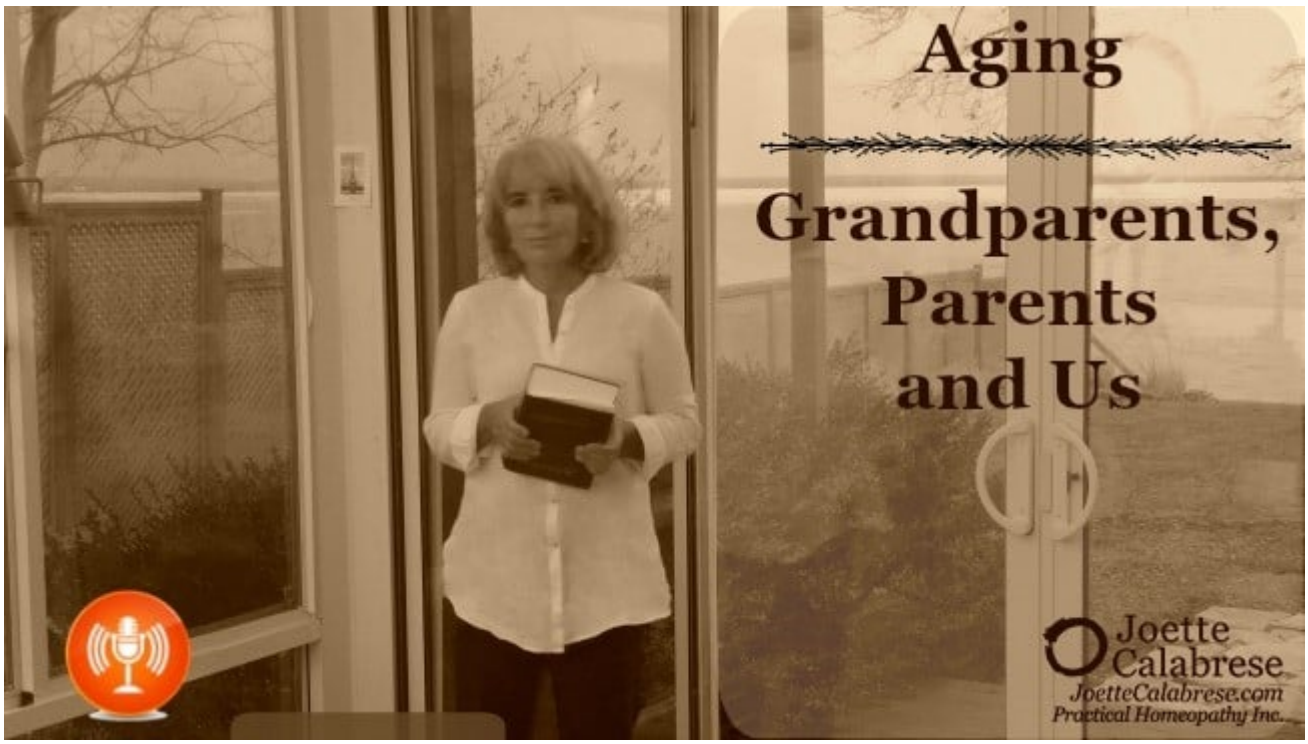
Podcast 51 – Aging: Our Grandparents, Our Parents and Us



IN THIS PODCAST, WE COVER:

06:16 Unnecessary medicines

08:04 ER Episode

09:34 Choosing your doctor

12:38 The strategy of imposing fear

17:00 Taking care of the elderly

24:45 Top aging remedies

30:25 Modern medicine

40:25 New course: Mindful Homeopathy

41:13 Joette's goal

LINKS AND RESOURCES MENTIONED IN THIS PODCAST:

Ignatia 200 – for anxiety

Coffea 200 – for insomnia

Arthritis blogs

Darvocet banned

Hypericum or *Arnica* (or both) or *Bryonia* – for pain

Weston A. Price Foundation – nutrition and health

Practical Homeopathy® course page

Gateway to Homeopathy: A Guided Study Group Curriculum

Free resources from Joette Calabrese:

Podcasts

Blogs

Most important remedies to own (remember to use the code "Joette" to receive 20% off your Boiron purchase):

Arnica montana 200C

Aconitum

Rhus tox

Kali phos

Symphytum

Hepar sulph

Joette: You don't live a charmed life in this world. Nobody gets away scot-free. There's no such thing! The fate of your family is in your hands.

Kate: You are listening to Podcast Number 51 with Joette Calabrese at practicalhomeopathy.com. On today's podcast, Joette shares her strategies for staying healthy now and as we age. We will learn about the top homeopathic medicines for anxiety and insomnia. And, stay tuned at the end of this podcast for an exciting announcement!

Hi, I'm Kate. I'm here with Joette. Today, we're going to talk about growing old. As I think of growing old, all these negative images come to mind like wrinkles and gray hair and forgetting things. So, tell me Joette, what do we have to look forward to besides that? Not that you're old, but you work with a lot …

Joette: Yeah, because I have experience now that I'm as old as I am. You know, what's really funny? I just had a birthday. I thought I was turning 67. I was *certain* I was turning 67. My son said, "Mom, you're turning 66." So, I added a year!

Kate: Oh, my gosh!

Joette: I've been adding a year for a long time. I've been thinking I was going to be 67 soon. It turned out that I was 65, and I just turned 66!

Kate: Oh!

Joette: So, I just lost a whole year. So, I have much less confidence in what I can offer today now.

Kate: But, you're much younger. Because you have your

mother living with you, and so, you are very familiar with the aging process.

Joette: Yes!

Kate: You've walked through this with your parents.

Joette: I do think that. As they say, "Stuff happens." I suppose there are ways to slow it down. In fact, I think it's almost empirically verifiable that you could slow things down. I think that a lot of it has to do with looking around you and looking at those who are not in good health – and then doing the opposite.

Kate: Yeah, right?

Joette: I actually told my kids that when they were little. Whatever everyone else is doing around you, do the opposite, and then you'll be pretty safe – in general.

I wrote an article quite a while ago called, "My Dad and the Dead Cardiologists." My father remarked how was it that he was doing so well. I mean he had his problems. There's no doubt about it. But, why is it that all of his cardiologists were dying? They were like falling like flies on a windowsill? It was amazing! I think in the article, my father and I had accounted for seven, and then after the article was published, we counted two more that had died. None of these doctors was older than my father. They were all his age or younger. He outlived them, sometimes by as much as 25 years and in many cases, 10 years.

So, why is it? Did my father have fabulous genes? No. He had a lot of brothers, and they all died quite young. His parents died young. His mother died in her sixties. His father died in his … I'm going to say it was also in his sixties. He had brothers that died in their sixties. He had sisters that died in their sixties. One sister – now, my father was one of 14 – one sister lived to 99. But, she was

the only one who had longevity – and my father, who lived to 90 (just over 90).

So, you wonder what's the difference? I think that the difference has to do with how often you go to the doctor. I think the more we go to the doctor – the more drugs and procedures we submit ourselves to – the sicker we become. Then more drugs on top of that to deal with the side effects of the first drug, the second drug, the third, the fourth. I mean, I have folks who come to me who have a page-long of drugs.

Kate: Oh, my goodness!

Joette: It takes *that many drugs*. I do the best I can to help them, but it is a sad state of affairs. You know, my grandparents on both sides of my family were very poor – especially my father's side – very, very poor when they came to this country. They were Sicilians. They were laborers. My mother's side of the family also came with no money. They were also Sicilian on both sides.

Then my husband's side of the family was very well-to-do. They did very well in the 1930s, which was unusual. They weren't hurt by the depression. My husband and I have often marveled at how often his grandparents went to the doctor. They went frequently because it was considered the educated thing to do. It was an upscale thing to do. So, they did it! They thought they were being responsible to themselves and to their families by subjecting themselves to test after test after test. And then, hence, drug after drug.

People do have to make that connection: Test equals treatment. Just know that! A test is not there to prove to you that you're great or that you're healthy. That test is there to prove to you that you're *not* well, and you need this drug. It's that simple. So, they submitted themselves to lots of tests, hence drugs. And they didn't live much

longer than my side of the family – certainly, not his grandfather and his grandmother on the other side. One grandmother did have some good longevity, but she was anti-doctor! That's what I think saved her.

So, when my grandparents got sick, my grandmother went in the backyard and picked dandelions and bark from the local herbalist and made tinctures and made teas and gave the family those kinds of things. When my grandmother gave birth, she gave birth at home – all of them. All 14 of them were born at home.

Kate: 14!

Joette: 14 kids. So, she knew her stuff! I think the more children we have, the more we learn, of course. We have to! We become less dependent on others.

Unnecessary medicines

Kate: Here's an interesting story. I recently went with my grandmother to the emergency room because she was having some severe pain in her back and in her abdomen. They were going to run some tests, but first, they came into her room with some medication for her to take. They came in and I said, "What is this medication for?" And, they said, "For nausea." And I said, "Wait a minute. She's not nauseous." "Well, yeah, but she mentioned once that sometime today, she felt a little nauseous – one time."

Joette: Oh, for goodness' sakes!

Kate: I thought, "Are you kidding me?"

Joette: Jump at it! Jump on that! You just move fast on that!

Kate: Right! If I hadn't been there questioning what they were doing, why they were giving that? And then you know one medication … like you said, the nausea medication, and then

that might have caused some other symptoms and then that medication …

Joette: Well, it would have. It has to! Conventional drugs *must* cause side effects. They are toxins. Now, it doesn't mean they can't do some good because sometimes the side effect of that toxin can be loss of consciousness – which is important if you're going to go undergo surgery. But remember, it *is* a toxin! The liver has a hard time processing all that. It's a very different way of looking at it when you realize that the side effect might be that you can get rid of headaches, but the real effect is that it destroys your liver.

Kate: Right. Choices! You have to weigh that out. How badly do you want to get rid of that headache, and what are my alternatives rather than those drugs?

Joette: Well, and the promise is specious. Even those who are promoting these drugs don't even realize that these drugs are as bad as they are. They just listen to the drug reps.

ER episode

Kate: Thinking back to the emergency room episode with my grandmother, she had some stomach and back pain. It was under her ribs. I thought about this whole experience afterwards. If you're going to take elderly parents in (or grandparents), be there! Ask lots of questions about what are they doing, why are they doing this. Because looking back, afterwards … she wanted to go. She was in some pain. We didn't know why. They never figured it out. But, they did a CT scan of her abdomen. They put this radioactive dye through her veins. Right?

Joette: Yeah, the contrasting dye.

Kate: So now, her body has to process that. First, they had

to give her fluids, so that her body could process those toxins and get them out quickly. But, she underwent that test and a couple of others. And, we look back afterwards, and I think the reason she was having the pain is because she was coughing really hard from some cold or something that she had. And I think she pulled some muscles! That's what was causing the pain. They did give her a couple of different medications for acid reflux and something else (I can't remember what it was now). So, she went home with two new prescriptions.

Joette: Yeah, on top of the ones she's already taking for her high blood pressure, the baby aspirin, the statin drugs, the leg cramp anti-spasmodic, the insomnia drug. Oh, yeah!

Choosing your doctor

Dr. William Osler who was one of the founding directors of the Johns Hopkins University once said, "The person who takes medicine must recover twice: once from the disease and once from the medicine."

Kate: It would be interesting to know when he said that – at the end of his career?

Joette: It's hard to say, but let's talk about that. Let's talk about beginning and ending of doctors' careers because that really matters in this discussion today. I love that you brought that up, because I don't think that doctors come to wisdom early on. Who comes to wisdom when you're, you know, 25? It's pretty rare. You want a doctor who's in his sixties. There are a couple of reasons for that.

The first is that there's lots of clinical experience behind him. He has been in practice a good 40 years – maybe 35 years – and he's seen it time and again.

You also want someone who thinks outside of the box, not just because of his clinical experience, but because he

doesn’t care about the American Medical Association anymore or the board breathing down his neck. He’s in his sixties. He’s almost done! He’s going to retire in a few years. So, he’s willing to question the standard of care. So, that “standard of care” means they use this method because everybody else is. Yikes! That’s not a consensus. This is not about everybody agreeing on something. That’s not the way science works. Science is not based on consensus.

Also, he’s playing golf now on Thursdays. So, he’s relaxed. When he goes to work, he enjoys it better. He is more present with his patients. I don’t mean to make doctors sound as though they’re greedy because I don’t believe that they are. I do believe that most doctors go into medicine for lofty reasons, but they’re *human*. When they’re young and they’re not making any money (because they’ve just finished a four-year residency after medical school of three or four years, and before that, it was college), and all they’ve done is borrow and borrow and borrow money to go to the next level of their education.

It’s the same as your attorney. It’s the same as anyone who’s in a profession where it costs a lot of money to get to the top, and then they have great expenses. So, you want someone who’s not focused on his woes. He’s now gotten to the point in his life where he can really be who he is, and that is someone who cares about other human beings.

Kate: You’re talking about choosing a doctor. Say, you’re working with your elderly parents. They want to have that medical care because that’s what they trust, right? So, how do you work with that?

The strategy of imposing fear

Joette: If you’re talking about that situation, that’s pretty rough to do. I take care of my mother; I am her sole provider right now. My brother shares it with me from time

to time. But, he was taking care of her for a while; now, I've got her full-time. So, I have full control, and he's on the same page as I am with her care. But, when my father was alive, that was a different story – not only for my mother but also for my father.

Now, my father trusted me. But, this is one of the techniques that you have to be aware of. He was a veteran. The VA Hospital, as well as the other doctors he was going to, called regularly to make sure that he showed up for his appointments. If they hadn't set an appointment, they'd set it then. "You've got to come in." "Well, no," he'd say. My father did *not* want to go in because he knew what was up. My father figured it out a long time ago that every time he went in, he got more drugs – and also, they scared the bejeebers out of him. But, they convinced him almost every time until the last couple of years. But they convinced him, "Look, you *have* to come." "Why?" he would say. Now, they know exactly what to say, *exactly* what to say to bring you in.

They *scare* folks. "Well, because if you don't take this drug, if you don't get this medication reinstated, you could *die*!" They actually say those things. The insinuation is you *have* to do this because this is for your health. You don't want to go to the point where you could be very, very sick from not taking this drug or from doing this or that. So, it scares people.

When I was in television sales – I used to sell airtime for a small, independent television station. Then, I sold airtime for an affiliate of NBC in Buffalo – we were trained to deal with the objections. So, when the person said, "I can't afford it," you gave them the answer that was predetermined – that was canned of sorts – to explain why they could afford it. And then even break it down for them and show them how they could. If they said, "I don't like your television station," you gave them an example of how

this television station was superior to the others (if you were dealing with competition). No matter what they said, we had the objection memorized. We knew *exactly* what they were going to say. There was nothing new. It was all the same kinds of objections, and we had all the answers. That's how it works in sales.

I also used to sell real estate in Washington D.C., and it was the same thing in real estate. It was the same thing when I was on the board of the Buffalo Philharmonic Orchestra. That you knew exactly what to say when someone didn't want to sponsor you because you've heard them so many times. Now, the person you're talking to, though, has never been in this situation before. They're brand new. They're walking in like little lambs. So, they say, "What, really? That could happen to me?"

Bam! Got the appointment.

Kate: When it comes to your health, people are worried in general, anyway.

Joette: They're already in a difficult state. Listen, I'm also culpable. I fell for all of this stuff myself – for years and years and years. I decided by the time I started to have my children that I wanted to have home births. But, it took a long time for me to get to that point. Because leading up to that, had I not gone circuitously all around trying to find the answers through modern medicine for my ill health, trying to find the answers through alternative medicine for my ill health, trying to find the answers doing nothing for my ill health, I finally came to the point where I said, "Guess what, Joette? It's in your hands." I'm a walking refutation. I can refute every one of these practically.

Now, please, don't get me wrong. I'm not saying you should never go to the doctor. I'm just saying, cut back – *way* too

many appointments, way too many … you know, well-baby checkups, well-child checkups, OB/GYN checkups. This test has got to be performed. What about your colonoscopy? What about your mammography?

Taking care of the elderly

But, we don't get to that point until we've been (like I have) beaten up, brought to our knees with conventional medicine, with drugs and procedures, and still found no answers – and then found something that actually worked. It's not until you go that far do you realize that.

Getting back to your question, when you're dealing with an elderly parent, it is very hard because they've grown up believing that modern medicine is a panacea. We've just found out after a whole generation-and-a-half or two, that it really is not a panacea. They've made a lot of mistakes. A lot of drugs have been put out there as perfectly safe: birth control pills, steroids, antibiotics (antibiotics are the big one), vaccines. We could go on and on about everything that they assured us was safe while they had a compliant audience. Because back in the day when my parents were young, there was no such thing as an educated consumer. We didn't become educated consumers until recently. Up until that time, everyone believed what they were told, pretty much. Pretty much.

At least in our society, that's the way it's been. They just believed. People were not educated. I mean in college, not that you learn in college about *any* of this stuff … don't get me wrong. But because they had not finished high school – my grandparents didn't even finish grade school. My father just barely finished high school. So, because they saw that there were other people who were way ahead of them in education, they made the consequential and incorrect assumption that those people must know more, so, we must bow to that knowledge.

Now that we are all educated with degrees coming out of our Eustachian tubes, we have now realized degrees don't tell you *anything* about self-reliance and about true health. In fact, if anything, the *more* educated the person is, the more pigeonholed they are into believing that modern medicine is the bee's knees.

Kate: So, how do we work with that? In our family, we have older parents. You have a parent that's living with you. I know many of our listeners are dealing with aging parents. What can we do?

Joette: Well, what I'm doing with my mother is super easy. I just use homeopathy. I mean there's just no question about it. There's no need to get a diagnosis for my mother. We know what the diagnosis is. We're already there. When my mother gets constipation, I treat her. When my mother has indigestion, I treat her. When she's got a rash or hives, I treat it. I just do what I know to do.

For my father, it was a little different, but, I learned as much as I could. So, if I knew my father was prone to palpitations, I knew my homeopathic palpitation remedies – because I knew it was forthcoming. It would be foolish for me *not* to know them. I knew my father could be prone to cardiac arrest. So, I knew my homeopathic cardiac arrest remedies. I knew my father could be prone to anxiety attacks, so I knew my homeopathic anxiety remedies. *And I owned them!*

And, I not only owned them – because I didn't live in the same house, I lived about 40, 50 minutes away – so, I kept them at my house, and I had *another* box of them in his house, and they were labeled. Any time my father got sick with anything, he always called me first. So, I had an opportunity to make things right. I didn't get it every single time, but I sure got it plenty of times.

I talked to my father on the phone twice a day every single day for the last decade. First in the morning, “Dad, how was your night? Tell me how you’re feeling.” Then that night, “Okay, Dad, ready to go to bed? How did you do?” I tried not to make it always about his health. I would share with him something that one of my kids did or asked him how Mom was or how did it look on the lake because they lived on the lake. “How does the lake look today?” So, you try to make chitchat and inevitably, they start sharing with you if they’re suffering.

Kate: So Joette, do you think that is key to getting them to open up and share issues that they’re having health-wise? Is that open communication – so much communication?

Joette: Yes. It’s a commitment. You better be prepared for it. If it’s not a mother or father, and someone’s the next step away … I had the same relationship with my aunt and uncle. I called her at least two to three times a week. Then when she passed away, I called my uncle pretty regularly because he was suffering so badly from grief. So, I called him everyday. So, it’s a commitment. Once you start, it’s like feeding the birds. You can’t just feed the birds and then winter comes … “Aww, I’m going to Florida!” No, you got to be there. If you’re going to start this, you got to take it all the way.

I also urge folks to think this way: Just because you know homeopathy, do not tell your loved one, “Oh, oh, oh, I got the remedy! I know what to do! This will work! This will help you!” Never say that. Never ever, ever say that. Just say, “Here you go.” Because if you get it wrong – and you will get it wrong from time to time especially in the beginning – even seasoned homeopaths get it wrong. It’s not a *perfect* recipe. It’s not a *perfect* blueprint. It’s close, but it’s not perfect. So, you don’t want to lose their confidence in you. Instead, you just say, “Here, let’s do this.” “What’s it supposed to do?” “Well, let’s see. Come on

just take it."

Years ago, I had a friend who had a parrot, and it was the cutest thing. It was called Papagaio, and they called him Poppie for short. When they would travel, I would take care of Poppie. So, every time I would take the food into Poppie, into his cage, I'd say, "Here you go, Poppie. Here you go." He'd come right over, and he'd knew that he was going to be fed. So, it's kind of the same thing. "Here you go." That's all. I wouldn't even say anything more. "Here you go." "What is this?" "It's homeopathy, and it's helped me and my family." Well, they want to know more. "There are no side effects. It's regulated by the FDA. It's medicine. It tastes good." So, once you've gotten past all of that, and now they're comfortable with that aspect of it, you go, "Here you go." Don't give any more information – because you can't promise anything anyway.

Kate: Okay. But, here is another thing, too. I recently had a conversation with someone I'm related to. They were struggling; they were in pain. I said, "What about trying this homeopathy?" And they said, "But, I don't know what's in that." I said, "You don't know what's in the medications that you take! You're concerned about homeopathy, but you're not concerned about the side effects of the medications that you're taking, and you don't know everything about those anyway."

Joette: Well, that's right. Well, they can just Google the medication. They can look that up. The problem is, now, the pharmaceutical industry and their minions have figured out that that's what people do. So, on the first page, if you say, "side effects of acetaminophen," all of them are titled, "side effects of acetaminophen." You open it up, and it doesn't say anything about side effects. "Oh, go to the next one. Oh that, that doesn't say anything about it, either." It's the *title* of the link, but it doesn't say anything about it. They are directing you to the wrong

place, so that eventually you just give up.

Kate: Yeah. So, you just get tired of looking, and you stop.

Joette: Yeah. But, another way to do it is (there are sites that you can go to, and I don't know them off the top of my head), just open up the little insert that the pharmacist gives you. You're going to have to get a magnifying glass because there are so *many* side effects that they would have to put it in a book form, so they use tiny, tiny print.

Top aging remedies

Kate: So, let's talk about a couple of top remedies for people who are aging.

Joette: Well, many elderly people have anxiety. I think one of the top remedies for that is *Ignatia* 200, twice daily. But, if they have insomnia – *Ignatia* can help with insomnia too, there's no doubt about it – but it kind of depends on what *kind* of insomnia they have. Then we can also look at *Coffea* 200 because that has busy, busy, busy mind – planning this, planning that and not being able to sleep, heart palpitations, the heart is racing, super anxious. It can be *Coffea* 200, twice daily as well – not in addition to – but it's *also* a remedy that can be useful.

Kate: Right.

Joette: So, that can calm things down just to give them a little bit of relief, no side effects, very gentle. When the remedy acts – let's say it's taken twice a day everyday for a week or so – now the person says, "Oh, I'm feeling pretty well." And then, we urge them to stop because we're always looking for that *sweet spot*. Where is the place where we stop? So, they're doing a little bit better, a little better. That's the thing that you're talking to your grandmother about. You're asking these questions. Mostly,

you're listening more than asking. We're always listening and observing and listening and observing. Just like if it were a child who couldn't give you good information – because you don't want to direct them. You want to just listen and know what to do from there. So, after about a week, if they're feeling better, then have them stop. If it starts coming back again four days later, now you know! Approximately every four days, they might need it twice daily.

Kate: Okay, so *Coffea* for not being able to sleep, anxious mind.

Joette: Heart pounding like crazy, feeling like (oddly enough), like you've had too much coffee.

Kate: Too much caffeine.

Joette: Right. I take *Coffea* sometimes when I eat chocolate too late at night.

So, arthritis is a pretty awful thing. I won't go through the remedies that are specific for arthritis because they're on my blog. So, just go to my blog and look up arthritis, and there it is. It's super easy.

Digestion is a big problem. There's a lot of bloating, indigestion, gas. Constipation is a big problem – that's a really big one. Why is constipation such a big problem? Because it is … and so is sleep, by the way … because those are major side effects of most drugs.

So, let me tell you a story. I've told this story before about my aunt who was my godmother. I was very close to her; it was my mother's sister. I gave her a homeopathy kit so that she could have … two kits actually, a 30th potency and a 200 potency … so she could have it whenever she needed it. As I said, I used to talk to her two, three times a week generally. She slipped and fell and sprained her ankle. And

I didn't know. I didn't call her that day. So, my uncle took her to the hospital. (I think she didn't call me because she was always saying she was worried that I was too busy – which was ridiculous. I'm never too busy for someone like that in my family.)

So, the doctor of course prescribed a drug. It was Darvocet. So, she took the Darvocet. She must have been in a lot of pain. My uncle said that she was weepy because of the pain. And, she had a heart attack that night, cardiac arrest and died. Now, my aunt had just reported to me a week before that she had gone to the doctor and had a cardiac test, and her heart was fine. No one in that side of the family had *ever* had a cardiac arrest. She had no history of any cardiological problems. But, she died of cardiac arrest. I was suspicious that it was the Darvocet. In fact, I was pretty darn sure it was the Darvocet. It turns out, not more than three years later, Darvocet was taken off the market. Why? Because it causes cardiac arrest in people who have no history of cardiac disease.

Kate: Wow!

Joette: Now, Darvocet has been on the market, I don't remember, I want to say it was something like the early 60s, late 50s, it's been on the market. So, it's not like it was a new drug, and no one had figured this out yet. It's not like, you know, when they say, "Oh penicillin. No worries." That's been on the market a long time. It's an old drug. Everybody thinks, "Oh, well, 'old' means like 'elder.'" No, it doesn't. Old drugs can do just as much damage as new drugs. What is odd about this is she died in her bedroom. Not more than maybe 10 paces away from her homeopathy kit. That had she taken *Hypericum* or *Arnica* or both or *Bryonia*, or called me, and I would have told her to take those medicines – who knows, she might still be with us today.

Kate: Oh. It's so sad.

Joette: But, that's just one story. I've got hundreds! And I'm sure you have, too. Everyone does! You just ask around and anyone who's got their thinking cap on has kind of noticed that when you take statin drugs, you get leg cramps that are often unbearable and relentless. When you take aspirin, you get hematomas and blood shows up in your stool. You can't play around with Mother Nature.

Modern medicine

Now, let's put this aside because I'm really bashing modern medicine here. But, I always try to make this clear. There *is* a place for modern medicine. I do believe that tests can be valuable – not tests that require that you go just because you're over 40 or 50 or 60. That's ridiculous! You have your mammogram because you're a certain age. You get a colonoscopy because they said so. I don't think so!

But, if you have rectal bleeding, and you know it's not from hemorrhoids, and you've tried other methods for a short period of time (homeopathy, in particular), and you're not seeing a change, and you don't wait too long (I would urge you not to wait too long), then you find out what it is! Get a colonoscopy! Find out what's going on! It could be quite valuable to know what that is. If you have a lump at the axillary, under your arm, and you haven't had that before – okay, now it's time to have somebody check that out and find out. Is this a lymph node? Is this cancerous lump? What is this? Is it because I'm eating too much chocolate? A lot of people get that! So, tests can be *very* valuable. And we can see inside the body now like we've never been able to see. But, I would save those tests for when they're needed, not just to fill someone's schedule.

The second thing that I like about modern medicine is that if someone's in an accident – in an automobile accident – you don't pick them up and take them to a chiropractor or to a homeopath. Of course, you go to the emergency room! Those

people know what they're doing. There are things that they do that I'm not crazy about. But, on the way to the hospital, you're administering the homeopathic medicine if you know it – and you ought to if you're going to take this to heart. Then you put them into the hands of those who deal with this everyday all-day long. There's no doubt about it.

The third reason that I like modern medicine – and there are probably others, too, but these are my main reasons – is that when you have to have surgery, *truly* have to have surgery, it can be a lifesaver. It can be a life changer. It can be a needle mover. There's no doubt about it. Surgery can be very, very valuable. The drugs that accompany surgery can be valuable because when I had my tooth extracted, I *thought* about it. I seriously thought about not using a local anesthetic. I talked to my dentist about it pretty thoroughly. He had done it without a local anesthetic.

Kate: Oooh!

Joette: Yeah, he had his friend do it. He did it. I said, "So, tell me about this." He said, "Well, it was pretty painful." So, I am a chicken. So, I didn't do it. I did get a local anesthetic. But I thought about it! So, the drugs that they use before surgery, of course! *Hello*! That's where modern medicine shines. It's in the chronic conditions and these drugs that are used just to suppress symptoms that I find it lacking.

So, this is about self-directed life. I don't believe I'm speaking just to those who have elderly parents and grandparents. I'm hoping I'm speaking to the elderly parents and grandparents. I'm hoping they're listening, too, and they start questioning – or continue questioning if they've been on this road for a long time. I work with a lot of elderly people who do not use drugs. So, they seek me out.

Kate: So, for those who are wondering if this is possible,

it *is* possible!

Joette: Well, so far so good for me! I mean I had to have a tooth extracted because it cracked, and there was no integrity remaining. So far, my husband, too! So far, my children – of course, they're young; they're in their twenties and thirties. I've an old dog. Buster's old. He's 13. So, so far, we've been able to do it.

Kate: And, your mother.

Joette: And my mother, that's right! And my mother. Someone told me the other day, "Well, the reason that you didn't have to worry about taking your children to a pediatrician is because you were lucky." *Luck*! Really? You don't think my kids got chicken pox and ear infections and bronchitis and strep throat and conjunctivitis and injuries and broken bones? Really? No lacerations, never bitten by an animal? Really? Did you really think that? Stepping on a nail, croup, birth? Really? You thought that I just lived a graced life?

Kate: And skiing, how about those skiing accidents?

Joette: Skiing injuries, head injuries, concussions, *we've had it all*. Falling from trees, being bitten by animals, my gosh, we've seen it all. We've seen it all! You don't live a charmed life in this world. Nobody gets away scot-free. There's no such thing. And, the more children you have, the more you see of it. The more rambunctious and outdoorsy they are, the more likely it's going to happen.

Kate: Right! And you had all boys!

Joette: Right. We had food poisonings. We had – oh, my gosh – eczema, parasites, constipation, diarrhea. You name it; we've had it all. So, the fate of your family is in *your* hands. It shouldn't be in the doctor's hands. This is up to *us*. It's always been up to us. That's why I never got relief

from the doctors. It wasn't because they were scoundrels. It's because it wasn't their life, it was *my* life. When they finished with me, they went on to the next patient. It's my job to figure this out, and so I did.

Don't get me wrong. I don't want to elevate myself by saying that I did it, and others haven't. But, the only reason I can say that is because I was sick for so long from the time I was six weeks old. My mother and I were on a path. First, it was my mother alone, and then it was my mother and I were on a path to try to figure these allergies and food intolerances, et cetera, out – this chronic fatigue and everything else that was plaguing me.

So, it took me a long time. In fact, in Italian, there's a term – I don't even know if I'm pronouncing it properly – it's called "testa dura" which means "hard head." It took me until I was 30 to figure it out. What the heck! Why did it take 30 years? I should have figured it out when I was 20! I would get a urinary tract infection. I'd take an antibiotic, and I get another urinary tract infection. Then I wouldn't be able to drink milk anymore! Then I get another urinary tract infection and take another antibiotic. What the heck was wrong with me?

And birth control pills, how stupid could I have been? Now, we've all been stupid. As I said earlier, I'm culpable just like anybody else. But *finally*, I figured it out. When I was 30-31, I decided, "That's it. I'm done with the drugs. I've had it." So, I just stopped everything. Then I slowly started to learn a little bit about vitamins which was vacuous as far as I'm concerned – vitamins, supplements. I learned about herbs which I thought was great, and I still think is good. I started to learn about essential oils which have their place, and nutrition – but I started off all wrong. I started with macrobiotics! My poor husband. "My God," he said, "Kale again? No cheese even? Not even any butter with the stupid kale."

Kate: He was very tolerant.

Joette: Oh! He was tolerant. He's great. Then it was veganism. That was another several years. And, then I found Weston Price. I always loved cooking. So, it was a joy to learn some of these things, but they were very myopic – really narrowed down my choices. And then along the way, I found homeopathy. That turned my life around. It turned my world around. That's what I hoped to do for others is to just help you turn your world around, too.

Kate: Joette, I hear that so often as I'm doing these interviews for the podcast. I hear people say, "When I found homeopathy, that's when it all changed. That was a turning point in my life." And, it's so exciting!

Joette: Well, each one of those paradigms that I just described gave me a little bit of something. So, I thought I had little aha moments, but it wasn't until I got to homeopathy, and then it was the tsunami of information and credibility and data and capability. It came at me with such a rush. It was a wind that came at me and just filled my sails, and I've been sailing ever since. I want to share that with others.

I don't want to make it sound like Kumbaya here. What I'm saying is that if you knew the answer to world peace, shouldn't you share it with people? If you know the answer to how to deal with health – not all illnesses – we can't do everything. We can't cure everyone. "Yes, all illnesses have been treated with homeopathy successfully, but not all people have," said Dr. Prasanta Banerji to me once. But, if you knew that there was a way that that child did not have to have antibiotics for that croup or a breathing treatment for that asthma, don't you think you should tell people about it? That's what I'm here to do – to tell people about it.

Yes, I have classes. I have courses, and the courses are very much in-depth. They're not inexpensive. But they're very, very in-depth. We do have our Gateway classes which are very inexpensive and a great way to meet with other people and to study homeopathy together. But, if you can't afford anything but to listen to me on these podcasts, do *just* that.

Kate: Read your blogs, too.

Joette: And read the blogs.

New course: Mindful Homeopathy

Kate: Okay, before we leave today, I want to share some exciting news about a new course that we have coming up.

Joette: Yeah, it's called Mindful Homeopathy, and it's about psychological problems, mental problems, emotional problems such as sleeplessness, anxiety, worry, fear, attention deficit disorder – all those things that fall into a different category than the general conditions that I've been teaching so far. Sometimes they overlap. Attention deficit disorder can often be related to gut. So then, I harken back to the gut course, as well. Anger – violence even – we can work with that with homeopathy.

Kate: Addictions.

Joette: Addictions, yes, thank you.

Kate: Yeah, it's going to be exciting. I can't wait!

Joette: Yeah, I think so, too! I think so, too.

Joette's goal

My goal – one of my goals, I have many goals in life – but, one of my goals that could affect others is that I hope to reach 100,000 families by the year 2020. I actually think

we're really darn close to that. We've got two years left. So, I'm going to have to up that goal.

I want to see, if nothing else, *Arnica montana* 200C in every medicine cabinet in this world if that were possible. *Aconitum* – those are all important remedies – *Rhus tox* (very, very important), *Kali phos* (really important), *Symphytum*, *Hepar sulph*! Read about that on my blog. It's free! Just read about *Hepar sulphuricum calcarea*, a very important remedy to have on hand for your family.

So, the fate of your family is in your hands, whether we're talking about your family's education, their well-being, the structure of the home, the wellness of their prayer work, the wellness of their health. It's not up to the government. It's not up to the doctor. It's up to *you*. So, I leave you with that heaviness. But, there's also a great deal of joy in accomplishing this mission.

Kate: You just listened to a podcast from practicalhomeopathy.com where nationally certified homeopath, public speaker, and author, Joette Calabrese shares her passion for helping families stay strong through homeopathy. Joette's podcasts are available on iTunes, Google Play, Blueberry, Stitcher, and TuneIn radio.

Thank you for listening to this podcast with Joette Calabrese. To learn more and find out if homeopathy is a good fit in your health strategy, visit practicalhomeopathy.com.