

Podcast 143 – Health Fears: The Power of Assessing Symptoms (Without Unnecessary Tests)



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Kate:

This is the Practical Homeopathy® Podcast, episode number 143, with Joette Calabrese.

Joette:

Hi, I'm Joette Calabrese, and I welcome you to *our* health care movement – yours, mine and the countless men and women across the globe who have retaken control of their families' health with Practical Homeopathy®.

So, for the next few minutes, let's link our arms as I demystify homeopathy – what was once considered an esoteric paradigm – into an understandable, reproducible, safe and effective health care solution available to all.

This is the medicine you've been searching for – my unique brand of homeopathy, *PRACTICAL* Homeopathy®.

Introduction

Kate: (01:00)

Hi, it's Kate! Joette and I are back for another podcast.

Hi, Joette.

Joette:

Hi, Kate.

Kate:

We're going to record this because we were just having a conversation, and we thought it was so good that you wanted the listeners to hear this. So, let's get into it. This is just off the top of our heads, and we're just going to have a conversation about what to do.

When Should I Use a Remedy?

Joette: (01:19)

Should I use a remedy for this? Should I not use a remedy? Should I ignore it? Should I live with it? Should I allow it to pass naturally, et cetera. I think that's kind of what the upshot of this conversation was. Wouldn't you say, Kate?

Kate:

Yes. And that's something that you talk about in your Mastery™ program because we have a whole lesson on "Is It Normal?" I think that is something that most people wonder and have fear about.

"Is this normal?" "I'm experiencing this thing, is it normal?" "Is it something I should be concerned about?" "Is it something I should take a homeopathic medicine for?"

Joette:

"Be tested for this?" "Should I be checked for this?" "Should I be worried about this?" "Can I assume that if it's (on a scale of 1 to 10), a 4, now that it's going to go to an 8, it'll progress that it could get worse." "I could die from this?" (Whatever "this" is.)

What Could Be Extrinsic?

Joette: (2:10)

Alright, so let's go back to Kate, because you had mentioned

to me that you had this sensation in your chest. And my first thought always is, what could be extrinsic? What could be from the outside coming in?

And, of course, diet matters, food matters, but that's not what I was thinking.

I was thinking that I know, Kate, that you were taking a medicine (a homeopathic) for appetite, right? To curb your appetite?

Kate:

I was, but I actually stopped taking that a while ago.

Joette:

Oh, okay. Okay. So, my first thought is in looking at that medicine – at any homeopathic medicine – if we have new symptoms, then my first thought is it's likely the medicine – the homeopathic medicine.

Kate:

That's a good point because I actually did stop taking that medicine because I had a new symptom. Now, I don't know for sure if it was from that medicine or not.

Joette:

We don't know. We don't know. All we can do is, yes, check it out. That's right.

Kate:

Yes. But I did stop taking it, and I haven't had that symptom since. So again, it could be, or it could not. But it wasn't a medicine that I absolutely needed to take.

Joette:

No, you were kind of testing it out. "Let's have some fun with this. Let's see if this will work for me and see if it reduces my appetite, et cetera."

So, that's always my first thought, is what's coming in. And if there is, whether it's a conventional drug, whether it's a vitamin, a supplement (which are, by the way, often synthetic) or a homeopathic medicine, we do have to consider that. Because what we're doing is ... we are – even if it's for good – to a certain degree we're manipulating our bodies. And so, it would behoove us to consider that the manipulation is working. Perhaps in other ways we might get some good from it, but if we get other symptoms, even if they're mild ...

This description that you were giving me today, the sensation you were having in your chest, it's rather mild, but it's new, and it's something you say, "Hmmm. I don't know. I've never had this before." That's my first clue that it could be something that you've been taking.

Now, even if you stopped taking that homeopathic – say, even four days ago – it doesn't mean that it's done. It also doesn't mean that it's still in your bloodstream, but it stimulates the body to make shifts.

As my mother used to say when we were doing something that she thought we should rethink and rearrange the way we're approaching a subject, she would say, "arrangiare te," which means arrange yourself. And so, in a way, well, she meant that we need to rethink things and to approach a concern, a problem, a condition differently. Rearrange it and rethink it and come to a conclusion.

In a way it's the same message, but what we've done is we've already arranged or rearranged, and perhaps that re-arrangement (by taking a homeopathic medicine, a supplement, a vitamin a drug, whatever else it might be) is now showing itself in a, perhaps, not so savory fashion.

Now, here's the upshot. If you had said to me, Kate, "I'm having this little sensation in my chest. It's not horrible, and it doesn't feel as though it's of imminent danger. But there it is, and I wonder what it is."

But meanwhile, you've been taking a homeopathic medicine that's helping you reduce your craving or your appetite, and it's *working*, then we have to weigh it out.

One of the best ways to weigh it out is to open up the *materia medica* and read up on the medicine that you're presently taking, which I assume you did. I know you already did that. But I would encourage people that anytime take something, you really should know what you're doing. You should know what the medicine represents. Read up on it and see if any of the symptoms that you're experiencing are noted in the description of this medicine in the *materia medica*.

Now, we're being intelligent, and we are arranging ourselves properly. So, I'm not slapping you on the back of the hand, Kate, because I've done the same thing myself ... so many times that that's how I've been able to come to this conclusion – not only in treating myself and my family, but certainly clients and thousands of students.

And that's how I can come to a more comfortable conclusion and teach people that if on the other side of this, you're finding that the sensation in your chest outweighs the benefit (or perhaps no benefit quite yet), in taking the homeopathic for the cravings and appetite – it's outweighing in such a way that it makes you uncomfortable – it's time to rethink. It's time to reassess and decide, "I think I'm just going to stop this homeopathic medicine and see what comes of that."

Or if it's something you're insistent upon, okay, instead of taking it twice daily, you might take it only twice a week and see what comes of it that way.

So, as I always tell my students, knowing how to use Practical

Homeopathy® – in other words, knowing which homeopathic medicines to choose, their potency and their frequency – is the easy part because I give it to you. I just give it out!

The hard part is knowing what to do once you've taken it (or once you've observed someone else taking it) and knowing how to assess what's next.

In other words, in a way, it's really case management. You're managing what's coming down the pike, and this is what gives us greater freedom and liberty in understanding how to treat, using homeopathy – using *Practical* Homeopathy®.

It gives us more wisdom; it gives us a greater depth of knowledge. And it puts us in a place where we can be a little more confident instead of just, "I don't know what's happening. I have no idea."

Now, having said all of this, I'm not going to tell you, we absolutely know. These are indicators. This is a way to assess.

I'm not telling you that we absolutely know. Because what if randomly out of nowhere, you have a sensation in your chest that's new, that has *nothing* to do with taking vitamin supplements or new homeopathic medicine or a drug. Now, what if it has nothing to do with that?

To be honest, we will not know. We actually may never know, but we'll have a better knowledge – a better understanding of it – from 30,000 feet above. Meaning, it's only in time will you recognize that this potentially triggered that.

Because you may try it again, and the same incidence occurs, and then, you halt the use of the medicine again. And then six months later, you try it again. And it's pretty clear that this medicine – this homeopathic medicine – causes this sensation in my chest. And is it worth it or is it not worth it?

And that's how we can truly judge whether or not we've chosen the correct medicine and the correct potency and frequency.

Kate:

Yes. One of the things that occurred to me was it could be a new food that I'm eating, and maybe it's something that I'm allergic to, and it's causing a sensation in my airways or my chest.

So yeah, you're right. We have to look at all of the things that we're doing, and I think one of the things that we see often is that people start to have this fear, right?

"Oh my gosh, it's this new thing. It must be something terrible." Right? Our minds go to that.

But what you're saying is really step back, have that bird's eye view – that view from above.

What are all these extrinsic factors? Am I doing something new? What might I try to eliminate, whether it's a new homeopathic or a new food that I'm eating? And see if that makes the difference.

And instead of having that fear, and oftentimes, Joette, if we talk to someone about this, it brings us down. And that's why we love our study groups and our homeopathy buddies, and they can help us think logically when we have this fear of something.

Routine Tests Fuel Fear.

Joette: (10:30)

And what really fuels the fear is things like regular testing and checkups.

I met with a client yesterday, and she is actually improving greatly. Mentally, he feels really good. She's had a little

setback in one area. But mentally, which was one of the greatest concerns that I had, she was improving in great leaps and bounds.

But she went to the doctor and got blood labs and said, "You've got to look at these. I sent them to your assistant so you can look at them. Have you studied them?"

And I did look at them, and to me, her blood labs looked within the range of normal, but because the labs are written the way they are, they show a red highlight for any number that's outside of the normal numbers. And so, she was alarmed because it was red, so her LDL was high. However, her ratio was perfect.

Her A1C was high by a half point – not grandly – a half point. So, it was in red. There was another ... what was the other marker? Creatinine, maybe. Everything that was off. And there were only three items that were off ... were off by a fraction, nothing that I would ever consider dangerous in the least.

So, she was panicked. She thought, "Oh my gosh, am I eating too much butter? Am I having too much meat? My cholesterol is really ... this is really serious stuff."

And these tests ... first of all, these tests are not conclusive. They're a snippet in time. That whole vitamin D thing, I question it dramatically. And I also find that if you happen to eat a lot of butter and bacon and full cream and eggs before you have the cholesterol test, it is going to show that your LDL is on the high side, but that is meaningless.

Using Symptoms to Determine Illness (Not Tests).

Joette: (12:29)

What really matters is tell me how you feel because we're using symptoms.

Now, here's the problem. Homeopathy has been teaching we use

symptoms to determine whether or not someone is ill.

Whereas, conventional medicine has taught people that there are a lot of blind illnesses ... that you could die without ever knowing that there was anything wrong. So, you'd better be tested on a regular basis.

And I think that that is – excuse my skepticism – but I think it is a way to get people to get tested on a regular basis. Because every time you get tested and every time you purchase a medication, they can bill your insurance a couple thousand dollars, minimum.

And if you don't come in to be tested and you just live your life, and if you find something that needs to be rearranged, that you maybe make some lifestyle changes, they will not make a decent living.

And that's such a shame, isn't it? Don't we all want everybody to make a \$2,000 “ka-ching” because they took your blood tests and now have alarmed you?

Excuse me again for my skepticism and my sarcasm, but I think a lot of tests – not all, but a lot of tests – are useless at best. They're superfluous. And what they cause is more harm than good. Because had she not listened to me ... she may still not follow my directive. I told her I thought everything was fine. I think that she should stay with the food she's eating.

But if she goes back, if they call her in, she'll probably be on Lipitor. She'll probably be on the drug that's used for diabetes. They'll have her on drugs in no time. And all the headway that we made so far with her staying away from these drugs could easily be lost.

Kate:

So, you're *not* saying Joette that we should *never* go to a doctor or never get a test. But you are saying use reason,

right? So, if there is an emergency situation, of course, we want to go to the ...

Joette:

Well, what I'm saying is why would you go to a doctor to find out what's wrong when there's nothing wrong? That just blows my mind!

You already know you have this condition. You've had some depression for some time. You're off of the psychotropic drugs. You're using homeopathy once in a while for that depression. You already know that you have a skin condition that is being dealt with homeopathically. And naturally. Your energy is quite good. Your outlook is good.

Why test?

Let's put it this way ... and I'm not telling you, dear followers, that you need to do this, but I'll give you *my* approach. I simply don't go to be tested. Because if I were to be tested, they would want to do a mammogram and a pap smear and lots of blood tests. They would try to prove to me that I needed this, or I needed that.

I'm looking for markers and cancer markers. And do I want to know if I have cancer markers? Do I really need to know that?

Why don't I just eat properly, live properly, get outside in the sunshine without sunscreen, eat the highest-quality food that I can obtain, live a decent life, and just go on with my life instead of spending time in waiting rooms and being panicked by the red letters and the red numbers on a blood lab report.

So, that's my philosophy. Not everyone would be comfortable with that.

Now, if I had something wrong and I was very concerned about it, and I had already made a lifestyle change that perhaps I'm

not following through enough on, and I've already used a homeopathic medicine, and yet still I feel as though I absolutely must know what this is because it's sobering enough, then I might get something tested.

But my gosh, I'm going to be 73 in a few weeks. And I have to say, that should be happening to me now. Right? By this age, shouldn't this be happening to me?

This is not luck that I've gotten this far with this quality of health. It's not luck, my friends. It's I've educated myself. I was a very sickly young teenager. I was a very sickly 32, 34, 36-year-old woman. And all of that has completely turned around with what I have studied and learned, and that's what I want to share with everyone, should they be interested.

Kate:

That's great. Thank you for sharing, Joette. As always, really good information. And it, hopefully, will help to bring down the level of fear in some of your listeners.

Joette:

Yeah, nice conversation, Kate. Take care.

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competence to protect the health of your family and loved ones with my brand of homeopathy, Practical Homeopathy®.

Kate:

You just listened to a podcast from internationally acclaimed homeopath, public speaker and author, the founder of [The Academy of Practical Homeopathy®](#), Joette Calabrese. Joette's podcasts are available on all your favorite podcast apps.

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