lot of these infections you already have, but then the immune system gets distracted by heavy metals, chemicals, molds, infections and trauma. I call those the root. Root causes heavy metals, chemicals, molds, infections and trauma. And they'll distract the immune system over here into left field. And then the immune system can no longer manage the infections and the infections become opportunistic. So that that kind of and oftentimes people, you know, the people who actually are getting more cold, long COVID, more than other people are those who have less symptoms.

So the worse flu you get, the less likely it is. And part of that is because COVID is bypassing the immune system, because the immune system is distracted. And when you actually get the flu, it's the immune system that's causing you to get rid of all the things your nose is running, you're vomiting, you get diarrhea, you're leaking out your eyes, whatever it is, immune systems trying to get things out of your body in this particular way. It's not actually the infection doing that directly. It's the indirect response from the immune system. So if the immune system isn't reacting and the bug can get in and hide from the immune system, you're not going to have a lot of symptoms when you get COVID.

Laura Frontiero, FNP-BC

I just thought of the best analogy for this. Like analogy is brewing inside of me and I love analogies because it helps people think so. Think about this. Your police force in your city

generally has a good handle on crime, right? So the bad guys, the bad guys didn't go away. It's not like they moved out of town. They're just a little bit on good behavior because they know they're going to get caught because the force is strong, i.e. their immune system. Now imagine a natural disaster hits your city and the police force is busy over here dealing with rescuing people and helping people. What happens every time in a city crime goes up during natural disasters because the police force, the do good group who keeps everything under control, can't keep their hands on both at the same time. That's exactly what's coming up for me as an analogy. Yeah. Yeah. So a natural disaster does happen in your body called COVID. Now. Now all the bad guys are playing because their immune system is distracted. Okay, so we've set the stage there so we know what kind of causes this long COVID. It's not necessarily COVID itself. It's a perfect it's a perfect storm. Really. Okay. So now why is it so hard to treat long COVID? What's going on there?

Evan Hirsch, MD

So that when you get to this point and you've had these other causes that were in your body before, it's really this combination of causes. So when we're looking at the number of causes of long COVID and like the contributing causes in addition to the active live virus, we're looking at around 30 plus different causes. Now, everybody that we see who has long COVID has a combination of about 20 of those. And everybody has a different combination except for the fact that they all have COVID. And so somebody might have mold and low adrenals and thyroid issues and COVID and somebody else might have heavy metals and mitochondrial dysfunction and a number of other things in COVID, right? So it's kind of this combination.

So that makes it even more difficult if people aren't looking for the causes because way too often people are focused on the treatment, hey, what? You know, they go to their buddy who got rid of COVID and they said, okay, what did you take? Well, you know, that person's causes are going to be much different than yours besides the live active virus. And so that's why it's really important to be focused more on the causes you have and less on the treatment. Because once you know the causes, then you can match up the treatment to each of those causes. You're going to be a lot more successful.

Laura Frontiero, FNP-BC

Oh, my gosh. So did you just say that it's individualized?

Evan Hirsch, MD

That might drop?

Laura Frontiero, FNP-BC

I think that's what you just said.

Evan Hirsch, MD

Absolutely. It's individualized.

Laura Frontiero, FNP-BC

Right. And so this is where you viewing right now, whether you have one COVID or, you know, somebody who has long COVID or you might get it in the future, you get to be helped through this. And it's not the same thing that helped your brothers or your mom or your dad or your husband or your wife. It may not help you, right? Oh, my gosh. This is a this is a my mic drop moment, 100%. Okay. Now, I want to get into your method, but can we talk a little bit about spike protein and a little bit about what's happening there? And a little bit like I don't know if you want to go down, you can go wherever you want with this. But I think our viewers also would really like to understand shedding and what that means because, you know, you hear like shedding is not possible with this. It's not a regular vaccine. And so what do you say about spike protein?

Evan Hirsch, MD

So I was recently at a conference and they were talking about they actually showed slides of different organs, different organ tissues, and they were showing spike protein found in pretty much every single organ system in the body. So in the brain, in the lungs, in the liver and the kidneys, etc., in the skin. And so consequently, we know that the spike protein can get into all these different parts of the body. And this is part of the reason why you can have so many symptoms. We can have, you know, over 200 different symptoms. And whether that spike protein is coming from the vaccination or whether that spike protein is coming from the live active virus, it doesn't really matter.

The reality is, is that it is there and then there is this idea of of the shedding. And I haven't seen any studies on it yet, but I've definitely heard a lot of anecdotes of people who have had who have had exposure to people, whether it's COVID or whether it's the the vaccination that they've had. And they end up getting symptoms. And then the spike protein is found in those organs as well. So I definitely think that it's a real phenomenon based off of my experience. And the reality is that the treatment that we're going to do is going to be very similar. You know, we're going to attack it from a number of different fronts to prevent the spike protein from getting inside the cell, inside the mitochondria, from replicating. And there's all sorts of these different aspects to the to the entrance of the spike protein into the cells that we're able to target.

Laura Frontiero, FNP-BC

I feel like there's just so much we don't know at this point. There is a lot of research that is yet to be completed and we get to prove or disprove what we think we already know. I mean, that's constantly going on in any level of medicine. And to think that anybody has all the answers right now is just kind of ridiculous because we're really just kind of slogging through this right now, trying to figure it out. But the thing that I love about what you just said is we can't ignore the experiences that people are having, right? So and when we do this a lot in medicine, when when the labs don't line up, we can't ignore the symptoms of the person in front of us. Right? So we have to pay attention to the person and what their experiences and what their symptoms are.

Even if we don't have a laboratory test to prove it or any kind of scientific research to prove it or a study to prove it, we can't ignore what we're seeing in large numbers.

Evan Hirsch, MD

Yeah. And you know, when you take a look at what the definition of evidence based medicine because everybody likes to a lot of yeah the medical establishment likes to lean on that it is research but also in the same breath if you look at the definition it says experienced by an expert. So, you know, they do give credence to practitioners who are doing this on a daily basis and understanding and seeing how these different systems are working in relationship to other things and coming to conclusions, you know. And so you have to remember that evidence based medicine, this is evidence based medicine is looking at the observations of of people who are on the front line now.

Laura Frontiero, FNP-BC

And when you're working with people with long COVID, because I know a lot of your practice transitioned to long COVID, you were one of the very first people who in my circle of friends and practitioners, you were one of the very first people who raised his hand and said, I can help you with Long-Covid. I mean, you were a very early adopter of there is a thing going on here and we need to solve it. And I and I have the tools to solve it. So can we talk about what how you approach it? What do you do to help solve this?

Evan Hirsch, MD

Yeah, and I would say the reason why I did that is because we're kind of infectious disease experts, you know. And so that's such a big part of the work that we do. And a lot of the behavior that we were seeing from COVID was as a virus, but then we were also seeing it as a parasite and as a protozoa. And so it was and then it was also we're seeing it as a biofilm disruptor because it was causing other infections to come out. You know, we would go and treat it as a virus and then and we weren't having success. And then we would pivot and be like, well, you know, this also these symptoms also sound a lot like Bartonella, let's treat it as Bartonella. And then sure enough, the symptoms get better.

So it's kind of like, okay, in that case, it was operating as a biofilm disrupter and was breaking up the hiding places of these infections and allowing other infections to come out. Um, so then to answer your question about, you know, what is the solution and now it's step one to find all the causes that somebody has. Step two is to make them as resilient as possible. So this is replacing the adrenals, which manages the stress response and cortisol, which is our body's natural anti-inflammatory. Upgrading the mitochondria, which is responsible for 70 to 90% of our energy, because a lot of these people show with fatigue, optimizing the thyroid, and then looking at vitamin mineral deficiencies and lifestyle habits and making sure those are optimal as well. And a lot of people come to us having already done a lot of those things because that's kind of what their naturopath can do and with their functional medicine doc. But then we get into step three and all this stuff is preparing us for step four, which is removing the toxins, removing

the infections, etc., but doing step three, it's opening up the drainage pathways, the liver, the kidney, the lymph, the nerve lymph, which is the brain lymph, the gallbladder, the intestines, making sure that all of those pathways are open. So that when we go into step four with the heavy metals, the chemicals, the molds, the infections, etc., that we can actually have a they have an exit strategy. So when we grab mold or the virus or whatever and we pull it into a drainage system of some sort, the liver, the kidneys or whatever, it actually has a place to go. So I think about step three is kind of like a funnel where it's like, you know, you're changing your oil or something and so eager dumping your toxins in here as you're killing things and as you're trying to remove it from the body end of the bottom of this funnel is not open. It's just going right back into a different compartment. So you got to make sure that pathways open because that's kind of the what we call the rate limiting step and your ability to detoxify or get rid of these toxins is directly related to your ability to allow them to get out of body.

Laura Frontiero, FNP-BC

Oh so good. You know, in all the in all my programs, the very first thing we do is we support internal drainage pathways. And this is critical to any other step we're going to do because it's going to prevent. HORKHEIMER It's going to prevent you losing your energy even more feeling sick. And I always kind of describe it as you're creating a runway for all the other work. The deeper work that needs to be done like this is this is this has to be done. It can't be skipped like an airplane can't take off without a runway. It just can't it can't land without one either. It's really critical. So I like to think of the drainage work as the runway, too. And it is the precursor to everything else. So, so, so refreshing to hear you say that as well.

Evan Hirsch, MD

And it speaks to expectations, too, because, you know, I'll tell people, you know, we may not get to treating the virus until you're six months into our 12 month program, you know? So it's kind of like we have to set the stage, though, in order for you to be successful. So, you know, people people get that. And obviously we try to, you know, under under-promise and overdeliver, right. And so, you know, potentially, you know, most of the time you're going to feel better before six months. But the reality is, is that sometimes getting after these heavy metals, chemicals, molds and infections really is the biggest needle mover. But we have to set the stage ahead of the.

Laura Frontiero, FNP-BC

It's so interesting. I want to like stay here for 1/2 because I'm working with a client right now who has a parasite. We see it on her gut test, which we're lucky we do, because oftentimes, you know, it hides from the gut test. So we're fortunate enough to see it. And she wants to go straight to killing this parasite. So I take it out of my body. We want to kill this. I want to kill this. I'm go slow down. Slow down. So obviously, drainage first create the runway, but also what else is in your body that's creating an environment that that parasite likes? So what is it? Is there are there toxins you micro toxicity of heavy metals, you have environmental toxins. Do you have, you know, blood sugar dysregulation, like what's going on here that is additionally feeding this your immune system isn't taking care of it. And so to your point, we're not going right after the

parasite because there's some pre work that needs to be done. And I think the thing I wanted to bring up here is there's a lot of debate in the even the functional medicine community about what to do first. So I, I talk, I mean, I meet doctors who want to go straight to killing that parasite first or they want to go straight to let's, let's provoke you and let's do a heavy metal provocation and let's go after that immediately. But they're not doing the runway work first or they're not gently starting to solve the parasite and bacteria problem and then addressing the the metal. So it sounds like you're kind of on the same bandwidth as me is that there is an order of operations and we see better results when we do it that way.

Evan Hirsch, MD

Yeah. And I think that, you know, it comes back to expectations where if people don't really if people don't know what the path is like, they're not going to give you six or 12 months to get them better. You know, people want to get better right away. So if they don't understand, but then they go and they see that kind of doctor who hit some hard with something. They feel like crap and but they feel like, oh, something's happening. But then the doctor can navigate them through that and then they feel worse. And then they have to, then they go and see somebody else or whatever. But they but if they, if they understand that plan and they understand that, yes, it takes these different steps in order to get to the gold.

It's like you make this investment of time and energy now and you're going to be more successful moving forward. People get that, but they just have to know that there's a plan and way too many doctors and providers are going into this without having a plan they like. We'll try this, let's try this. Even if it's natural or functional medicine, they're like, Yeah, from a functional medicine perspective, let's going to do this. But they're just not looking at that big picture.

Laura Frontiero, FNP-BC

No, they're not. And people are getting frustrated and they're not getting well. And I think also just before we keep talking about this, but I want to say that the Western medicine world has set us up for failure because it's a quick fix environment where I'm going to give you this drug and you're going to feel better in like a few days. And then that kind of makes you feel like the problem is resolved. But all you've done is you've really masked it somehow. You haven't actually got to the root cause of the issue. And that's where I think we frustration gets bred that well functional medicine just takes so long.

Well, you lived into it. You get to live out of it. And there isn't a quick fix pill that's covering a symptom. We're actually solving the problem. It's like Rome wasn't built in a day, right? That whole concept, we got to take time so that you don't get sicker as we do it. And so so so everyone watching what I would say is invest a year into your process, invest a minimum of six months into your process, and then go and see what you can do within a year's time. It would be it could be life changing for you.

Evan Hirsch, MD

Right.

Laura Frontiero, FNP-BC

Now. Okay.

Evan Hirsch, MD

So if you've been down this this road and you've been having challenges and you haven't gotten success yet, you need to when you go to interview a practitioner, you have to ask them about their success with heavy metals, chemicals, molds and infections and infections go to include parasites, Lyme and COVID. If that's an issue for you. So you need to ask them that question, then ask them like, what is your plan for figuring out all these causes? And if you don't like the the answer, then you should look someplace else. And if you do work with somebody and you're working with them for six months and you're not getting where you want to go, and there is no plan for what's coming next. You need to have a you need to go see a different practitioner.

Laura Frontiero, FNP-BC

Yeah, definitely. Okay. So now that you've that was the four step process you uncover, you unpacked all that for us, right? We covered all the steps. Okay. So now can we give our audience some pearls of wisdom on how to start doing some things right now at home as they are looking for their practitioner or as they're waiting to get on your schedule? Or what can they be doing right now to actually solve this?

Evan Hirsch, MD

Absolutely. So it starts off with daily practices. So we need to start with good habits that we do every day. And the first place to start with that is mindset, you know, so, so getting sick. We've been talking a lot about the physical stuff, but there's also the mental and emotional that needs to be worked on. Otherwise you don't get true resolution of disease. And, you know, part of what's happening here, part of the reason why you got sick is because your body's trying to send you a message and you have the opportunity to use it as a vehicle for for growth. And so I definitely encourage people to do it. And I know it sucks. I had chronic fatigue and slept underneath my desk in my office because I had so much shame around it for several years.

So I totally get it. And you also have to have gratitude for where you are and a vision for where you want to go. So those are the kind of the first two steps of our mindset. Practice is gratitude and envisioning what your ideal day looks like, and then going into looking at what sort of limiting beliefs you have, like, why am I not getting well? Why is that it, Ed, as opposed to, you know, looking for some more empowering beliefs like, you know, everything's always working out for me. I've always I've always had enough, right. And then looking at what questions are we asking ourselves on a regular basis that are not serving us? You know, maybe we're asking ourselves why? Why am I not getting well as opposed to what can I do today to love myself even

more? Or What can I do today to improve my health? Right? So that's a force that mindset practice. Then we go into some of the lifestyle stuff and it's like, you know, go to sleep closer to 9:00 in the evening, you know, avoid gluten, dairy, sugar, alcohol, you know, and, and try to eat as much organic as possible. You know, we talk about Breathwork in our program, you know, so there's we talk about movement, you know, now if you're fatigued, you can't do much movement. We talk about the Goldilocks dose of movement. So how much movement can you do without feeling worse? Maybe it's just five jumping jacks a day, you know, but doing something, maybe it's going for a walk in your neighborhood. And then you also are getting outside and you're getting the benefits of the sun and the earth.

So these are just kind of and then water drink three liters of water a day, put some sea salt in it for your adrenals. So these are just some basics that you can you can start right now and then some of the other more cutting edge ones are doing some fasting for long COVID. There's been some benefits there. But once again, fasting can be stressful on the body and that can end up compromising some of these deficiencies that we're talking about, like adrenals and whatnot. So I definitely recommended doing it as part of a process with a practitioner. But if you did want to try to do some intermittent fasting and see how it goes, where you're just not eating any breakfast and you're consuming lots of water, you know, see how you do. But if you feel worse, then don't do it. So that can be something that can be helpful for folks.

Laura Frontiero, FNP-BC

So good, so good. I'm so glad that you have all these great takeaways for our audience and okay, so we're going to wrap up here. I want to know any other extra pearls of wisdom you have, especially for our long COVID sufferers, because I know there's people watching right now who are feeling, you know, a sliver of hope where they didn't before, like, oh, my gosh, the police were busy over here. So then this happened. So there's other things to work on, right? Like this gives us hope that I can recover this. So what would you say to our audience? Who is just finally having this aha moment of I can solve this?

Evan Hirsch, MD

So I would say, yes, you absolutely can, and you're going to have to focus on your causes in order to be able to do it. You're also going to have to focus on on your history and symptoms with a provider who does that sort of thing as opposed to laboratory tests, you know. So you kind of alluded to the fact that with parasites, they rarely show up on stool tests. Well, Lyme is a clinical diagnosis, even according to the Centers for Disease Control. And so it's really important to remember that if you've had a negative Lyme test or a negative Epstein-Barr test or a negative Bartonella negative PCR test, they're no good. They're not going to be helpful for you. When we're looking at these tests, they're looking at the immune system's reaction to these particular infections. Well, guess what? The immune system is often left field right. The police have left the building. Right. And so you have to remember that these these tests are going to be inaccurate. So you have to look at these things from a bit of a different perspective. You have to change your focus and look at it from looking at your causes, and then you're going to be sick and then ask

yourself that question, what can I do today to help myself get to the goal? And you're going to eventually get there. You're going to you're going to get the you're going to find enough information. You're going to find a mentor that you want to follow who resonates with you and who's going to be accessible and be able to walk you down that path.

Laura Frontiero, FNP-BC

And, you know, this is just profound. What you're sharing, what you're sharing right now, Evan, everybody's journey is going to be a little bit different. Nobody's give me the same. And what I just heard you say between the lines is if the if we can't always see what's going on with the laboratory test, it's because we're looking at your symptoms and your history. And a skilled practitioner can put all that together and deduce or deduct that, Oh, this sounds like Lyme or this sounds like Epstein-Barr, this sounds like parasites and this. And then we go for it. We pick that protocol off the shelf like, Oh, this is acting like parasite activity. We're gonna do this, or this is acting like Lyme activity. We're going to do this. So this is where the not doing it yourself. You will waste more time, energy, money and heartache trying to do this yourself.

Evan Hirsch, MD

Absolutely. And that's kind of, you know, why people work with us. You know, you and me both is because we're basically compressing time, you know, if you want to work with your local doc who doesn't know anything about long COVID or heavy metals, chemicals, molds and infections, great. You're probably never going to get there, you know? But, you know, and maybe you work with a doc who's kind of learning these things and you're going to get there in five or ten years. But if you want to get there in the next year, then you work with somebody who actually does this all the time and they're going to be able to compress that time for you. And, you know, just so people know is that on our website, we do have a number of different quizzes based off of your history and your and your symptoms. You can go in there and you can take a look at or we got a long COVID quiz, we've got a BBC, a quiz, a Bartonella quiz. These are kind of like co-infections. We've got a mindset component that you can take a look at. So there are free resources around in order to get you kind of start on your way. But you are going to need that mentor in order to go for the gold.

Laura Frontiero, FNP-BC

So look, I think the fact that you just said you compress time like I honestly like I could see that part of your tagline. Hi, I'm Dr. Evan Hurst and I compress time.

Evan Hirsch, MD

And I love that.

Laura Frontiero, FNP-BC

It's so good. Okay, I see your book right behind you on the shelf. Picture fatigue. Excellent book. I'd recommend everybody grab that book. And again, your website is.

Evan Hirsch, MD

Energy M.D. method dot com.

Laura Frontiero, FNP-BC

Oh, good, good, good. So everyone go find Evan. He's a dear friend. He's incredible. Is extraordinary at what he does. I just want to acknowledge you for the work you do. We need an army of you to help people. Yes. And like I said, you guys, he was one of the early adopters of I know how to fix long COVID when it was even a scary time to say it was a thing. Right. Because everybody was being canceled for even talking about it. But you boldly and courageously went out there and said, I can fix this. So I remember that clearly that you were one of the first people who did it. So I acknowledge you for that. Thank you.

Evan Hirsch, MD

Thank you.

Laura Frontiero, FNP-BC

All right. Until next time, everyone take good care. Bye.