

Cognition Solutions

Dr. Heather Sandison, N.D. interviewing **Dr. Valencia Porter**



Dr. Heather Sandison, N.D.

Welcome back to the Reverse Alzheimer's Summit. I'm your host, Dr. Heather Sandison and it's such a joy for me to introduce you to Dr. Valencia Porter today. She is the author of this phenomenal book, "Resilient Health," she's also an MD, MPH, a leader in integrative and environmental medicine, combining ancient wisdom traditions, such as Ayurvedic medicine with modern science. For over a decade she worked with Dr. Deepak Chopra at the Chopra Center for Wellbeing, providing integrative medical consultants, consultations and teaching health professionals and community how to achieve total mind, body and spirit health. She's passionately advocated for real solutions to the global problems of climate change, pollution and knowing that personal and planetary health are intricately linked. Dr. Porter is now on our team here at South Surrey. We were so lucky to have her. She also is the doctor seeing the majority of our Marama residents and he has her own deeply personal story to share about her treatment of dementia patients. Dr. Porter, thank you so much for being here.

Dr. Valencia Porter

Thank you, I'm so excited to join you here.

Dr. Heather Sandison, N.D.

So I want everyone to know sort of the arc of your career trajectory. You were just sharing with me that things have kind of come full circle for you. Before you even went to medical



school you were involved in the studies on Aricept, one of the earliest dementia drugs out there. So tell me a little bit about just how, the whole circle.

Dr. Valencia Porter

Yeah, I mean, it's so fascinating to me because I started out my career, I was very interested in cognitive neuroscience coming from a computer science background and it was because I was studying artificial intelligence that I fell in love with the human brain and all of the potential that we have. So before I went to medical school I was a research assistant at Johns Hopkins and I was one of the people working and doing the neurocognitive, neuropsychometric tests to evaluate how Aricept was doing. So that was one of the initial drugs for Alzheimer's and it was, you know, so fascinating to see what was going on there and then I went to medical school and decided to go into child neurology. So my career started out in child neurology, I wanted to really work on keeping people's brains healthy, keeping people functioning and well, however, I became frustrated with the conventional medical system because the only tools in my toolbox really were pharmaceuticals which had, you know, potentially harmful effects, potentially severe side effects and I kept seeing that time and again with my patients and meanwhile my patients were looking at the other areas and they were exploring homeopathy, different types of diets. This was before gluten-free was a thing that was well known, osteopathy and they were coming to me asking me my opinion on these things and I really didn't have much of a background in that and so I couldn't tell them yes or no, I didn't have much of an opinion. when I asked my colleagues they said, oh, that's all, you know, BS. So, but then my patients were coming back to me improved and I said.

Dr. Heather Sandison, N.D.

Wow.

Dr. Valencia Porter

Okay, well, we may say it's BS but it's doing something so I'm gonna go look over there and that began my journey into integrative medicine.



Wow, and then you were at the Chopra Center for a long time, tell me more about what you did there, who you were seen.

Dr. Valencia Porter

Yeah. So at the Chopra Center where we were seeing people from all over the world and we're, there were a group of us who were traditionally chained, Western physicians, MDs, but we were also trained in Ayurvedic medicine, which is a form of medicine from India that dates back thousands of years. So when conventional doctors say I practice evidence-based medicine, I always like to say, well, there's evidence in using a system of medicine for thousands of years. But anyway, so we were seeing clients there as well as teaching about Ayurvedic lifestyle which to me really blends hand in hand with functional medicine, which is in my opinion, kind of a modern day version of Ayurvedic medicine and what they have in common is that one is, you're looking at the whole person, a whole system, not just a little slice.

We wanna look at the whole trajectory, you know, where did they come from? How did they grow up? What are their, you know, family history, as well as family dynamics and, you know, looking at the whole mind, body, spirit picture. Food is a huge focus. So we believe that food is medicine and to me that is a foundation for health. If you don't have healthy, good food, you know, you can do a bunch of things but you're, you know, going to have incomplete healing. So food is a foundation and also prevention. So looking at catching disease and preventing disease before it even develops. According to Ayurvedic medicine there are six stages of disease and unfortunately, Western medicine really only catches you at that sixth stage. Once you have developed something full-blown and, you know, have lab markers or radiographic findings or, you know, something that you can visibly see, whereas from an Ayurvedic standpoint we can catch things on a more subtle level before they have fully developed. We start by figuring out where there's an imbalance in the system and work to try to bring it back into balance and harmony with nature as well.



Then you your pediatric neurology, did that inform what you were doing or were you just seeing adults there? Have you continued to see kids?

Dr. Valencia Porter

Yeah, so I, you know, before I did pediatric neurology I was a pediatrician and then after I left child neurology for a while I was working at a pediatric clinic at a community clinic. I love that. I love seeing children, but most of the people coming to the Chopra Center were adults. So I saw people from, you know, who had a wide variety of issues, a lot of people with chronic stress, people with serious illnesses where they really open their minds to say, you know, I really have to look and take a, you know, take stock of my life, my lifestyle and make a change. You know, for many people when they come across a serious medical illness, medical diagnosis that ends up being a time to make some of these important lifestyle shifts.

Dr. Heather Sandison, N.D.

And so now you're seeing quite a few dementia patients. How did you end up with that interest?

Dr. Valencia Porter

Yeah, you know, it just continued to be a focus of mine, always optimizing health and optimizing brain health, you know, has always just been a passion and when I heard Dr. Dale Bredesen come up with his protocol and saw his research, heard him present I was like, wow, finally. Finally somebody is looking at the whole picture and I could see. So from all the other chronic illnesses that I have been seeing and working to help people prevent and reverse, a lot of auto-immune illness, a lot of people with environmental toxicities, you know, things that aren't necessarily at the forefront of people in the Western medical community and the approaches that are helpful there. So when I heard that I was like, oh yes, you know, this is a fantastic program, a wonderful opportunity to shift the trajectory for so many people. Because when you look at it from a, you know, population standpoint and



one of my board certifications is in preventative medicine as well. You know, the population is headed towards an epidemic of dementia and, unfortunately, and hitting at younger and younger ages and I was starting to see that in my practice already. People were already coming to me saying you know, they're in their fifties and sixties and saying, you know I'm having some cognitive issues or genomics is also a passion of mine, people learning about potential genetic susceptibility saying, you know, I have this gene, what can I do about it? How I prevent from going down this pathway?

Dr. Heather Sandison, N.D.

Yeah, so exciting and so what have you seen clinically?

Dr. Valencia Porter

Yeah, it's been so fascinating. As you know there are so many things to look at and I love that Dr. Bredesen has, you know, the 36 point checkup, but it's probably more, much more than that and really finding the holes in the roof and plugging those holes. So to me, you know, this is the same way that I treat all of my patients. I take a very holistic look at them, I'm looking at, you know, I tell them I'm gonna look at every nook and cranny so that I can figure out how to best help you because the treatment really is individualized and personalized, it has to be tailored to that person instead of just slapping on a diagnosis and do the name it, blame it and tame it where then you're giving a pharmaceutical that's inadequately treating because you are missing all these other things.

So it's been fantastic trying to help these people turn things around and I have seen progress, knock wood, in pretty much everybody, at least some type of progress or, you know, slowing of the decline. But when I'm able to see reversal I'm always just so thrilled. So that's been wonderful and then in terms of prevention and giving people peace of mind, that's also been really helpful as well and usually when people come to me for that preventive aspect as well, they're starting to notice like the little slip, you know, we all get to a certain age and we're like, oh, you know, having a little moment there, maybe this is part of my aging but it's been amazing to see how people can, you know, even turn that around.



Yeah, I think it's such a big part of why I'm hosting this summit, why I have the clinic that we live and operate in and then Marama where residents live is because it's so important to change this narrative, right? That when it, when you start to notice those senior moments, like we say, that that's not indicative of a directly downward spiral into dementia, that there are things that you can do and that the neurologist as well-meaning as they are, they don't always know that these things are possible, right? There is this kinda tendency to be like, here's some Aricept, here's some Namenda, get your affairs in order, there's only one trajectory for you, when really the truth is that there's lots that we can do and if we look back at the root cause and we can systematically go through all of that, the more comprehensive we can be, the more confidence I think that you and I both have in the results that we see which are, you know, very compelling.

I think because we're in the process of changing the narrative, it is work. It takes a lot of work for people to change their diets, start exercising, change the routines, shop differently, take the supplements, take the hormones, you know, do all the pieces and we've been socialized really to think like, kind of like you've got strep throat, take an antibiotic, it'll be gone in a few days and so this is a very different approach to health and healing and it does require effort and when people are in the throes of dementia or later in life and they're used to the routines, it's challenging to get people on board and that I think limits the potential of the progress that they make. But the more of this we do, the more studies we publish, I think the more people are really gonna engage in this and take back control of their health.

Dr. Valencia Porter

Yeah and I think, you know, that, to your point, you know, it's about the narrative and we've grown up in this narrative of, you know, better living through modern chemistry and a pill for every ill. I certainly, you know, was an advocate for that for a long time and I think for some, many things, it does work. For example, if you have an infection and needed an antibiotic and Western medicine is fantastic, is, those things, that acute medicine, emergency medicine, you know, saving so many lives and, you know, really improving



outcomes there. But when it comes to chronic illness I think what people need to understand is that chronic illness doesn't just happen overnight. It has developed over a long period of time just as we, you know, have learned that Alzheimer's starts developing 20, 30 years before it's diagnosed. So I think that narrative has to be changed of, you know, when you have something that's been developing over 20, 30 years, it's not going to turn around overnight. It's going to take a long time to reverse all of the things that led you up to that point.

Dr. Heather Sandison, N.D.

Yeah. It's so neat to see some of the residents at Marama, I saw them today virtually, but I was having a little conversation with the couple who's been there for over a year now and his language is just so much more fluent, so much more fluid. He communicates so much easier and they're not even on the Bredesen Protocol yet, it's just the lifestyle. So I cannot wait to see what happens as they establish with you and really get the, all, you know, like I said, I think the more comprehensive we can be in our approach, the more benefit we get and so I just cannot wait to see how things unfold for everyone there really. So you have a very personal connection to dementia, would you mind sharing a bit of your dad's story?

Dr. Valencia Porter

Yeah. So, you know, I've been working on these aspects of the Bredesen Protocol for years but I didn't officially, you know, take the course and complete the certificate until just last year and I'm so glad that I did because wasn't until, you know, shortly thereafter that I discovered that my dad had fallen into dementia as well. So during COVID he was all by himself. He's 85 years old. All the people that he knew were over 65. So he lives, you know, thousands of miles away from all of his three children, my two sisters and I live far away and he was afraid of COVID, he did not want us to come and so he was on his own, this bachelor, 85-year-old. My mom took care of him so well and she passed more than 10 years ago. So he's been doing the best he can nutritionally but, you know, he always, he would visit us. He would visit his daughters and we would, you know, boost him up and feed him really good, wonderful, healthy foods but because of COVID he couldn't do that and so he



was left on his own, he was afraid to go out. He was an avid exerciser his whole life. I mean, ever since I knew him he would exercise on a daily basis because of COVID he stopped, he was afraid to go outside and many other things were happening during that time and, you know, I could tell he was under some stress during that whole time but then around December of 2020, Christmas time actually, I was like, I remember who we were on a Zoom call and he couldn't figure out how to fix his remote control of his TV. He couldn't figure out how to get the battery off and I was wondering, is it vision? Like, what is it? And then there were some other things that I noticed and so as soon as I could I got up to see him and I thought maybe it was because of the nutrition, because of lack of sleep. So I got up there, I fed him really well, I got him set up. But then we, with his permission we installed some cameras in his house 'cause we said, we wanna check in on you on a more regular basis, make sure that you're okay since you're living alone and we started to notice he was wandering around at night. He had some medications for his heart that he needed to take and I wasn't sure that he was taking them on time.

Dr. Heather Sandison, N.D.

Oh, no.

Dr. Valencia Porter

So there was an episode where he got acutely confused and my sisters and I were all worried and I, we called 911 on him and he went to the emergency room. They checked him out, meanwhile, I'm flying up from California to Washington State, so I'm there within a number of hours and they checked him out and they're like, ah, he's, you know, got some cognitive issues but you know, he's a pleasant 85-year-old. He's a very intelligent man and so he can fool people pretty well. I mean, you ask him about history, he can conversations about the history of the world, the history of the U S and you know, you do not know that he's impaired but I could see it because I know him and he was an actuary by profession and so numbers were a big thing and I saw that he was having issues with some calculations and I was like, okay, this is an issue. So we took him to, well, actually made an appointment with a neurologist but that was months down the road because to get a



neurology appointment probably anywhere, I mean, and I remember when I was a, you know, pediatric neurologist, you have to wait months to get in to see a neurologist. So meanwhile, here I am armored with the Bredesen Protocol, I said, okay, dad, we're gonna do this and he had already heard about this work, this type of work from watching some programs on television. He was already interested in that because he wanted to stay as healthy as possible as he aged. So he was up for the challenge and his physician ran some of the blood work for us so I could get some understanding of where we were at. But when you looked at all the different areas, you know, the five, six different types of dementia, he had almost every type, happening at once.

Dr. Heather Sandison, N.D.

Oh, wow.

Dr. Valencia Porter

So then I'm like busy plugging all those holes in their room.

Dr. Heather Sandison, N.D.

Which is almost a blessing and a curse, right? Because in a way it's like, wow, look, there's so much we can do and we kinda know and then in another way it's like, oh man, there's a lot of work to do. I think Dr. Bredesen and I have had these conversations around, okay, if it's six or nine months, somebody is not getting better, what are we missing? Those are the places where, you know, I don't necessarily get excited but I get really curious of like, what is it that we're missing? Because we know these 36 or 72 or however many you can list these days, we know some of the holes but there's still some holes we haven't identified yet and so this is a work in progress. So for your dad you had a lot of them. What happened?

Dr. Valencia Porter

Yes. Yeah, and you know, I didn't even, I hadn't even measured all the markers that you could possibly measure. I was like, okay, we have enough. We have enough to work on here.



We can get started.

Dr. Valencia Porter

But, you know, nutritionally, that was a big thing and so, you know, my suspicion that things had gone off with his bachelor diet were correct. So we worked on correcting those. He was having some like blood sugar issues. So that's a big thing, we're still working on that. In terms of toxic load he did, he had some perchlorate actually which I ...

Dr. Heather Sandison, N.D.

From the water.

Dr. Valencia Porter

Yeah, I was really surprised and his thyroid was off and I'm still not sure if it was from the perchlorate or what, but yeah, so he had some toxic gloats, he had some mold present. What else? Some, you know.

Dr. Heather Sandison, N.D.

Were you able to check heavy metals?

Dr. Valencia Porter

We did do a NutrEval, he actually did not have heavy metal issues on the NutrEval. I'm trying to think what else we ran on him. Oh, we didn't run the gene test yet, but I know from my genes that I have a methylation issue and I also carry the APOE4 gene. So I was like mm-hmm.

Dr. Heather Sandison, N.D.

Came from somewhere.



Dr. Valencia Porter

And he did have some elevated homocysteine. So I was like, I think we've got a methylation issue here too. So, you know, you can, you, when you're a clinician and you've seen so many of these, even if you don't have all the pieces you can kinda put the puzzle together and get a general feel and then he also had some vascular issues, which we're still addressing as well. So snoring, we're still working on that, he just had to sleep study. So, you know, even despite my background it takes all, it takes time. It takes work and it takes diligence to work through all of these things. It was challenging to have him adhere to the diet, you know, he's 85. He has lived a certain way his whole life and then all of a sudden I'm asking him to eat a completely different way. Like, he's a bit regimented and so like he would, and he thought he had a healthy diet. So he was like, at breakfast I always have my cereal and my banana and my orange and I'm looking at that I'm like, sugar.

Dr. Heather Sandison, N.D.

That's why you have a sugar problem, oh, jeez. Yeah.

Dr. Valencia Porter

Yeah. So, you know, but my whole life I have always seen him every morning with a banana and an orange so to, you know, to reverse some of those habits, to shift some of those habits, that was hard, 'cause he's like.

Dr. Heather Sandison, N.D.

And your.

Dr. Valencia Porter

He's like, fruits are good for you, right? And I'm like, yeah, but maybe not so much.

Dr. Heather Sandison, N.D.

And that's too bad for you, right? That's what we heard through the eighties and you're asking someone who can't remember very well to change their diet.



Dr. Valencia Porter

Yes, exactly. So, you know, we were blessed that he agreed to come stay with us. So my sister lives nearby so she and I were tag teaming and I'm blessed that she's also a nurse practitioner. So she had a medical background and she was on board as well. So we really worked hard with him and then he really wanted to continue to live independently so we buffed him up as much as we could and then he wanted to go back home so we did, we had him go back home. My other sister was there with him and we brought in some help and we were trying to see if that would work and ultimately he decided, I think partially because of what happened during COVID, you know, being alone, he was like, I don't, he didn't wanna be alone anymore. So he recently moved nearby and is now doing so much better. I mean, I would love to repeat his testing, the MoCA test and we also did the CNS Vital Signs. So we're gonna have to do that pretty soon so I can see, but definitely there's been so much improvement. When he recently went in for, you know, there's the mini mental status exam which is a screening test that, you know, practitioners use and the top score is 30 and he just only moved down here so he just missed one 'cause he didn't know what county we were in.

Dr. Heather Sandison, N.D.

Wow.

Dr. Valencia Porter

Yeah.

Dr. Heather Sandison, N.D.

So he's, yeah, I can't wait to hear what his MoCA is now compared to before and the CNS Vital Signs. That's amazing, well done. Oh, he's so lucky.

Dr. Valencia Porter

Yeah.

Dr. Heather Sandison, N.D.



So one of the things that you said you found for him was mold and mold toxicity. That's a conversation we've been having with Dr. Margaret Christensen, Dr. Neil Nathan, Dr. Jill Crista. We've had a handful of people here on the summit and please all of our listeners go over there and listen to some of those talks if you're concerned that mold might be an issue for you. I have come to think that it is probably the number one hidden cause of dementia and that it's completely missed by conventional medicine and so it's also totally treatable.

There's a lot you can do that's actionable and you don't necessarily need a ton of money to do it. I have patients who, you know, if they can they can sleep in a tent outside and then they're getting half the exposure or a third of the exposure 'cause they're around inside all night. So there's lots of practical tips, lots of ideas of what you can do. So definitely dive deeper into this if you're interested and then I wanna hear from you how you kinda discovered the mold, if you think he was currently being exposed and have you tested that one again?

Dr. Valencia Porter

Yeah, so, you know, he was living in the Seattle area, so obviously there's gonna be stuff there and previously he had lived in, you know, very humid environments and had a lot of books and papers and I've seen a lot of people with mold illness so I know what that's all about and all of the stuff that can be contaminated and then you take it with you and then he was in a very humid, wet environment again. So, yeah, so that was one of the first that I was like, okay, we gotta check your mold level here. So we did the urine mycotoxin test and found that to be a positive. I also was wondering if part of that was due to his diet as well because during COVID he was going out minimally for groceries and kind of stocking up and so I think he was also eating some not great food.

Dr. Heather Sandison, N.D.

And then he has the sugar too, so potentially Candida, which might've been contributing. **Dr. Valencia Porter**



Yeah. It could be colonized and growing it internally too. So we have not followed that up yet, we plan on doing that but yeah, it's an issue and there's a lot of, you know, the things that came with him and came with him on his move actually, may have some mold to it. So we really need to pay attention to that and what happens there. But yeah, I agree with you, I think that is one of the biggest hidden causes. You know, we talk about inhalational Alzheimer's or inhalational dementia. It's huge, huge issue that people are not aware of and Western practitioners really only think about mold in terms of allergies and respiratory issues. So I've, I have a lot of clients who are like, oh yeah, my doctor told me that's nothing, it's nothing.

Dr. Heather Sandison, N.D.

And yet they have these many, many symptoms, many systems affected and when we get the mycotoxins out, they usually disappear which is so satisfying and fun to see people go back to their lives, go back to living so fully.

Dr. Valencia Porter

Yes, yes.

Dr. Heather Sandison, N.D.

So you also are seeing some of the Marama residents, so we're working together to sort of create the vision of what that looks like and you know, what, all of the accoutrements, the fun things that I think you and I get excited about, you know, the red light therapy and the, certainly the Vielight, the Joovv light, LiveO2 the exercising with oxygen therapies, the BioMat and the BrainTap meditation. So we were chatting a little bit about that but I'm just excited to share with our listeners kind of what your vision is of how seniors might age in communities and in places that really put their health first. So yeah, share what you would design if it were totally up to you and what you wanna see for your patients who are there.



Dr. Valencia Porter

Beautiful, and speaking of vision, I'm about to be blinded by the sun reflecting off of this house.

Dr. Heather Sandison, N.D.

It's really pretty light on you.

Dr. Valencia Porter

Oh my gosh. I'm just gonna shift for a second so I'm not blinded. There we go, that was funny. All right. Yeah, so a vision of this, you know, so I love the idea, the concept behind Marama because now having personally seen what it takes to turn it around and to me, you know, brain health, like every minute counts, every second counts, right? So in my opinion, like with my dad I wanted to turn things around as soon as possible. So to have a place where you can go and really comprehensively work on it and get supported in terms of managing the diet, especially if somebody's cognitively impaired it's a lot of work and to manage the supplements that also might be part of the protocol as well and then to get all the support. So, you know, doing meditation and Kirtan Kriya, doing the exercise with oxygen therapy and the red light, I mean, all of those things sauna.

So, especially if you have detox issues and mold issues to have access to those things right at your fingertips is wonderful and then I would love to see more senior living communities, embrace healthier lifestyles. So I just, with my father, went on a grand tour of many of the communities in my area and honestly it was depressing. Not that they were bad, they looked fun. It looked like vacation. But when I saw it, I was like, oh, what kinda lifestyle is this promoting? And of course, I'm looking at the menu and talking to the chef and seeing what's going on, you know, most of these places they are like, you can have wine at lunch and dinner and I'm like, no, no, no and dessert all day long, here's an ice cream bar that's open all the time and then the foods are comforting but not necessarily healthy. There were, you know, better and worse, but unfortunately a hundred percent of them I felt were promoting of chronic disease and chronic illness because of their focus on these comfort



foods and desserts and less emphasis on, you know, vegetables and healthy foods and every time I asked, I was like, so do you use any organic produce? They were like, what? So, you know, adding to that toxic burden as well. So I would love to see my, so my dream is that more communities will embrace this and I think as you know, as our populations are aging hopefully more consumers who are going into these communities will be pushing for this because that's what they respond to. They respond to consumer demand and, you know, I have some bright ideas of how they could get fresh organic foods and not break the bank. You know, there are ways of having urban gardens that are sustainable, regenerative, organic. It don't have to take a lot of space. You don't even have to have dirt, you can put it right over pavement but I love that, you know, at Marama we have our organic garden there and that's great to not only eat the food but it's a wonderful activity for the residents and I think it's such a great way for when people are able to connect to food and connect to the food that they're about to eat. Like, I think that is so motivating for people as well.

Dr. Heather Sandison, N.D.

Yeah and they're engaging, it's fun to watch the community inside of their relationships also evolve around the garden and just, yeah, all of the activities really, so fun. So where are do you see things going like over the next 10 years? You have this master's in public health and you've looked deeply into environmental medicine, so what, I know the trajectory looks a little bit bleak but in terms of solutions, we've talked about senior living and how that can change, what else would you like to see in the field of neurology, in medicine, in society?

Dr. Valencia Porter

Yeah, you know, I would love for more people to understand what functional medicine is all about and really looking at that root cause approach. I think there has been some headway made in the functional medicine community and especially at the Cleveland Clinic where they're, you know, functioning within a traditional Western medical system and I think the Western practitioners over there are seeing that they're getting great results. So I'm hopeful that people's mindsets will be open by seeing the good results and that's what I've seen with a lot of my clients is that, you know, they improve and then they go back to their



doctor and their doctor's like, what did you just do? What helped you? How did you fix this? And so I think, you know, getting people to be curious about it by showing the good results and the good outcomes. It's, you know, hard to convince people by, you know, beating them over the head with it but when they see the proof, when they see the results, when they see their patients shifting, you know, I think that's the best proof. Of course, it's wonderful to do studies but that's difficult to do like a whole lifestyle evaluation and of course, it's always compared to that double-blind, you know, placebo-controlled trial which you can't do with lifestyle medicines. So again, shifting the narrative. Oh my gosh, this light is so crazy. I'm gonna shift the lighting again, I'm so sorry.

Dr. Heather Sandison, N.D.

We're chasing the sun here.

Dr. Valencia Porter

Okay lemme go over here. Good thing my desk is on wheels.

Dr. Heather Sandison, N.D.

I know and it's nice that you have that beautiful window with your, all of your natural light in your office.

Dr. Valencia Porter

Yeah, yeah.

Dr. Heather Sandison, N.D.

Yeah, it'll be nice when more studies are published and you bring up such a good point, right? This doesn't lend itself. It's not a one variable mono, you know, pharmaceutical intervention that you can easily blind and control. This is really a disease that sort of too complex for our reductionist and simplistic model that we hold a such a high standard, right. We really need, we need a system of evaluating interventions that meets the complexity of the chronic complex diseases that we face as a society and so my hope is that



there's a shift in how we kind of grade these things, right? That the double-blinded placebo-controlled trial, it doesn't give us the information. It hasn't gotten us to a healthier population or even a less sick population, it's gone in the other direction. So we're clearly missing something and expanding our understanding in the, in, like you said, chronic diseases and complex medicine is essential.

Dr. Valencia Porter

Yeah, so, so true and I think that's becoming, you know, more and more so with all these complex illnesses, you know, I see a lot of auto-immune illness in my practice and you know, why are people getting multiple autoimmune illnesses? You know, it's not just bad genes. It's a lot of these are environmental factors and I really think that we need to look deeper at the environmental factors. That's part of the reason why I went back and got my master's in public health, is because I realized that my understanding was inadequate. In medical school we learn about poisonings, we learn about occupational exposures but we don't learn about the everyday exposures that we have and, you know, since World War II, more than 84,000 novel chemicals, new chemicals have been released into the environment and so when my Western colleagues tell me, hey, detox is, you know, BS because if you have a working liver and kidneys you don't need it. I, you know, that might've been true a hundred years ago but now we've got all this chemical soup that we have to deal with and I don't know if our systems can quite handle it. You know, we have not really evolved, shifted our, you know, evolution of our physiology in the last 10,000 years.

Dr. Heather Sandison, N.D.

Right.

Dr. Valencia Porter

You know, and this is just like, come on, like in the last second we've just been bombarded by all these chemicals and we see all these chronic illnesses going on this upward trajectory, why is that?



Yeah, some even more research into that and hopefully a societal shift towards getting rid of them while we can.

Dr. Valencia Porter

That will be nice too.

Dr. Heather Sandison, N.D.

That sure will be nice. So at least stopping to produce them and spray them everywhere. I recently was reading some paperwork about the building and it was like, you're in an agricultural zone, you have no legal rights. If you, if there's any spraying pesticides, herbicides, anything that you, like, there's nothing you can do. You're signing that away if you choose to be anywhere in like a two mile radius of this and I just believe it, I was like, wow, not only are we like eating it all the time but like you, when you move in somewhere you've gotta sign away your rights to ever have anyone look at it and they can spray these forever chemicals right next door, right outside your door without, across the, just across the property line even though it crosses into your space, it's like we have no, there's no boundary anymore between us and the chemicals in a lot of ways, do you have any tips for listeners to help them either detox a little bit better or prevent the exposures?

Dr. Valencia Porter

Yeah, so, you know, that's part of the reason why I wrote the book, was really as a handbook for people to see what kind of actions they could take, what potential exposures they have, what that possibly would mean to them, thank you, and then what can they do about it? And so I go through 52 sets, my 52 point checkup, 52 different things that you can evaluate and see, you know, does this resonate with you? Does it seem to be impacting you? And how can you shift? But for me, the, you know, it's like a pyramid and the base of the pyramid is the food, the food that you eat. Because that, we might not have control over who's spraying what outside and like today I was walking around outside my neighborhood



and I was like, who is using a dryer sheet? And spreading that toxic smell all over my neighborhood.

Dr. Heather Sandison, N.D.

We don't need dryer sheets, no one needs dryer sheets.

Dr. Valencia Porter

It's amazing 'cause you could smell it in the whole neighborhood but, so I don't have control over that but I do have control over what I'm putting into my mouth, what I'm choosing to eat and you know, if you're able to afford organic food that is great. If you have a tight budget and wanna just focus on the most heavily contaminated ones, you know, the Environmental Working Group, ewg.org, Dirty Dozen list is very helpful. But even if you can't afford organic food just eating fruits and vegetables, even non-organic can be so helpful and I think a majority of Americans are deficient in their diet in terms of the number of fruits and vegetables that they eat. So I like to add things before I take away. So I'm gonna say just add more vegetables especially the green leafy vegetables and cruciferous vegetables. There are so many different ways to eat them and prepare them, there's so many different types so if you're like, oh, I don't like that, try something else or try to prepare it in a different way. I was blessed that I had a Korean mom growing up and she always made these wonderful Korean vegetables.

So I grew up loving spinach. You know, most kids are like spinach, blah, but she would make this fantastic Korean spinach and I, you know, I could probably eat a pound of spinach at a sitting because it was so tasty. So, you know, part of it is about making it appealing to yourself, but you know, really paying attention to the food that you're putting in your body, reducing the inflammatory foods, so processed foods, high sugar foods, those types of things and making sure that you're getting enough pure, clear water. So water is the best drink for us. If you want a little flavor I would recommend putting some berries or mint in there. If you want a little fizz, that's fine. But you know, we are mostly made of water so we should probably drink some.



I like to tell patients also just taking your shoes off at the door so that you're not chucking in everything from the outside and that although, you know, there's all kinds of pollutants everywhere but indoor air quality tends to be the worst and so if we can open all of our doors and windows, even for just an hour a day and get that good outdoor air flow. Dr. Crinnion one of my mentors, he's deceased but he was just such a gem and such a gift to our community, our naturopathic community and he always said the solution to pollution is dilution. So the more that we can get, you know, good air coming through lots of water to dilute whatever's in our system, all of those things are so, so helpful to reduce overall toxic burden.

Dr. Valencia Porter

Exactly, yes. Crinnion was my mentor too, I loved him.

Dr. Heather Sandison, N.D.

Oh, the best.

Dr. Valencia Porter

Yes. Yeah, so and the air quality, yeah, that's so true like, we have closed up our buildings so tightly to try to make it more energy efficient and we have really made sick buildings. So if you're able to open your windows or even if you don't have windows that open, even just open the doors and try to get some cross ventilation for a couple of hours during the day that can make a huge impact and then, you know, talking about Dr. Crinnion reminds me, you know, one of the things that I talk about in the book is like, make sure your exits are open and clear. So many people have an issue with constipation and not going to the bathroom. So how to toxins leave our body? They leave through pee, poop, sweat and breath. So make sure that you're, you know, hydrated, drinking water so that we can pee the toxins out, make sure that you're going to the bathroom at least once a day, if not more so that they're released because if they're not some of those toxins can get taken back up into the body, doing breath work. So exercise, I think, you know, is so beneficial for many



different reasons. I think part of, one of the reasons is that we breathe deeply when we exercise and we release toxins there and then sweating. So when we exercise we sweat, doing sauna therapy is also amazing and there was a, you know, a number of studies out of Finland, which has like a sauna culture, which I love. I'm like, I wanna go to Finland, but they show that, you know, their decrease in a number of illnesses, the number of chronic diseases, as well as overall mortality for people, the more that they do sauna as a lifestyle. So getting your sweat on is really a good idea too.

Dr. Heather Sandison, N.D.

So exciting. Any other parting words for our listeners? And also I want to make sure they know where to find out about you, certainly they can become a patient of yours here at South Surrey, at our clinic, your book, the name is "Resilient Health: "How to Thrive in Our Toxic World" and it's available on Amazon, I've seen it there. If you have another place that they can buy it and were else they can learn more about you. I want everyone to know.

Dr. Valencia Porter

Thank you so much. Yeah, so my website is just my name, valenciaporter.com, pretty easy and yeah, the books on Amazon and I hope to come up with an update soon as well, but you know, partying word I would say is, you know, just because you've been given a diagnosis or you found out that you have a certain gene don't give up hope, you know, keep pursuing and looking for people who will listen to you and hear you. I think some of my patients they've expressed that to me, that like you are the first one who's actually heard me and listened to my story and listened to my concerns. So, you know, keep looking, keep looking for somebody who will hear you and who will look at your overall picture and partner with you as well. Like I consider myself a partner with my patients, my clients because it is a partnership. If you're not gonna partner with me we're not gonna get very far. If you're not going to, you know, adhere to the treatment, you know, it's, what good is it for me to tell you? So, you know, I, there oftentimes I could give, you know, a list of 40 things but I really have to say, you know, what is it that you can do and are willing to do? So it is a partnership.



Yeah, absolutely. You reminded me when you said about the genes and the diagnosis, I've had a handful of women in their forties and fifties lately who starting to notice a little cognitive decline and they end up finding out their APOE44 positive and I think that in retrospect, 10 or 20 years from now, they're gonna look back and say, that was the best thing that ever happened to me because I did something about it and I'm not going down the same path that my mom or dad or older sister, older brother went down, I'm gonna be able to prevent this and I'm gonna be able to get my health back and that just changing the story, just changing the conversations, having conversations with a partner like you are and getting the, you know, having the ability to take back control, to take initiative of your health trajectory is so important and it's there, it's there for the taking. Dr. Porter you wear many hats, you're a caregiver, a daughter, a doctor, you are doing so many things right now in this world to help the dementia verse, everyone in the space and I just couldn't be more grateful to have you on my team and to be getting to have these conversations with you and just, you know, grateful that you are supporting people with dementia so directly, thank you for the work you're doing.

Dr. Valencia Porter

Thank you so much and thank you for your work as well. I'm so excited to be helping people at Marama, especially. I think it's a wonderful place.

Dr. Heather Sandison, N.D.

Thank you.