

Podcast 138 – Peek Inside Joette's Passionate Mastermind Group: 7 Women, 7 Homeopathic Success Stories



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Kate:

This is the Practical Homeopathy® Podcast, episode number 138, 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: PEEK INSIDE JOETTE'S PASSIONATE MASTERMIND GROUP: 7 WOMEN, 7 HOMEOPATHIC SUCCESS STORIES

Kate: (01:00)

Hi, this is Kate, and I'm so glad that you're here with us again today. We love it that you are learning about homeopathy – that you are excited and want to know more. And today, we have a very special treat for you. Joette, we're here together!

Joette:

Hi, Kate.

Kate:

Yes, in person.

Joette:

I know. It's usually not in person.

Kate:

I know!

Joette:

We meet often, but it's on Zoom.

Kate:

It's great!

Joette:

Yeah, it's really great.

Kate:

So. Exciting thing, that we're just finishing up a big weekend for us. We have some amazing students gathered together. Can you tell us a little bit about what we've done this weekend and what the listeners are going to hear?

MEET SOME OF MY MASTERMIND STUDENTS

Joette: (01:32)

Well, what we've finished – and I'm pretty excited about it because it's been such a spectacular weekend – we have 12 people, and it's called Mastermind. And it's our second year of doing this. And in order to be in Mastermind, you have to go through The Academy (which is a year long) and then Mastery (which is 11 months long). And then this just happens to be the second year of working together in Mastermind with a really tight group of ladies.

And it's always exciting because we get to know each other really well, and we help each other. That's a big part of this. And the goal is to move people along in their lives as quickly as we possibly can so they can achieve their goals: whether they're for teaching, whether the goals are to help their family, or the goals are to become a better practitioner, or wherever they are in their lives. We want to move it along faster.

So, today, you're going to be listening to a number of the

students who are willing to share some ideas and some information about how homeopathy – especially Practical Homeopathy® – has touched their lives.

Kate:

And I think one of the things that's exciting, Joette, is that this isn't someone who is a doctor or a nurse or a professional, necessarily. These are people from all different walks of life, from all over the country, really. And some of them are stay-at-home moms, as you'll hear. Some are professionals working in the medical field, some are ...

Joette:

... physical therapists, nurses. That's right. Educators. Yes.

Kate:

Real estate. Yeah.

So, you're going to hear from a number of different people, and I want this to be encouraging to you because you don't have to fit into a certain mold in order to learn homeopathy or even, for that matter, go through these steps and into the Mastermind program. You, too, can do it.

Joette:

That's true. That's true. Yes.

Kate:

Let's get started. Let's take a minute and hear from some of the students who are in Mastermind.

Joette:

Let's go.

SUCCESS STORY: BLOOD CLOTS, INFECTION, HEART FAILURE, PAIN FROM A POSSIBLE BROWN RECLUSE BITE

Joette: (03:20)

I'm Joette Calabrese, and we've just had our first meeting of our second year of Mastermind. And I'm here with one of my students who I've gotten to know quite well through the years because she's been through The Academy and Mastery and Mastermind last year, and now we're starting Mastermind this year. And her name is Lorraine.

Hi, Lorraine.

Lorraine:

Hi, Joette. It's really a pleasure to have been able to study with you all these years, and what you've taught me has been, I would say, invaluable.

Joette:

I want to hear your story.

Lorraine:

My husband became really critically ill the middle of last year, and he had to be hospitalized for two weeks. There was some heart failure involved.

Joette:

He's not an elderly man.

Lorraine:

No.

Joette:

He's in his forties.

Lorraine:

Yep. Late forties. And he had blood clots, and he had had a serious infection. And we believe that led to all these events.

Well, throughout the hospital stay, we were able to minimize a lot of the medications. He emerged from the hospital on three drugs. Over the course of the next six months. We were able to get him off of all the drugs.

Joette:

Slowly, carefully with the guidance of the doctors, but you were really leading the charge on many levels.

Lorraine:

Yes. We saw that they were creating negative side effects. We also saw that he seemed to be recovering beautifully, and that was born out with some of the diagnostic testing that we did at the end of the sixth-month period.

He is basically restored to full health at this point. He does not need the drugs. He doesn't need a lot of homeopathy, either, at this point.

Joette:

And the prognosis was that he was going to have to stay on these drugs for the rest of his life.

Lorraine:

Yes, that is definitely what the cardiologist believed.

Joette:

Now, may I say what you believe the cause was? There's the potential that this was a brown recluse spider bite.

Lorraine:

That's what we think. We never saw the spider. We ...

Joette:

That's why they're called "recluses."

Lorraine:

But it was some kind of – it appeared to be some kind of – bite. And our best guess was it was a brown recluse.

Joette:

And that turned into an infection, which then created clotting and cardiac ...

Lorraine:

He was actually in heart failure.

Joette:

Oh, in heart failure.

Lorraine:

And he did have a rapid heartbeat, but more seriously than the rapid heartbeat, he was in heart failure.

Joette:

Yes. Do you mind telling folks just a few of the medicines that you ended up using from the beginning and then the pain remedies, et cetera?

I want to recall ... I think it's important for folks to understand that your husband, Lorraine, was under the care of a doctor at all time – a cardiologist, an infectious disease. He was in critical care for a short period of time in the hospital. You never left the care of a doctor.

And then you also hired another doctor who was a student in our class with you, who also supported you a great deal. And it was her work as well that helped you get through all of this. And so much of this was under her tutelage, as well as your studying.

Lorraine:

So, for the heart failure, in his particular case – well, really, in any heart failure case, I would think, you would always want hawthorne tincture (mother tincture), *Crataegus* as a baseline.

We also used *Lachesis*.

Lachesis was additionally useful because we had some severe wounds. We had the infection, and we had some issues with the lungs. So, it was a very good choice.

Obviously, his heart rate was very elevated, and with the heart failure, *Digitalis* was very logical as well.

Joette:

And then he had pain.

Lorraine:

Yes.

Joette:

A lot of pain at the site that was shooting down and up and down that leg.

Lorraine:

So, because of the clots, we had the development of venous ulcers. (As far as we can tell, that was the cause of them.)

We surprisingly found he was already taking *Calendula* 200

internally to aid with the healing and to help with the pain. And even for infection, *Calendula* internally was indicated in the *materia medica*.

When the pain was not managed by some of the other remedies (*Hypericum*, and I used *Chamomilla*.

Joette:

Coffea? Did you use *Coffea*?

Lorraine:

I used *Coffea*.

Anyway, we were having some trouble managing it, and we found that *Staphysagria* was helpful, even though this was not a surgical, clean-cut wound. It was actually very helpful. We used that, and it was incredibly helpful.

Joette:

So, now after all these months, you were the bedside prescriber, essentially with the help of the doctor who was also a homeopath and part of our group, and also the doctors in the hospital.

And so now he's doing pretty well. He's working. There's still a little residual problem at the site of the ulcer, but now the pain is more than managed. It's gone.

And he's no longer on any conventional drugs and with, actually, the blessings of the doctors because he doesn't need them. In spite of what the original prognosis was, he doesn't need them.

And you've also backed off of many of the homeopathics.

Lorraine:

Yes.

Joette:

All I can say, Lorraine, is nice job.

Lorraine:

Well, thank you, Joette. And really and truly, your system of education and the protocols you've given us and just the general understanding of homeopathy and how it works from a high level as well as a very baseline level – just covering the whole gamut. I think that has been incredibly helpful to being able to wrestle a case like this to the ground, so to speak.

Joette:

And it's been done.

Lorraine:

Yes.

Joette:

Thank you for sharing it, Lorraine.

SUCCESS STORIES: PNEUMONIA AND A NONVERBAL, AUTISTIC CHILD

Joette: (09:00)

I'm with one of my students who I love, and her name is [Sheena](#). Some of you may already know her. She's gone through The Academy (year one), and Mastery™ (that's the second year), and Mastermind first year, and now, Mastermind second year.

So, welcome, Sheena.

Sheena:

Thank you. It's great to be back in Mastermind again.

Joette:

Well, we're here because people like to hear stories of success, even if it's only partial success. We don't expect perfection in homeopathy. We expect some shift.

And so, tell us a story that ... perhaps, a case that you've been working with or someone that you've helped.

Sheena:

So recently, a lot of people are getting pneumonia, and it's really sticking in there. It's lasting a long time, and they're trying different remedies. But I've had some really good success with that recently with a couple of clients.

Joette:

Now, pneumonia is one of those things that can last for weeks, even months. So, what are you seeing?

Do you see that homeopathy ... you give the first medicine, and bam, it's gone? Or do you see that you have to move it along, and you are pivoting at certain points? And then you get to another point, and now the person's a little better, et cetera, et cetera.

Tell us what the process is.

Sheena:

Yeah, it definitely takes some time, especially because they have been generally struggling with this for a while before they come get homeopathy.

Joette:

Before they come to you, they've already been suffering.

Sheena:

They've maybe had antibiotics, maybe even steroids, and none of those things seem to be working for the pneumonia that I'm seeing.

And so, I have to kind of hit it at a couple levels. And I do keep in contact with these clients pretty closely. Their rib cage is generally tight and tense.

Joette:

Painful.

Sheena:

Painful.

Joette:

Sometimes, even a fracture.

Sheena:

Maybe cracked a rib. Yep. That's pretty much everyone so far has had a cracked rib by the time they get to me. So, we have to do remedies for that and loosen that up.

And then, oftentimes, it's coming from the sinuses. And we forget about that because the lungs are so scary, and they can't breathe. But we have to address the mucus that's ...

Joette:

Draining.

Sheena:

... draining down the back of the sinuses. So, I generally will give them remedies for that.

And then, of course, hit the cough straight on, based on how it's presenting for that person.

Joette:

Particularly when the cough is racking or painful or causes breathlessness that's frightening, that's when we really have to hit hard with the remedies for tha.

Sheena:

And give them an emotional remedy because they've been sick for a long time. They're desperate. They're afraid they're not going to get better. They're afraid they're not going to breathe. So, there's a lot of fear involved, especially when it's been going on for months.

Joette:

Well, breathlessness can be a very frightening experience ... and especially, when you're coughing, and you need to get that breath in, and you can't get it in enough to be able to push out again and clear the chest. So yeah, it's a big deal.

What are you seeing with these? You're getting the case after it's already commenced for say, a couple of weeks?

Sheena:

A couple months.

Joette:

A couple months, first? Okay. *Then* you get the case.

Sheena:

Then I get the case.

Joette:

Okay.

Sheena:

It would be easier ...

Joette:

Wouldn't it be nice in the very beginning? But I think most people don't seek help necessarily right away because they feel as though they can handle it. And that's what we all want to be able to do. "It's just a little cough. I'll take some *Aconite* and *Bryonia*, maybe ColdCalm® or something like that.

But sometimes, it does progress, and that's when people need help. They need help from a professional such as you.

Sheena:

And sometimes it wax and wanes, so they're like, "Oh, I am getting better. Oh, wait. Nope, I'm not. Oh wait, I *am* getting better." And then finally, they're like, "Yeah, I'm definitely not getting better."

Joette:

And then at the end, usually you find people who are left with a certain set of symptoms after pretty much the pneumonia has cleared. What do you see is left in the end?

Sheena:

The rib pain.

Joette:

Yep.

Sheena:

That takes a while because you're healing bone at that point. If they've got a cracked rib and the congestion seems to linger, so it takes a while to fully get that congestion out ... especially because they no longer can cough very well

because it hurts because they have a cracked rib.

So, we have to sort of process each thing and keep going back with the pain, with the pneumonia, with the emotions.

Joette:

And then there's that fatigue.

Sheena:

And the fatigue. Yes. The extraordinary fatigue.

Joette:

Yes. And that other level that you mentioned, and that is the anxiety that remains. The fear of, "Oh my gosh. What if this happens again?" Or "What if I'm not done? What if this goes on forever?" What we all think as humans, we automatically go there.

Sheena:

The fear of never getting better is big. And then, it may trigger an exacerbation of an underlying condition because they've been sick for so long. As soon as pneumonia or whatever starts to dissipate, I think it's aphorism 35. Right? Then, the conditions that they had before come back, full strength may be even worse.

Joette:

Sheena's referring to aphorism 35 is referring to Samuel Hahnemann's "Organon." He is the founder – or the discoverer and developer – of homeopathy back in the 1700s. So, he has these aphorisms.

I think you're right ... I think it's aphorism 35. I'm impressed. You studied well in The Academy, Sheena.

Sheena:

I studied. Well, I found that aphorism so interesting because it says if there's two – and I'm paraphrasing – two distinct diseases, the stronger one will be the only one really presenting symptoms. Doesn't mean the other one's gone. As soon as the stronger one is gone, the other one just comes back.

And that really tells us that these things *are* symptoms. And then it's the body communicating with us – and it's not the illness – because otherwise, one wouldn't go away and then come back.

So, it's the body's like, "Pay attention to *this* for right now; I'm going to set this aside." As soon as that's taken care of, then the body's like, "Hey, now, you need to get back to this."

Joette:

Well, what I love about these acutes – which could also, by the way, represent a chronic condition, which is what you're saying – is that on the other side of it, we often see a shift that is an emotional or even a developmental shift that leads the person to feel, "Okay, I have just gotten through this. Now I'm done. I'm really done."

It can take weeks, months, perhaps, depending on the person, but "I'm really finished with this." And now they see things differently in their lives. I have it reported to me all the time, "Oh my gosh. I feel like a different person. Not in my fears but rather in my leap forward.

And we see this in children when they have fevers. And just before they mount a fever, they can't accomplish something. For example, they say, "I can't tie my shoe" (and that's not a good one because no one has tie-shoes anymore.)

"I can't Velcro my shoe." (It's not quite the same.)

So, I guess we have to go to “I can’t ride a bike like all the other children in the neighborhood. I can’t do it. I can’t get on it. I keep falling.”

Then, they get sick, and they get a fever. And on the other side of the fever – if it is not suppressed by antibiotics, steroids, et cetera – what we often find is once that fever has mounted and completed itself with the use of homeopathy – or perhaps not even homeopathy ... just letting it be and letting the child sleep and get well on his own – on the other side of it, now the child, when they get outside and they’re back into their normal lives again, they can get on the bike and start riding the bike. So, there’s that developmental leap. And I believe, and I’ve seen it happen in adults as well.

Sheena:

I’ve seen it all the time with adults. They may make a really huge shift in their relationships or something that is not right emotionally. For some reason, after these illnesses, it’s like a wake-up call, and they move into a much better place. Generally.

Joette:

Maybe they can make a decision differently. Something that’s been plaguing them for a while now, they can actually lean into it and make the decision. Yeah.

Sheena:

Yeah. It seems to be.

Joette:

Yeah. Yeah, yeah.

Sheena:

So, I had another case that's pretty cool. I was working with – or *still* I'm working with – a young boy who's four and a half nonverbal autistic and worked with him. On the third month, I get on Zoom, and he says, "Hi, Sheena." And honestly, for a minute ...

Joette:

Goose bumps!

Sheena:

Well, I was like, "Wait, I'm pretty sure he is nonverbal!" So, I'm trying to play it cool. Looking at my notes ...

Joette:

"Wait a minute. Did I get it right last time? Is he nonverbal?"

Sheena:

I was like, "Wait. Am I confused? What's happening?"

But he had just started talking a week before the appointment, and of course, parents were thrilled. He has continued. He's talking; he's reading; he's writing; he's spelling.

A hundred percent to the homeopathy.

Joette:

And the parents would agree with that.

Sheena:

Oh, a hundred percent. No doubt.

Joette:

Yes, yes, yes. Well, when you see a case like that, and

you've just changed the trajectory of a little boy into manhood someday, you know this medicine can't be beat.

Sheena:

It was incredible. I mean, I was surprised. I almost fell off my chair, but I was trying to keep it cool.

Joette:

I know. Great story. Well, thank you, Sheena.

Sheena:

You're welcome.

Joette:

They just got aphorism 35 and a whole lesson.

Sheena:

That's right.

Joette:

Thank you.

Sheena:

And thank you. This has been the most amazing decade of learning homeopathy, and it's literally changed my trajectory in my life. Thank you.

Joette:

I love it. I'm glad that you're with us.

FROM STUDENT TO TEACHER

Joette: (18:15)

Okay, back again, folks. Now I'm with [Noreen](#). And Noreen has

been with me through The Academy, Mastery™, Mastermind last year, Mastermind this year ... and we just keep going on together. Don't we, Noreen?

Noreen:

You're right, Joette. I just thank you for having this conversation, and I just want you to know how much I appreciate you.

Joette:

Well, and I appreciate you too, Noreen. We could just stand here and talk about that all day.

So, let's talk about maybe a story, something, a testimonial on something that's worked nicely in your life. Or how you've used homeopathy, what you've learned, and how it's affected someone that you care about.

Noreen:

Well, I didn't know anything about homeopathy until about 2019 when my son got stung by wasps, and his hand inflated like a balloon, and I didn't know what to do about it. And somebody said, "Oh, well, just get this stuff. It's called *Ledum* and use that."

And so, when I got it, I looked at these silly little white pills, and I thought, "This is supposed to do something?"

But I gave him two doses, and in the morning, his hand looked almost normal! Where the evening before, it had been swollen, red, a streak going up his arm. It was hot; it was nasty, and I was very concerned.

So, when that happened, I went, "I really need to learn more about these funny little pills."

Joette:

Well, that's interesting because 2019, I was ... 2025, just the beginning of 2025 ... so it was only six years ago. Right? Some people have been doing this for 30, 50 years. But you're six years in, and you're committed. You're all the way in because you teach [Gateway groups](#), don't you?

Noreen:

Right. So, that was my first thing. I took a Gateway class. And then I took another Gateway class with different people. And from that, I was just hooked.

And then, when you started The Academy, I decided to dive in and do The Academy ... and *only* for my family. I had no intention of becoming a practitioner. I only wanted to learn it to help my family.

At some point, going through The Academy and Mastery™, I decided that teaching was the thing that I wanted to do. So, right now, what I'm doing is I'm teaching Gateway Is, Gateway IIs, and teaching through the protocol courses.

That's my goal this year is to get through all the rest of the protocol courses.

Joette:

And you're teaching groups of people in your home, in their home, online? How do you normally do that, Noreen?

Noreen:

Well, mostly online. But I did it at a church, so, I did do it in person for the particular group. They wanted their church group to have it in person. They were very adamant about doing it in person. So, I did theirs in person, but mostly, I do it online.

And that works out good because people can be in different time zones. I can do it in the evening or in the morning.

They can come in their pajamas or whatever.

Joette:

So, who are these people? These are mothers, grandmothers? What kind of people are they? Who wants to learn homeopathy from you?

Noreen:

A lot of different people. Usually, I really have a heart for young moms because I want young moms to be able to avoid the antibiotic merry-go-round ... when you go in for an ear infection and the next thing you know, you're taking something for your stomach because the antibiotic gives you a stomach ailment. All that kind of stuff.

I want them to be able to avoid that kind of merry-go-round. So, I like to do young moms, but I seem to end up with a lot of grandmoms. I've done it for teenage girls because they're going to be, hopefully, moms and get them trained up early.

Joette:

These are people who are often independent thinkers who step outside of the box and say, "You know what? I think I have a duty that's greater than just taking my family constantly to the doctor's office and waiting in waiting rooms. I think I'll learn how to do this myself. Only, I'll do it with a homeopathic medicine instead of whatever."

Noreen:

And in the beginning, I was trying to convince my family and friends to do it. But you can lead a horse to water, but you can't make them drink.

Joette:

Not always.

Noreen:

So, sometimes, you have to wait for them to come around. And sometimes you just have to look for the “lookers.” There’s people out there that want this. And if someone says, “No, thank you,” I say, “Oh, okay. Next!”

Joette:

Well, I know you’re doing a lot of these groups, and hopefully, we’ll have it [linked](#) down below so that people know where to go to find out more. And thank you so much, Noreen. It’s always great to have you in our group. You add a level of, shall I say, wisdom, as it was said earlier, and knowledge. So, thank you for joining us.

Noreen:

Well, thank you very much, Joette.

I’m super-happy to be here, and I can’t even express how you’ve changed my life. I don’t know where I would be if I didn’t have this aspect of teaching in my life. It’s very fulfilling.

Joette:

Yeah. Thank you.

Noreen:

Thank you.

SUCCESS STORY: DEPRESSION

Joette: (23:30)

Hi, Ingrid.

Ingrid:

Hi, Joette.

Joette:

So, [Ingrid](#), you've been with me first year, Academy, right? Twelve months. Then, second year, Mastery™. That's 11 months now. Mastermind last year, which was a year, and now Mastermind, the second year. And so, you've been for some time ...

Ingrid:

I have. And even longer before then, when I found you through Weston A Price.

Joette:

Oh, that's right. Because you were practicing as a GAPS practitioner, right?

Ingrid:

Yes.

Joette:

Okay. So, you have some ...

Ingrid:

And nutritional therapy.

Joette:

Yes. And you also have a good experience in being in practice and working with other modalities.

Ingrid:

Yes.

Joette:

Yeah, yeah.

So, Ingrid, tell us your story. I like to hear this story. I know this now. So, go ahead and share it with us.

Ingrid:

Okay, great.

There are so many, but one that really stands out because it not only impacted the person themselves, but it impacted the entire family ... and then that person's entire department at work.

So, I was working with a young mom whose husband was having some depression and maybe some suicidal ideation. And in his line of work – a first responder – there are so many instances of people taking their own lives because they're just so depressed from everything they're seeing, the PTSD, the number of hours that they work in a row. So, they're sleep deprived ...

Joette:

The responsibility.

Ingrid:

The responsibility, for sure.

So, I was working with her, and first, we – since it was depression – put him on *Aurum metallicum*. But it really didn't budge it.

So, we decided to pivot after maybe two months and moved to *Ignatia* because there was such a strong element of PTSD. And it really worked quite quickly, even in a matter of a week or two.

Joette:

That's what I was going to ask you, how quickly did it?

Ingrid:

Very quickly.

Joette:

Beautiful.

Ingrid:

And within a month, it was pretty much a hundred percent improvement. So, not only did he improve, but the life was improved in the family.

Joette:

Of course, it trickles throughout the entire family.

Ingrid:

And then he became an advocate for homeopathy, telling his department and different people about this and then some other maybe digestive things that we were working on.

So, it not only worked with that family – which I'm so pleased about – but it also ... You know, once people find out about homeopathy, they want to tell everybody.

Joette:

Yeah. And you can't stop! Not only can she not stop – his wife – but his excitement and, of course, yours. Because once you've touched a life like this so deeply, there's no stopping us. We really want to learn more and do more and experience more and share it even further.

Ingrid:

So true.

Joette:

Yeah. Thank you so much.

Ingrid:

Thank you so much. And thank you so much for just everything you've done. Just knowing you has been such a pleasure in my life.

Joette:

Oh, you're very sweet.

Ingrid:

And changed my life.

Joette:

Well, I love that you're with us.

Ingrid:

Thank you.

SUCCESS STORY: AVOIDING HIP REPLACEMENT SURGERY

Joette: (26:11)

We're now with Laurie, who's been through The Academy, Mastery, Mastermind last year and now Mastermind this year. And so, thanks for joining me, Laurie. You've got a story to share, haven't you?

Laurie:

Yes. Hi, Joette.

Joette:

Hi.

Laurie:

This is about my husband. So, about a year ago, I saw him putting on his shoes to go somewhere. I'm like, "Where are you going?"

He goes, "I'm going to the ER."

I'm like, "What? I'm going with you. What's wrong?"

Basically, he was in a lot of pain with his hip.

Joette:

Was this a previous injury or something?

Laurie:

Nope.

Joette:

Just out of the blue, pain in his hip?

Laurie:

Yes.

Joette:

Okay.

Laurie:

So, we get to the ER, and basically, long story short, the doctor tells him it's arthritis ...

Joette:

Arthritis.

Laurie:

And that he needs to see an orthopedic doctor. She got him into a very well-known doctor the very next day, which was great.

Joette:

Now, orthopedic doctor is usually a surgeon.

Laurie:

This was a surgeon.

Joette:

Right.

Laurie:

So, we go to the appointment together, and basically, my husband is demanding a hip replacement. He just thought that would fix everything for him.

Joette:

Just get rid of that and get a new one.

Laurie:

Yeah. And the doctor looks at me, he goes, "Is he serious?"

I'm like, "Yeah, he's serious."

So, he grabs his pamphlet – and well, he talked to my husband – but he grabs a pamphlet, and he says, "I want you to take this home. I want you to read it. And if you still want this surgery, come back, and we'll talk."

And my husband read the pamphlet. He goes, "Yeah, I don't want a surgery."

Joette:

Yeah, do a little homework, and you might see a little differently.

Laurie:

So, I put him on the arthritis protocol. And this is now a year later, and he basically tells me often he's got zero pain now. It's gone.

Joette:

That's fabulous. But what does that mean by "often"? So, in other words, he still has pain from time to time.

Laurie:

Occasionally. But lately, he's been saying, "Yeah, I have no pain."

He's amazed. He's pretty thrilled and pretty amazed by it. So ...

Joette:

When you can turn someone around – who was really excited about the idea of a hip replacement – to taking the little pills that actually taste good, and turn them into someone who's now a believer and says, "Yeah, I don't have pain very often at all," *that's* when you know you've done your job.

Laurie:

And he's learned how to use them as SOS when he needs them. So instead of ...

Joette:

Okay. How often might that be, Laurie?

Laurie:

It kind of depends on what's going on. If there's something

that triggers or aggravates that he ends up having to go in tight spaces sometimes with his job. And so, if there's something that aggravates that hip, sometimes it could be daily for a few days.

Joette:

What kind of work does he do?

Laurie:

He's an electrician.

Joette:

Okay. So, he ...

Laurie:

He goes up into attics and ...

Joette:

Okay. Crawl spaces. Yes. Right. Okay.

Laurie:

Yeah.

Joette:

He's carrying those big, heavy cables on his shoulders. Does he have to do that kind?

Laurie:

Yeah. Yeah, he does.

Joette:

Yeah. It's a rigorous job.

Laurie:

Yeah. Sometimes, he's digging ditches to run a line.

Joette:

Yeah.

Laurie:

Yeah.

Joette:

Wow. So, if he takes the homeopathics occasionally, we're pretty happy about this.

Laurie:

He's thrilled. Yes.

Joette:

Yeah, we're thrilled, too.

Nice job, Laurie.

Laurie:

Thank you.

Joette:

Thanks for sharing.

Laurie:

Thank you.

CANINE SUCCESS STORY: DOG WITH CONJUNCTIVITIS, BODY ODOR AND BACK CYST

Joette: (29:30)

Okay. Now I'm with Charis. Hi, Charis.

Charis:

Hi.

Joette:

I've known Charis a long time, not only because you've been in The Academy and Mastery™ Mastermind and Mastermind, et cetera, but you've been a client and have become a friend.

So, it's a joy to have you here, and I'd love to be able to ask you questions. So, share something with us, Charis, about what you do and how homeopathy has been instrumental, perhaps, in your life.

Charis:

Well, I am a stay-at-home mom. I am a real estate investor. I have honeybees. I have a lot of people in my life that I'm always doing stuff with. So, yes.

Joette:

You help a lot of people. You're not in real, actual practice.

Charis:

No.

Joette:

Right? But you help your neighbors and your friends and your family ... have an extended family. There's always somebody you're treating.

Charis:

Absolutely.

Joette:

Yes, very ... you don't think so, but you've a very organized setup for your medicines, right?

Charis:

That's true.

Joette:

Yes.

Charis:

But you know, it's never enough to a mother, but yes.

Joette:

No, I know. We can never have enough.

Joette:

So, now you have a story about Blake. Now who's ...

Charis:

That's my dog.

Joette:

What does he look like?

Charis:

So, Blake is a mini-Australian shepherd mixed with a poodle. He's a little black dog.

Joette:

Yes, yes. He's very cute. I've seen him on Zoom. Yes.

Joette:

Okay. So, tell us about Blake.

Charis:

So, Blake ... I've used homeopathy a lot with Blake, and so I've used it for various reasons.

So, he's a young dog. He's a male dog. Occasionally, male dogs can get a bit frisky. So, I've used *Stramonium* with him. When he stinks, I use a little bit of *Sulphur* with him.

Joette:

You mean his skin has a bad smell?

Charis:

Yeah, like when his fur and his skin ... and there's sort of an odor coming off of him – emanating from him – I'll use *Sulphur* with him. And then he gets back to that sweet, cute little puppy smell.

Joette:

Yes.

Charis:

And then I've used *Mercurius* with him when he's had bad doggy breath.

Joette:

Okay.

Charis:

And then one time he actually had an infection in his eye, so he started getting a conjunctivitis infection. And I used the protocol for conjunctivitis, and it went away.

But at the same time, he also had a cystic little growth in his back. And that actually went away at the exact same time.

Joette:

So, what protocol did you use for his eye and ...

Charis:

It was *Pulsatilla*.

Joette:

Was it *Silica*? Did you use *Silica*?

Charis:

Yeah, but it was also *Hepar sulph*. I did use *Hepar sulph*.

Joette:

Okay. That's the back.

Charis:

And I use *Belladonna* with him, too.

Joette:

Okay. *Belladonna*, for the pain and the redness, perhaps the heat.

Hepar sulph was specific for the fact that it was an infection in the eye – conjunctivitis. Do you think it was the *Hepar sulph* that actually did the work on his back?

Charis:

Honestly, I think it was the *Belladonna* – adding the *Belladonna* in – because I'd used *Hepar sulph* before on the spot, and it wasn't moving it.

It was getting a little bit less. But then, when I used the *Pulsatilla* with the *Belladonna* and the *Hepar sulph*, then, it went away.

Joette:

Beautiful. Sometimes, one medicine doesn't do it.

Charis:

Yeah.

Joette:

Sometimes, we need to use two – alternating. Sometimes, even three.

Now, I would not go into 20, but I would certainly say that as we use the medicines, we pivot and move on to the next. Or we might even use two somewhat simultaneously. Yeah.

Charis:

Yeah.

Joette:

Nice job. So, is he less frisky now?

Charis:

Yes, he actually is. And the funniest thing was that I had a little bottle of *Chamomilla* on the counter. He grabbed it, took it down, ate the bottle, and then, he was relaxed – sleeping, just chilling out on his dog bed.

Joette:

Ate the plastic bottle? I hope it was a plastic bottle.

Charis:

No, he ate it enough that the pills came out, and then he ate all the pills. And then he was just totally chill for the next two days. And I was like, "I guess he needed it."

Joette:

Well, he just said, "That's my medicine. There's my remedy. That's what I want."

Charis:

Yes.

Joette

That's really sweet. Was he by any chance teething at the time?

Charis:

He could have been. It's funny. I bet he was. Because he was just ... that could have, yeah.

Joette:

Yeah. Well, and *Chamomilla* fixes teething and also the friskiness and maybe being a little bit too – what was he, irritable? Was he touchy?

Charis:

He was just like running around, kind of ... he growls. He's getting grumpy.

Joette:

Oh, grumpy. Okay. Grumpy poodle.

Charis:

Yeah. Not an angry growl. Like a ...

Joette:

Yes. Irritated.

Charis:

Yeah.

Joette:

Yeah. Good. *Chamomilla* put him right down.

Charis:

So he knows what he needs.

Joette:

Yeah.

Charis:

Yeah.

Joette:

We all kind of do when we really do our work.

Charis:

Yes. Yes.

Joette:

Thank you. Charis. This is great. Thank you.

SUCCESS STORY: DIVERTICULITIS AND ORTHOPEDIC PAIN

Joette: (34:00)

Hi, [Kirsten](#).

Kirsten:

Hi, Joette.

Joette:

Nice to see you here.

Kirsten:

Thank you.

Joette:

Love having you here. Yeah, it's really great.

And so, what you were just saying was that you got a case of diverticulitis that you would like to share. And I love what you just said. This protocol that you've used – and I know because I've used it for years myself – never fails you. And it is true. This is not as complicated as people would make it out to be.

So please, Kirsten, share this with folks.

Kirsten:

Okay, sure. So, I've had several different cases of diverticulitis.

I've had one that actually had a microperforation, and this person decided not to do the bowel resection. That is all that was offered to them. And so, I've worked with them with homeopathy, and they actually went for years without another occurrence. But as soon as they started to exhibit the symptoms, we administered the medicines, and within two days, the symptoms were gone. There was no lingering symptoms.

I've had other clients that were actually running a fever. So, we did the baseline diverticulitis protocol. It is *Staphysagria* and also *Lyco/Plumb*. And then, they were also running a fever. So, we added *Pyrogenium*. Again, in days, those symptoms resolved.

So, I have never had that protocol not work for someone.

Joette:

Well, and the reason you can say that is because you're a practitioner, and you're working with folks daily. And you're so funny because you said you're not working full time, and then you told us it was 60 hours.

Kirsten:

Well, that's not every week. But my husband ... he was watching. And then, he made me clock my hours. So, I had resisted that, but yes. But I'm getting tidier, so I'm working on that.

Yes. I love seeing clients. I love teaching. I love that we can teach other people how to do this. They don't always need to rely on me. We can do Gateway classes, can do protocol classes, and then they learn how to do it themselves. And then they learn how to teach others and to help their families and their community.

Joette:

You bet. You bet. You have another case?

Kirsten:

Oh gosh, there's so many.

Joette:

That's the problem. When there are so many, it's hard to remember something that stands out because they all stand out, really, when you think about it.

Kirsten:

They do!

I think orthopedic pain is a wonderful thing. I just had somebody that had a total knee replacement, and they used nothing but homeopathy. They didn't need the painkillers. They came home; they recovered quicker; they had less

swelling.

And when they returned to the doctor, the physician wanted to know what they did and actually said, "Can you give me more information?"

So, I think we're making inroads into the allopathic community ... being able to share these medicines. And then even the doctors are seeing the benefits with their own patients.

Joette:

You bet. You bet. They should all ... all orthopods should have this information.

Kirsten:

Absolutely.

Joette:

It would be really great. Yes, yes.

Thank you, Kirsten.

Kirsten:

Oh, you're welcome.

Joette:

It's really great. I loved, loved having you.

Kirsten:

It's great. It's great being here. It's great being with these women. They are the cream of the crop. I learned so much, and we, of course, have learned so much from you. And thank you for sharing your knowledge and wisdom.

Joette:

Well, you're a blessing, too.

Kirsten:

Thank you.

Joette:

I'm so glad that I could get this group willing to share with you some of their stories. Now, you know what it's like to be around people of excellence, people who have really put a lot of effort into learning and putting this into place in their lives.

What I love about this group is that this is our second year. We plan on meeting every year. And so, I just wanted to share those stories with you.

It's my honor to share many lessons on this simple method of using homeopathy for free –without affiliates or advertising – here in my podcasts, but also my [blog posts](#) and [Monday Night Lives](#).

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