

Caspar ([00:00:00](#)):

So Lauren, thank you so much for being on the show. And when I first heard your story, I was, I was definitely, it hits a string in me because you have this, you know, incredible story of, of coming from adversity and unhealthy state and disease into a place where you're helping so many others right now you're healthy yourself. But you know, what really struck me is, is how young you were when this all started. And I have lots of guests on that sort of say, maybe it started when I was a teenager, you know, in, in my early years. But I, I, you know, I was somewhat healthy as a child, they say, and your story really started at two years old. Is that correct?

Lauren ([00:00:39](#)):

Yeah. I was diagnosed with juvenile rheumatoid arthritis a month before my second birthday.

Caspar ([00:00:46](#)):

And tell me, you know, because you, you probably don't have many memories of two years old. I know I don't, but, but tell me what you can kind of share with us as far as what were your parents told as to why, what were your parents told as to what would be your upbringing, how things would be, what was that sort of, you know, that early age, what was provided to you and your parents from the medical side?

Lauren ([00:01:11](#)):

Yeah, it's a great question. And it's kind of usually where I start the story because it lays the foundations for the rest of the story. So I was diagnosed just before my second birthday and it was following the measles rubella vaccine. So I had the vaccine, it was 1986, so it was two years before the MMR was released in the UK and straight after I got virus. And then from that virus, my ankle swelled up and then my knee swelled up. And then I was diagnosed and the doctors, the top pediatric rheumatologists at the time were saying that the best way to knock it on the head quote unquote was with, with really, really high doses of oral steroids. So, you know, two year olds being pumped full of these high doses of oral steroids, that was what they thought at the time was the best way to treat this.

Lauren ([00:02:01](#)):

And I was actually under, I mean, it was just an NHS, the NHS you know, the national health service, we don't pay for it, but I happen to be under one of the top pediatric rheumatologists in the country and the UK in London. And this was her, this was kind of her doing. She had, she was the one that had advised this route. Now my parents who were both left school at 15, had no education in anything, let alone natural health. My mom just had this niggle and she was, she, she went to the library, took us up to the library to read about steroids, you know, what is arthritis doing? This was informed choice in 1986, taking herself to the library. And I don't know why she did it. And she doesn't know, she just knows she was intuitively guided. And that has been my lifesaver because that really has laid the foundation for everything I've done now.

Lauren ([00:02:52](#)):

And she decided that no, she wasn't going to allow this into her two year old. And so she told the doctors that she was going to find another route. And they told her she was a bad mother and she, you know, she was really pressured. And even my dad and my grandparents, and my grandparents were spiritualists interestingly. So, you know, I was taken to spiritual healers and all that. So all that stuff was always normal for me, but even so there was fear, you know, there's this authoritative figure sitting

there saying, well, Mrs Vaknine, you know, this is the wrong decision, her joints are going, and this is, this was what they said, her joints will be damaged and she'll end up needing a lot of joint replacements. If you don't put her on these steroids. Now, the interesting and very ironic thing that I saw as I grew up.

Lauren ([00:03:37](#)):

So my parents then kind of intuitively decided on homeopathy and homeopathy and herb's was how I was treated along with kind of the spiritual healing. And yeah. And so we would, I was part of this this physio group of children around my age, but, you know, varying kind of age ranges around my age, throughout my childhood, the same group. And though I wasn't as I was noticeably different to my school friends. I was, you know, more slowed down and sometimes I had to sit on a chair in assembly and I couldn't go to some of the, you know, heavy, you know, running parties and stuff like that next to the kids in the physio group, I was really noticeably different. So a lot of them were not growing properly. They were short that, that it was like the limbs weren't growing properly.

Lauren ([00:04:24](#)):

So their limbs look shorter. And obviously when you're on steroids, you get that kind of puffy face. They started getting joint damage. They started having joint replacements. The girls weren't getting their periods and I was growing and growing and everything was happening normally in my body. Now I wasn't in remission. And I know now that that's because we didn't have all the missing pieces, it was the eighties and the nineties. There was no internet. And my parents really did the best they could with what they had, but that was what, that was the extent of what they had. And they also didn't have very much money to keep exploring options. And, you know, homeopathy was expensive and they kept data and they, they really poured everything they had into it, but we didn't yet kind of know the diet aspect and all the, the lifestyle aspects of it.

Lauren ([00:05:12](#)):

So, you know, we ate my parents are kind of, you know, Mediterranean and we ate that sort of diet, but there were diet Cokes and there were chocolates and there was, you know cordials with aspartame. I now know it's best aspartame, you know, and we, and so I think that that was because everything is so multifaceted. And so the homeopathy was helping to keep my body strong. And my immune system was strong. I wasn't coming down with every illness that all the other kids with arthritis were coming down with. You know, my immune system was strong and I looked normal. And however, there may be some people, I don't think they will, but there may be some people that see that as a superficial thing, but as a child growing up, your, all your limiting beliefs are predicated on how other people see you and how other people treat you because of that.

Lauren ([00:05:56](#)):

And so for that was a huge thing. I looked normal, you know, especially in my teenag years. And so that was kind of how it went in that respect with the doctors. And they kept telling me, regardless of seeing how I was growing, I had no joint deformities and the rest of it. They, they kept on. I did have to have injected steroids, steroids injected into the knees and ankles because when I had really bad flare ups and there were a lot, I, my parents didn't know what to do that, how to move me. My, you know, my, my knees would literally be like, there was no bending, you know? And so they would drain the knees and the ankles and inject steroids. And I was also diagnosed with a condition in my eye an inflammatory condition called uveitis, which is connected with the arthritis.

Lauren ([00:06:42](#)):

I was diagnosed with that three. And my mum was just too scared to not use the oral steroid. I'm sorry, not oral the steroid eyedrops. Because with the joints, we could see what was happening. If I was having a flare up, we could see it. I could feel it with the eye we didn't always know. It was only kind of when you looked into the machine and they would say, she's got a lot of cells. There's a lot of inflammation, the pressure's low. And that was really scary for my parents. And so I went through that. I had a lot of injections steroid injections into the eye. So that was a lot of trauma that I've had to work through subsequently in years. Cause you know, that was I was really young. So there was that factor as well that I wasn't free of steroids, but the doctors always said to my parents, no, don't worry.

Lauren ([00:07:27](#)):

The injected ones don't enter the body in the same way. It does, it won't really kind of live in the body. It will just come out. Obviously we now know that to be true to not be true. And so I think that had a big impact as well, but essentially they were guided very much towards the steroids. They made a decision for themselves, but what actually happened was 15 years later, this pediatric rheumatologist who had suggested the very high doses of steroids apologized. So it was the wrong decision because she could now see the secondary illnesses and side effects that all these children had had. And I'm now 37. And I, over the years, went back to the hospital and saw these people. Some of them died and it's never the arthritis that kills it's the medications, the secondary conditions that come as a result of the medications. And most of them are just completely immobile. And that's my experience of seeing firsthand that my mum just had this niggle. She just knew that it wasn't okay. And she followed that. And obviously there's a lot more to the journey. Cause things got really bad after that, but essentially that was what set me up.

Caspar ([00:08:42](#)):

I mean, a mother's intuition is something else. I always say a woman's intuition alone is way better than a man's. So I think that's, that's settled, but you know, in this modern day age, we put aside intuition and we listen to the experts, quote on quote, the doctors and we put all our trust into them. And as you saw yourself, I mean, I'm, I'm actually a little bit shocked that this doctor would admit that 15 years later, but this is the truth of medicine right now even, happening right now in modern medicine. In 15 years, we may look back and say, no, oops, no, that was not the best course. And unfortunately that, oops is a big deal. That's life or death in many and, and severe suffering for young children. Now, I love to hear that your parents were in some ways renegades, and didn't go fully in, on just all these steroids. And you saw the results of some of these and, and people that aren't here anymore 15 years or 20 years later, but what were they told? What were your parents told as to why a two year old with developed JRA diagnosis?

Lauren ([00:09:49](#)):

Oh, it's just genetic,

Caspar ([00:09:50](#)):

Genetic, right?

Caspar ([00:09:52](#)):

That's the, go-to, it's the go-to

Lauren ([00:09:54](#)):

For everything, right. It's just patchy, actually it was hereditary. That was the word back then. And I don't think my mum actually understood. And I always say my dad was present as well, but we'll say my mum, because she was kind of the one that took control of it. And my dad just, you know, really was just emotional about it and couldn't really make any decisions. But my mom always says, yeah, they said it was hereditary, not genetic. And I grew up hearing that and kind of not knowing what's the difference. And there was no awareness of epigenetics or understanding that lifestyle played a factor to play the role in any way. No one made the connection between I have the medical records. Now there's a direct correlation between the vaccine, the virus and the joint swelling. But no one ever made the correlation.

Caspar ([00:10:42](#)):

To this day, aside from yourself, has anyone sort of made that correlation looking back, let's say this other doctor, 15 years later, the one who put you on these steroids and said that that would have been that, you know, I'm glad you didn't, that was wrong. I admit that, I see that now, would that doctor, if you show the steroids or maybe you have showed these results and, and the records, would they show any correlation that the vaccine might have been the cause of your juvenile, rheumatoid arthritis?

Lauren ([00:11:13](#)):

No, I've heard the word coincidence so many times. I don't, I don't really have much contact with conventional doctors anymore. That specific rheumatologist, she passed away a long time ago. The one I, I, I was with her from the age of two until the age of four. And then I was passed on to another rheumatologist who took care of me from four until 18 when I left her because of the medication that she had put me on, that we can get onto that nearly killed me. But even she, so I contacted her in recent years because I held so much resentment towards what I felt she had done, but also to say that not everything is about stastics and not everything is about you know, there is so much more to it. And she kind of apologized actually, but wasn't able to, she didn't make any correlations or agree that she just kind of gave me the scientific lingo of what she, you know, it was just, it was just very much bypassing what I'd I'd suggested.

Caspar ([00:12:14](#)):

I mean, I, I know that doctors are in some ways made to kind of disconnect from that emotional experience side of a patient and the evidence, the clinical research, and to be very, you know, logistic like and, and it makes it difficult, I think for a doctor to really admit that even when it is a little bit blatant in, in certain circumstances, not to say across the board, everyone has a different, unique one, your experience though, and everything you start at such a young age and went through. I mean, you, you can't discount the experienc is what I'm saying. And your experience was one that I think was, was very you know, blatant in many ways. And you saw the differences of the choices your parents made versus the apologies years later, and all the correlation and connecting the dots. Isn't too difficult in some cases, coincidence is I understand coincidence, but many ways there is a ABC to this, all that that's sort of makes sense. And in your case, it seems to be that way. Now you have this, you know, childhood where you're struggling, you have these injections, you're, you're, you're kind of, you know, balancing out, I would say somewhat, maybe with the homeopathy there that is able to keep you somewhere, but what was, let's say your teenage years going into young adulthood, what did that look like?

Lauren ([00:13:33](#)):

Right. So that's where everything really changed. So my teenage years, my high school years were my best years. I had four really good years where I was super healthy. I had maybe one flare up a year, but very manageable to the point that I was at my husband and I we were in the same class in school together. We only got together years later, but he didn't know that I had arthritis. So that's how well I was. Whereas when I was in primary school all the kids in my primary school was if I ever meet them now, they always say how's your arthritis. You know, it was a big thing then. So, so I got through high school which was great because those years are really difficult years as it is without having a disability. And I left school to go to performing arts school and everything changed.

Lauren ([00:14:23](#)):

It seems like out of nowhere it, I just got a huge flare up, both in the joints and the eye. And I stopped having the mobility that I'd had since I was kind of 12, you know, obviously I had had the flare ups, but generally I'd had this mobility and the rheumatologists were saying, you know, it's burning itself out, which it can do at adolescents. And so it came back and the, the big concern was the eye. So my ophthalmologist I had been with, since I was two said, you're growing cataracts over cataract, over cataract, and it's pushing against the optic nerve. And so the the pressure had dropped to zero and pressure should be something between kind of 13 to 20, something like that. And there was so much inflammation in the eye. So it was a catch 22, cause she said, we can't operate to remove these cataracts and take and increase the pressure while there's that much inflammatory activity in the eye.

Lauren ([00:15:20](#)):

Now, what was it that caused those cataracts? It was the steroid eyedrops. And they said, well, it could be a combination between the eye drops and the inflammation, but so she said to me and my joints were flaring at the same time. And I was just kind of embarking on this new life. And I was applying to universities and, you know, I was a young adult and things were going well until they just stopped going well, literally overnight. And so she had said to me, alongside my rheumatologist, we have to operate on this eye. We have to do this operation because you could lose your eye if we don't. And there was a valid, you know, I could have done, there was so much going on in the eye with the pressure being so low, pushing against the optic nerve. It was very scary and I was 17.

Lauren ([00:16:05](#)):

And she said, we need you to go on methotrexate. Which for those listening is a chemo based drug, which they give alongside folic acid, synthetic folic acid, which anyone who knows about MTHFR, which I didn't at the time will know that that is the perfect storm. So I said to my parents well, I'm an adult now and you know, what has the done? It's obviously done nothing. Look at me, I'm in this situation. Cause you know, I was that teenager and I'm going to, I'm going to take the drug, you know, like what I'm the other stuff hasn't worked. And between when this kind of started between the time that this started and actually taking the drug, I knew that this kind of disability was looming. And so I did everything I possibly could to rebel and try and escape. It was just like the years of all of it building up until this point of wow, what sort of childhood have I had and what has happened here and what's going to happen to me.

Lauren ([00:17:04](#)):

And so I started doing drugs and I just rebelled and I got in with a bad crowd and then there were many traumas that happened because of that, that I subsequently have spent years working through. And that probably sped up the process of the disease, getting worse and worse until the point that I couldn't

function anymore and I was too sick and I decided to do the drug, the methotrexate. So within three months of taking the methotrexate, I was really ill. I mean, I could not function. I couldn't get out of bed. I was feeling sick. I had ulcers all over my body. I just like, it was as if someone had taken some sort of machine that takes energy out of you and the energy was removed from my body. I was just not operating optimally. And I mean far from optimally, you know?

Lauren ([00:17:55](#)):

And so, and then within 10 months where I had started with arthritis in four joints, the knees and the ankles within 10 months of being on methotrexate, the arthritis was in every joint in my body. So from my jaw right down to my toes and I couldn't feed myself because I couldn't bend my elbows to get to my mouth or grip cutlery. I couldn't chew food because my jaw was too stiff and I couldn't even sit up straight because my, my hips were too stiff. So I was just lying in bed, kind of at an obtuse angle until someone would come in and move me and feed me and take me to the toilet and that I was 18. And so that, yeah. And but the, the irony of it is that after 10 months of taking methotrexate, the, eye was no better at also, they still couldn't operate.

Lauren ([00:18:43](#)):

And my mum wheeled me into the rheumatologist. This one I'd been with since I was four and she didn't bat an eyelid at me being in a wheelchair. And I was obviously, you know, 18 years old with all this pent up anger and frustration. And I was sad and I, you know, she didn't even look twice and she'd been seeing me since I was four. And she called me Laura, instead of Lauren and I lost it because she then went on to say, well, methotrexate works for 70% of people for 30% it doesn't. And I just lost it. I said, I'm not a statistic and I'm not going to be treated as one. I was 18. And I had no idea how the human body worked or how pharmaceuticals worked or why any of this was happening yet. But something in me did know that there is so much more to how the human body works and how the human body adjusts to allopathic medicine than statistics. I knew there was a lot more to it than that. And so I left her office and never went back there again. Yeah. So that was, that was that part of the story. I

Caspar ([00:19:50](#)):

Mean, it's, it's, it's really heartbreaking to hear that. And you know, it's one of the things that I've always said being in medicine. One of the things I'd love to change about medicine is to humanize it again, that idea when you walk in to not budge at all, and just see someone suffering and just spit out statistics at someone who's truly in agony and not even humanize show no emotion or anything. And again, I kind of understand that doctors need to disconnect in some ways and not get over-involved, but you're still, everyone's a human here. We should be treated personally, and with some humanity and some emotion and understand that, that, you know what someone's going through, have some empathy as a doctor. That's how you build trust. If you treat everyone as a machine, as a doctor, I think that's why you look at how people kind of, you know, I have to say, I don't even know why most people trust doctors anymore. It's it's, we should have lost a lot of trust for them, but we still, we don't have a lot of respect anymore. Also, I have to say for doctors, and in some ways they did that to themselves, right?

Lauren ([00:20:59](#)):

For me, it was just like it's as if a person's experience just isn't valid because it wasn't recorded in a lab as a scientific study. And that's what gets to me, you know, empirical evidence is still evidence. There is if someone has undergone something and experience something that has happened, that is a fact. And if there are a series of events that lead up to that, that can show some correlation between what's

happening. For example, from the age of two, to the age of 18, or let's say 17. When I started the drug, I had arthritis in only four joints within 10 months of taking the drug. It was all over my body. Now that wasn't recorded as a scientific study in a lab, but that doesn't make it any less valid, but that is a truth.

Caspar ([00:21:42](#)):

Absolutely. And to show some humanity to that, and even say that that was a bad, like, what can we do now? And not to spit a statistic that I was right. 70% show that you should've gotten better. You're in the 30, but I did my job. Right. And it's almost this flippancy as to, you know, I did the right thing and sorry, you're in a wheelchair, but we'll go on to the next drug. And that showed 60% efficacy. And maybe it'll be in the 40% that gets even worse. And now no one wants to hear that. Yeah. And, and especially, especially when, you know, you could probably fast forward and look back and say, we had so many other options here. And we went to this one and I was even speaking with someone yesterday about this, about how medicine is a little bit backwards. It's if you get a little bit of pain, let's put you on a highly addictive, every, you know, tons of side effect drug, or let's cut you open and work on your spine, which my father used to be in, in spinal surgery and said, it's, it's incredibly low, you know success rate and, and the, the amount of people that, that get worse after it. Why wouldn't you try chiropractic, acupuncture, emotional treatment, a whole list of things before you get to the really toxic drug there?

Lauren ([00:22:56](#)):

No one looks at me at 18 and said, well, wow you've been through a lot of trauma,

Caspar ([00:23:00](#)):

And especially for someone so young that bounce back, you said it was, you were doing well. And of course, you're going to have ups and downs in the healing journey. That is a lifelong journey. I say, regardless of where you are on it and, and why not be able to go there, but unfortunately you had this experience and it's your experience for a reason, but you're now at this place where you're probably pretty frustrated with conventional medicine, but you're still only a teenager, right. You're in a wheelchair now. You're, you're very, probably desperate. And, and in this state of, of kind of not knowing what to do and confused and fearful what happened next in your story.

Lauren ([00:23:42](#)):

Right? So at that point, I kind of saw what my mom had been saying all those years. You know, the homeopathy had kept you healthy. None of this stuff happened before Lauren. And you know, you weren't in remission. We haven't found all the answers yet, but my mom had this, she's this amazing human being. And she she's always had this belief that I would get better. And I I like to call myself an optimistic person, but not a positive person naturally. Right. So I'm optimistic, but in those situations, and I think maybe that's coming from, you know, having a childhood of having an illness and all that went with that, you know, with all the injections, there was a lot of trauma there. So perhaps it's to do with that. But I used to say, what are you talking about, mom? I've never been without arthritis.

Lauren ([00:24:23](#)):

What makes you believe that I will, like, where are you even get? Where are you pulling this from? And I used to get angry with her. And she, she never had, there was not one piece of doubt in her that I wouldn't get better. And I don't know where she got that strength. I honestly don't know where she got it from, but she was, she was intuitively guided. And she still is to this day. And, you know, it's because of her that I was able to overcome all of this, but this was the point that I kind of cut the umbilical cord

and I had to take, I had to start taking responsibility. It was my job now. So I, my family is from Israel and we heard of a treatment in Israel, a doctor there, holistic doctor who was an MD as well.

Lauren ([00:25:05](#)):

But he, he trained in Chinese medicine and he had this therapy called IPAC therapy where it integrates seven different types of holistic therapies into one. And he, I went there and I stayed with family. And within five months I was better. I mean, it looked like a miracle. The issue was that I, he was saying to me, you know, you're going to have to come back from maintenance treatments. My parents literally had to take out a loan to get me there and to pay for these treatments and have me stay in Israel for five months. It was great. I came back. But I had all this kind of, I was 20 now and my friends were all either finishing university or going traveling. I was supposed to have gone to university and I missed out on all of that. And so I was like, well, I'm going to work and I'm going to party.

Lauren ([00:25:54](#)):

And I'm going to make up for those years that I've lost. And that's what I did. And then like with a vengeance, the arthritis came back a year later. That was the best thing ever happened to me because that was the point that I realized at 21 years old, oh, no, one's going to do this for me. I have to do it myself. I have to take ownership of my health and responsibility for my own wellbeing because no amount of maintenance treatments, even if I was to go back and forward to Israel are going to work. If I'm not taking ownership of my body and making the decisions and knowing, and being intuitively guided by my higher self to know what my body needs. And so it was at that point that I said, right, okay, I'm, I'm going to do this. And so I, I mean, the, the journey with that doctor in Israel, which kind of started when I was 19, well, it did start when I was 19.

Lauren ([00:26:52](#)):

That was my initiation into that. And I started meditating just before I went there just after the methotrexate, when everything was really bad, because that was like, what else can I do now, apart from try and find some sort of spiritual connection. And I started learning how to meditate so that the meditation was kind of my initiation. And then the doctor in Israel teaching me about, you know, all these integrative therapies. And obviously I'd always been with homeopaths and herbalists, but really teaching me about the body. And, but I had to go through that, had to come back and have the anger and stop partying and doing all of that stuff. And then but that was, that was the point where I said, right, it's back. I feel shitty about it, but I am going to do this. And so I immersed myself in intensive self study for a decade, and it wasn't like I did that.

Lauren ([00:27:40](#)):

And then I went into remission at all. It was a really long journey, but it was good because it kind of went like that. You know, it was a steady gradual, and there were ebbs and flows. There were times I would get better and then a bit worse until I had found all the missing pieces and fitted them together. And I'm talking epigenetics and studying that and how that played apart. Neuro-Plasticity what was my brain? What part was my brain playing repressed emotions, emotional intelligence, allopathic medicine, how does the pharmaceutical industry work? What, how has that been affecting me, everything, everything inner child healing and you know, learning to move into a place of self-love and self-acceptance, and pretty much just everything that you could do as well as kind of moving into a place of purpose and knowing why I was here and why all happened to me.

Lauren ([00:28:27](#)):

And when kind of we were able to fit all those pieces together, as well as biological dentistry. I think played a part and there is so much within holistic health care and so much that, you know, with my children now, it's like, if I can try and not make all those mistakes in the first place, then maybe there won't be so much healing to do. You know? So at 29 I went into remission, which was eight years ago now. And and I've been in remission ever since. And I did have flare ups when I had each of my children the hormones and the hormonal impact and the breastfeeding and the exhaustion, which again, although was not fun at all, was a really another great lesson in understanding that an autoimmune disease, once it's been triggered, once you've had that auto immune response triggered by whichever stressor is going to trigger it, it's there, it's dormant in your body. And it's up to you to decide how you manage that. So an auto-immune disease is yes, you can go into remission. And I have been in a state of homeostasis for a long time, but if I don't keep working at it and I don't maintain this level of health, it will come back. And I don't live my life by that negative thought of, if I don't do this, it will come back. But my health is my priority and health comes before everything for me.

Caspar ([00:29:54](#)):

Yeah. I mean, there's this beautiful moment. And you articulated it in every patient's journey where you realized that no one else is going to heal for you. No one else is going to do that work. They could serve as guides, as coaches, as inspirational people, as catalysts in it all, that's fine, but it is your responsibility to heal and stay healthy. And for many that is scary, right? That is wow. That's so look at me now, how do I get out? Oh my God, like, this is on me, but it's also the moment of most empowerment because you have the ability to heal yourself. Whereas most doctors in a conventional realm would tell you, no, you do not. You need to be on these drugs for the rest of your life and manage your disease. And the irony of that all is, is what I say. It becomes a vicious disease cycle. You take the medication, it gets you sick and depressed. You get depressed. Therefore you have no purpose in life. You have no purpose. The biochemistry goes down, you get another symptom. They give you another drug. And it goes in this circle of mind, body spirit just goes downward instead of evolving upward. So I know you call it sick care system.

Caspar ([00:31:12](#)):

It's not a healthcare system, you've been in it for a while, but can you explain that? Even aside from your own experience, what you've seen now, working with so many other people's when you look back on it, you look at it now, why do you think this is a sick care system not a healthcare?

Lauren ([00:31:28](#)):

I mean, you've just articulated it beautifully yourself, but it, it is it kind of it's, it's just kind of initiating more sickness. It's not, it's not calling for wellness. Like there are some instances where medications are needed. In my personal opinion, there are very few where it's really needed, where we excel is emergency care and neonatal care. That's really kind of where we excel. Aside from that, most of the chronic conditions we have and that we are getting are preventable. So for those who don't want to work towards preventing it, yes, medication is going to be the best thing for you, because if you don't want to work towards preventing it, you're unlikely. You're going to be unlikely to want to work, to get rid of it because there's a lot of work involved. And so it just, it just perpetuates a cycle and I don't ever see anyone that goes down that cycle, kind of, they're not in a state of wellness.

Lauren ([00:32:27](#)):

You know, wellness is when all the parts of your physical, mental, emotional, and spiritual are in symbiosis or working in symbiosis. And when one is out of balance, and this is you, I, I say this and I use this in my course. I teach this to my clients. It's like the analogy of you know, a 16 Wheeler lorie. And if one of those wheels is flat, goes flat. For example, you've got 15 other wheels and yet the lorrie will still not get very far. The warning light will come on and eventually it will have to stop. And you can carry on driving with 15 wheels if you want, but it's not going to be very safe. And you're not going to end up in a very good place. And our bodies are the same way. We're not just kind of these linear beings made up of a series of different parts all working in isolation.

Lauren ([00:33:20](#)):

We're, we're a being that is made up of a body, mind and spirit. And those things all have to work together in symbiosis, in order for healing to take place and healing could mean anything for people. It could mean healing from an auto-immune disease. It could mean healing from a negative mindset. You know, healing is anything, it's getting yourself to a state of, of health and wellness. And in order to get there, we really have to take the whole person into account. And the medical system, the medical model as its set up, does not do that. It does not take the whole person into account. You've got a stomach problem. Oh, you go see a gastroenterologist or now your heart's bothering you. You go see a cardiologist. Oh, you're getting migraines. Go see a neurologist. Are any of those ologists speaking to each other?

Lauren ([00:34:04](#)):

No. Is there any kind of connection in any, is anyone of them speaking about, well, it could be that that medication is what caused that in the first place, or do you know, let's look at your nutrition. Why don't we do that? Well, let's look at your report. I'm a big fan of Dr. John Sarno and his books about repressed emotions and sit down and journal. You know, it sounds so simple, but I think one of the problems with the medical system is they expect everything needs to be complex. Everything needs to be in a scientific paper first. You know, if it's not in the Lancet we don't really understand it, we're not gonna, but actually it's really simple. If you just give the body what it needs and you fuel the body with the things that are going to help it to thrive, your body is going to thrive. That's all there is to it.

Caspar ([00:34:49](#)):

That's beautifully said. And I, I agree with you that, you know, health is really actually quite simple. It's taking care of yourself in those ways. It's expressing yourself. It's doing things that are incredibly, you know, are free to us being out in nature, connecting with others, all of these pieces. Why do you think that so many of us though have completely disregarded it because I agree with you. I think more doctors, real doctors, those ologists that you talked about should be prescribing. You should be journaling. You should be meditating. You should be just speaking with people that bring you joy and doing things that bring you joy. And I don't hear none of them basically. Yeah. Maybe a few here and there that are outcasts in their kind of field, are saying that, but why is that? Why, why can't a doctor? Just say, I still believe in drugs. I that's. Okay. But also why wouldn't I try this out as well? What is, what is the worst that can happen? If I tell someone, even if I put them on a low dose, why don't you also try? So maybe we can get you off of this too, because we don't want you on this for the rest of your life.

Lauren ([00:35:55](#)):

There are some doctors like that. I had a rheumatologist when I, when I left that awful rheumatologists after methotrexate, I was fortunate enough to meet one. That was the most amazing man. Andrew,

Keitt got to give him a word that he was incredible. And he was so supportive of my journey and how I wanted to play it. And he agreed with me about, you know, how the system wasn't working, but that was all he had to offer, but he would support me in my journey. So I, I'm always a fan of have the diagnostics, get a diagnosis and then kind of go and deal with it yourself. So he would do the scans and all those kinds of things that I needed. And when I started getting better and I remember once it was summer, you know, I was in my early twenties, I was young. I was planning on going out to meet some friends after my appointment.

Lauren ([00:36:39](#)):

And I was wearing it like a denim skirt, short denim skirt. And he said, Lauren, you carry on doing whatever it is that enables you to walk in here wearing a denim skirt in the summer, because none of my other patients of your age with arthritis can do that. He was amazing. So I think there are some doctors, but they are few and far between, I mean, in my experience, it's like the smallest percentage and you know, and most doctors, this is the thing I, I kind of always feel like I'm the one that comes out of a hospital appointment or a doctor's appointment having something bad to say, but I think it's because I'm coming at it now with the experience of knowing that there are other options. And when you walk into a doctor surgery and there is a possibility that you know, more about something than they do, they don't like that in the same way.

Lauren ([00:37:25](#)):

That if, when, you know, I had my children and doctors were questioning why I wasn't vaccinating and I would ask them, well, can you name me five ingredients in that vaccine? And five of the listed side effects. And they would look at me blank. And I would say, well I can. So if you can't, then I must be in a better position to make this decision for my child than you are. But I think a lot of it comes down to fear and we've seen from the past year, year and a half, how easy it is to brainwash a population when they're in a state of fear. And so I think that with doctors, we see the doctors who were speaking out, we see the whistleblowers and we see what ends up happening with them. And so most doctors are scared to go down that rabbit hole.

Lauren ([00:38:10](#)):

And I also think there is an element of believing that they have been to medical school. You know, they are as high as it comes now. No one is above them in terms of what they know and their knowledge, but essentially it's my belief that what they're learning in medical school is, is probably being in kind of fuel, you know, filtered down by who's up there, pharmaceutical industry. And what they're learning is from a textbook essentially. And once you, there are some great doctors who go and do lots of research and they look into other things. And I recently met someone who was a rheumatologist, but he decided to go to China and study Chinese medicine. And I have a lot of respect for him. He's still studying and practicing conventionally, but because he made the effort to go and see and learn more about the human body and about other methods, I have a lot of respect for him, but I think essentially once you get into that world of believing that everything that you need to know is coming from a textbook and then they don't really go and research.

Lauren ([00:39:05](#)):

You know, when I started telling my rheumatologists about MTHFR and hold on, there's a connection here between folic acid forget even the chemo that you gave me that made my hair fall out and damaged my liver and left me sick and disabled. Let's forget about that for a moment. Let's think about

what the folic acid was doing to me when I have MTHFR and 70% of the population has said to have MTHFR, we can't methalate, we cannot absorb things like folic acid or B12 in the synthetic form. We need them in the methylated form. Now someone comes and tells you that, and you just say, no, that's just rubbish. You know, where did you get that information from? And you know how many times I've heard that Caspar, where did you get that from? Like talking to me like I'm a child, but because I haven't been to medical school, I must not have enough knowledge or as much as them, even though I'm coming to them with information that they've never heard. And so I can't answer your question. I don't know why it's like that. I think it's an element of fear. I just think it's the way that the industry is. And we know that industry is that run by massive corporations, earning loads of money. Unfortunately, there is a kind of a method to how things happen there. And I, the only time I ever see long-term remissions, you know, long-term remissions are when people step outside of that model.

Caspar ([00:40:23](#)):

Let me give you know, because everything you said, I feel like really connected. And it is probably part of the reason that we're stuck in this model, even though people aren't improving in it. And we're seeing actually worse results year after year. I mean, we used to be our clinic NYCIM used to be in Manhattan, just down the block from MSK Memorial, Sloan Kettering, the best, you know, oncologists in the world, the best cancer care in the world. And a lot of the patients that would go in there would be maybe stage four later. And a lot of the times when the doctors there didn't really have anything for them, they would come to our center as a last chance because what else? They, the doctors there said, listen, nothing here, not even experimental would work with for you right now. It's too far in remission.

Caspar ([00:41:10](#)):

You know, get your things in order, you have a few months to live and they would come to our center and we may see things a little bit differently. Understanding the realistic aspect would not, you'd be back healthy in a year, but what about supporting you? What about living with some extra years to you in a state of somewhat, you know, general wellbeing while still trying to fight this and still trying to do some so much you could do for your organs, even if they are completely, you know, cancerous. And so we saw actually there was one patient, you know, at that time I remember I was working there and I was at the front desk and this patient came in with this prognosis of three months. And she said, you know, the only thing I want, I don't want to live forever.

Caspar ([00:41:52](#)):

I just want to be around for my grandchildren and go on some vacations with them. And the grandchildren are young. She said, if you could do that, that would mean the world to me. And we were able to, we use insulin, potentiation therapy, you know, lots of things to support her vitamin infusions, emotional things. She had problems with their children and had a lot of resentment over what happened in the family. So a lot of psychological and psycho-emotional therapies, she got much better. And she, she started traveling with her children. She was, and then she went to her oncologist about a year later after the three month prognosis. And the oncologists were of course, incredibly surprised, took all, you know, x-rays and scans and said, my God, you look so much better. Like what, you know? And she told them about what you would do. And they said, you know what?

Caspar ([00:42:41](#)):

This is actually fabulous news because we now can put you on a trial, with a new drugs that you and we could help you now. And even though we were happy, you can help me said, listen, the truth of the

matter is you're probably going to get worse. Even if you keep doing this and this is your option to do it. And so they sort of scared her sort of gave her hope. And that was the fear part of it. She stopped coming to our center, went to the other place. We found out she died three months later.

Caspar ([00:43:16](#)):

And it's really, really sad to hear that because, you know, you hear you, you, you provide someone with this and you see them flourishing and they give you all the credit, but then they go and then they become fearful. They have this little sliver of hope and everything, and it changes everything. So I'm just saying, if someone were to, you know, was doing something that was absolutely working for you, but even then someone else comes in and adds fear to the equation, that is enough to trigger you, to make probably a poor decision. I would say, meaning you had something going, you are fulfilling something, you are living beyond what was expected. And yet you made that decision and that's out of fear. And that's where I think we are in a sense. We, we see these people of course, as experts. And in some ways I think we should, we shouldn't dismiss everything they say, I think we should question every, you know, anyone that that's in any profession, if we feel we can, but at the same time, fear is just this incredible emotion and allows us.

Caspar ([00:44:16](#)):

And once you have that, once someone tells you, Hey, if you don't take this drug, you could die. Whoa, I have to take this drug. Now, what other choice do I have? I'm fearful of dying. And unfortunately, as you've witnessed in your experience, that fear of going on a drug, you know, or saying, hearing that expert tell you that led to, you know, really dire consequences for you, where you had to suddenly rebuild yourself and in some way, recondition your life, which brings me to, you know, what you're doing now, because you've, you've gone through this long journey in this story, in this healing. And it's continuous. I understand that, but you've, you've done what so many patients I love to hear are giving back to others now are giving their purpose now is to help others. And that's what you're doing. And can you go into that and Reconditioning Your Life Academy and your work right now?

Lauren ([00:45:09](#)):

Sure. Yeah. So it was, I mean, that's what I put, everything that happened to me was to lead me to this. Absolutely. And it was such a blessing however much, you know, I went through was to lead me to this because I always say that, and I use this with clients as well. You know, when, when they're kind of, and a lot of clients, when they start working with me are in the victim mentality, which is understandable at the beginning of their journey, when they've just been diagnosed with cancer or someone, something awful has happened to them. And I deal with people at all ends of the spectrum from, you know, violent marriages to cancer, to all sorts of things. And so when they they're in that victim mentality, you, you, you know, I always say you have the opportunity here to reframe this and to look at it as a blessing.

Lauren ([00:45:56](#)):

And it's really hard to do when you're in the situation. But if you can do that, when you're in the situation and know that this is happening for a reason, you will be led to your purpose. And that's absolutely what happened to me. And so now I, so I was within my journey, as I told you, it took a decade for me to go into full remission. But during that time I was getting a lot better and I was learning, I studied nutrition, I, you know, studied so many different things. And so I started writing about natural health and then after having my kids natural parenting and all of that started speaking about it and writing articles, a lot of articles about things like epigenetics, really big passion of mine, because I just

think that it's just so important for us to understand that our genes are not our destiny and, you know, we can, our lifestyles control everything, you know, what we do with our lives physically, but also the mental and physical.

Lauren ([00:46:46](#)):

And so my journey taught me that, like I said before, it's, it's the mind, body and spirit, physical, mental, emotional, and spiritual. And if one of those is out of alignment, everything else isn't going to work optimally. And I really learned that. And so that was the, the, the understanding that was the thing that put my work together and enabled me to understand that what I need to offer people is a unique way of being able to heal by conflating all of those. So healing, all of those. So even if someone can come to me with an autoimmune disease or someone can come to me because they are single and they are not manifesting their ideal partner or someone can come to me because they are not living in their purpose. And don't what career they need to be in. All of it requires healing.

Lauren ([00:47:32](#)):

All of it requires the same process. We need to go back and heal the inner child. We need to uncover trauma. We need to, you know, uncover limiting beliefs, learn how to reprogram them, learn how to use brain training. And neuro-plasticity to reprogram those neural pathways in the brain. We need to, I do ancestral healing with clients and work with women on their divine, feminine, putting them back in, into their divine, feminine, stepping into their purpose. Now, you know, there's a massive part of what I do. Core essence and purpose. What is your purpose? Repressed emotions. And so the physical side of it ends up being such a small part. I mean, it's a big part as well, you know, the nutrition and supplements and, and, and I think supplements by the way, I think that we should be getting everything we can from food and where we can't, we should supplement.

Lauren ([00:48:17](#)):

But in a lot of these cases, obviously these people do need supplements. Plant medicines, you know, that the earth has given us everything. We need to be able to thrive and we need to go and find how that fits in with our lives. And, and an individualized approach is so, so important. So I do that with my private clients, but I also have the Reconditioned Your Life Academy, which is a group course that I run. It's just for women. And it goes through 12 modules over 12 weeks of everything, basically that I've just said, I'm more to kind of literally recondition your life. And my podcast is called Reconditioned. And when I was trying to think of the name for the course, I thought, well, you know, why do I need anything else? It does what it says on the tin that it's reconditioning your life from the inside out.

Lauren ([00:48:58](#)):

And that is my focus and that very much as my purpose. And I'm so grateful to be able to be doing it and to be able to be providing people with the tools, because the kind of feedback I get is, I mean, so amazing for me. And I'm in gratitude every day that I get to hear this, but it's, it's the kind of feedback that is so rare to hear, because it's the kind of feedback you probably get. And, you know, the, in terms of just literally being able to transform people's lives, because the kind of things you're healing their bodies with are just, they've never experienced it before. And when you go within and you kind of uncover all the trauma and you do all the inner work as well, because your body can't be healthy if your mind and your soul and your spirit are not healthy.

Lauren ([00:49:38](#)):

And so people are releasing everything that is enabling illness to be present in them. And I'm helping them kind of shift the identity behind the thing that is keeping them in illness. Because often the thing that's keeping the us in illness is this identity of I'm a sick person and the secondary gain as well. You know, I see that a once people have been ill for so long, it's scary the concept of being healthy. And if I have to work and what if I get ill again, I have to go out with people. I have to make arrangements. That's scary I work with them a lot on secondary gain and stuff like that. But essentially it's a whole person approach. And, and from so far, thank God, it works every time. So, and I'm sure you're, you know, you can attest to that with, with how you work as well.

Caspar ([00:50:23](#)):

Oh, absolutely. Listen. Every one of us, I always say this and people sometimes, you know, when I post on Instagram, when I'm getting an IV or something or doing some therapy, they're like, get, well soon, sorry, you're sick. It's like, no, no, no, I am not sick, but I am a patient.

Caspar ([00:50:38](#)):

I do consider myself because I'm always healing. I'm healing from one little trauma may be peeling the onion back from when I was five and got bullied or something. And you know, all those little things. And I want to optimize myself to be the best, the happiest I can be and healthiest. So I, I like that idea that it doesn't matter if you're a cancer patient or you're someone going through a divorce or some kind of, you know, emotional trauma you're, that's still unhealthy in a sense, right? You're still dealing with a health issue. It's not some, oh, you know, you're not truly unhealthy. I have this sickness and you have this, like, no, it's all the same mind, body spirit. If any, one of those is misaligned, you're dealing with an issue that is related to health and you need to address it at its root cause.

Caspar ([00:51:21](#)):

And looking at the whole, not identifying one little thing and saying, that's all we'll do is look at that and try and fix that. Why is that being caused? Who cares? Let's go with that. Right. So I, I really liked that approach. Of course, I can resonate with that approach. It's what we talk about so much here and what we look at with every single person that walks into our clinic or that I speak with, you know, one of the things I did want to ask you as a parent, as someone that has seen, you know, the, the damage that a vaccine can do, what are some of the tips and resources you are providing with parents right now, that are navigating that with their own children and going beyond vaccines. I don't want to make this all about that because there are so many choices as a parent these days to keep a child healthy that go way beyond vaccines, nutrition, it's everything else. You know, how, how you're raising your child and, and all the different elements that go along with it. What are some of the tips, recommendation tools, resources you provide with parents to help them navigate that?

Lauren ([00:52:25](#)):

Well, as you and I spoke about before informed consent, I don't think there's anything more important for us as parents than informed consent, whatever decision you decide to make that should come from a place of informed choice and informed choice doesn't mean going onto the website of the pharmaceutical company, who's providing you with the vaccine or the drug or whatever it is you're looking into. It means real research. It means researching, you know, one of my favorite resources is Children's Health Defense, Robert F. Kennedy Jr. Del Bigtree. People have got nothing to gain who really get bashed a lot. Those are the people who you want to be taking your advice from. Cause they've got nothing to gain. They're only here to help and to heal the collective. But really it comes from informed

choice and informed consent. And I always advise people, even before you get pregnant, get your body into a state of homeostasis, get yourself into a good place, emotionally epigenetically.

Lauren ([00:53:18](#)):

We pass down through our DNA, everything we're carrying when we can let her know, not even when we're pregnant, but when we're conceiving and what's going on before we've conceived. So the state of your body, mind and spirit before you even conceive, is really important. How you look after yourself when you're pregnant, you know, that your emotions and keeping you know, in a calm state where possible of course, it's not always possible, but a big part of what I do is meditation and kind of a spiritual, spiritual guidance and spiritual coach. I have an amazing spiritual teacher myself. And that is a huge, huge part of my, my journey, my growth, my continued growth, and my continued learning. And so kind of having some sort of meditation practice in pregnancy, looking after your body and when you are having the baby and they're coming at you with the midwife is telling you this, and the doctor's telling you, you need this vaccine and you need to take this drink so we can check your sugar.

Lauren ([00:54:15](#)):

And we need to everything that someone wants to put into you, you need to come at that thing from a place of informed consent. If you cannot read back what is on that package, insert without reading it, you know, word for word, then that is not informed consent informed consent is when you go into a doctor surgery and they ask if you're going to have a vaccine and you can list to them more ingredients on the package insert than the doctor can list to you. That is informed consent. And like I said, make any choice you feel is right for your family. But if you are not at that place, that is not informed consent. That is always my biggest advice for people. You know, health is, is a, it's a collaborative, holistic venture, and it is not a, you take one thing and that's it.

Lauren ([00:55:05](#)):

It's constantly feeding your body with good food. And no doesn't just mean food. Either nourishment is what you're feeding your soul. You know, so I have people who have bad relationships with foods, clients who have really bad relationship with food, and they're like, I'm trying to do the diet, but dah, dah, dah. And I said, but no, if you're not, then we need to work on, on your mind on your spirit more because if you're eating that food without believing that it's nourishing you, it's not going to nourish you. You could be having kale smoothies and whatever, and wheat, grass juice every day. But if it's hurting your soul to be taking it, it's not going to be nourishing you. So, you know, coming at everything from this place of I guess just a gratitude for nature and what it can do for your body, a gratitude for your body and love and compassion for your body. And just an understanding of everything you're putting in your body and your mind. And, and I know that might sound a bit abstract. I guess what it comes down to is informed choice, but there are so many ways we can educate ourselves.

Caspar ([00:56:06](#)):

But I think it makes real sense to me that understanding your body when combined with informed consent lead to the right decision. So I actually believe absolutely you need informed consent. And you know, I even go back to the story I interviewed, Navine Jain a Viome billionaire out there. And he always said, if you want to get to the true or really understand a subject, take 10 different sources from all different areas and really, really vary those sources. I mean, one's paid for, by the person who's going to profit it. Another one's from someone that hates that person. You know, another one is in the middle, somewhere, another one's a liberal or D you know, this and a conservative viewpoint. Read them all

completely open-Minded not saying that you like, or don't like, you're just taking information. There is no good or bad in information.

Caspar ([00:56:53](#)):

It is just information, take it all in, sit with it, and then truly understand what resonates with you. What feels good amongst all, because it's probably going to be somewhere a mix of all this different information, but then you're aware you understand what is going on with this topic and what it could do, and then you are feeling it. And then of course, you have to sit with it and make that decision yourself and go here in your heart, not in your head, because that's probably already been corrupted by money, by ads, by everything out by your friend, telling you this is what's best for you. You have to make that. And it's got to really resonate in your heart chakra in that center of you.

Lauren ([00:57:33](#)):

No, I always say, I always say to people, if you want answers, sit in the silence. You know, your intuition, intuition is such an important thing to follow. And you know, it, we really have been blinded and defin to our intuition by thinking that someone else can give us the answers for us. And we are all made so differently. We can go deep here and we're not going to go too deep, but, you know, we've all had past lives as well. And that, that kind of contributes to what you're going through in this life. There is everything is multi-faceted multifactorial. There are different elements. It's not just a case of this person did or didn't do this. And therefore this person died. There is a backstory to everything, and you can only get to your truth. Like you say, once you have informed yourself, educated yourself and then sit in the silence and see what your answer is. That for me is informed consent. Absolutely.

Caspar ([00:58:26](#)):

I agree with that so much, and I think more people need to do that because I think people rush. They come from a state of fear of guilt, of all these lower consciousness levels that we know usually don't lead to the best decisions. And, and I, I do agree that spirituality plays a big role in all of this, of course, and wellbeing and health. And I know that you recently spoke with Tommy John, who is somewhat of a controversial figure during this time of the pandemic controversial a little bit. I don't know if Instagram let him back on yet, but.

Lauren ([00:58:55](#)):

He's back on.

Caspar ([00:58:57](#)):

But it is a big topic of spiritual awakening during this time you're seeing you know great polarity in everything. You're seeing a time of great change of so much going on. I mean, how do you feel about what's happening in the world right now, aside from a virus, a pandemic, but from the spiritual side of everything,

Lauren ([00:59:21](#)):

It's a really good question. I've this is this year and a half has been a major time for me and my own spiritual development and my own spiritual evolution. Because as someone that doesn't use the the medical model for anything to see our entire world being controlled by that has been very difficult. So I have been spent a lot of time in the silence myself and spent a lot of time being guided by my spiritual teachers and coming to the understanding that there, there are really deeper reasons for why things

happen and sometimes really bad thing, or, you know, even bad, good that's binary, you know, in spiritual sense, it's not good or bad. They happen sometimes when we need to shift out of something and a shift can only happen from this place of stagnation when something really tragic or difficult, very challenging happens.

Lauren ([01:00:24](#)):

I don't know if it individual level it's the same. I deal with this with my clients. The, our rock bottoms are energetic, death and rebirth is the best place we can be, because then we can see what it's trying to teach us. And we can grow from that. Now I've been seeing this for a while and I'm kind of, and, you know spiritual teachers around the world are looking and saying, well, we can see what this is for, but how is it going to play out? How are people going to respond to it now, not everyone is going to respond in the way that you and I are responding, but I've come to the acceptance that that's also okay, because that's their spiritual journey. And that's part of their spiritual evolution. And I'm no longer frustrated with it. I'm upset and frustrated when people are being harmed by measures that are taken that have, you know, these measures that have really harmed many people in many different ways and are continuing to do so that upsets me.

Lauren ([01:01:14](#)):

But even that is part of a bigger plan to lead us into some sort of, you know, to get a woo woo awakening because we can't carry on going, how are we going? And so some huge shift needed to take place to wake us up and push us out of this stagnation that we're living in the stagnation of, you know, yes, I will do whatever you want. Bow down to the authorities. People are waking up, you know, there are more Tommy Johns coming into the world and, you know, yes, he's, he's super controversial, but we do need people like that to be waking other people up to be. You listen to him when he speaks, right. People listen when he speaks. And, and we need more of that because we all need to wake up and start thinking for ourselves. Again, again, back to conform informed consent, wherever you, you all on the spectrum. Are you truly thinking for yourself, are you a sovereign being are the decisions you've made in the past year and a half based on what your intuition is guiding you to do, or are they based on fear because fear is never a good place to make decisions from. So I think that the only thing that has got me through this time is my spiritual practice. And kind of the idea that this is all part of some of our awakening that not everyone will wake up to, but the planet will.

Caspar ([01:02:30](#)):

Yeah, no, it, it really feels like a shift in consciousness and awakening. And that is difficult. Shift is difficult. Change is difficult. Whenever we start with a patient, we always like to say, it's probably not going to be pleasant at first, your body is changing, but for the better, but always when you shift and move stuff around, think about when you have like a house you got to do spring cleaning. What's the first thing you do make a crazy mess, you know, throw piles, move it around. Then you look around and go, my God, this place is worse than when it started, but the truth is you're just organizing it to clean it all, to make it nice and neat and move it into a higher level of something that will look better in the end. That's always how things work. And I think we're, we're kind of feeling some of those pains, but if you really take a step back and are able to sit in, silence are able to really go inward and not outward, not keep the news on, not get all the notifications, always that's something, you know, I can't really stand anymore because people always stay in the state of fear and, and, and misery almost you've got to protect your energy.

Lauren ([01:03:35](#)):

You got to protect your energy. And that's a massive thing. And that's been a massive thing for me this year and a half. I, you know, there are many things that I haven't agreed with. Most things of all these measures and I don't play along with it. And I don't listen to the news equally. I protect my energy. I'm not going around there screaming about it because that's not going to protect my energy either. I'm quite open about my views and I'm happy to give information to anyone who asks for it, but protecting my energy is the most important thing, because there are so much out there that is trying to impact that. And it's trying to kind of infiltrate, but I have got my bioenergy field around me and nothing negative and nothing that does not serve my higher. Good is penetrating that nothing.

Lauren ([01:04:16](#)):

And, and like you say, you know, about moving into this, I always say, we've got to get comfortable in our discomfort. There is no growth in stagnation. So some things comfortable for you and you're carrying on with that. The likelihood is it's not serving your highest good, you know, and it's something has to shift. We, we only grow when we, when we shift the things that scare us. When we shift out of this comfort, we've got so used to, and it's also, you know, it makes people very uncomfortable. I always say to my clients, I'm not here to make you comfortable. I'm here to help you heal. And I think it's the same with this collective thing that's going on right now. It's not here to make us comfortable. We're not meant to be comfortable right now, because if we're comfortable, we're not going to wake up and shout from the rooftops about why, what is happening is wrong. So we have to be in a state of discomfort in order to heal the collective.

Caspar ([01:05:06](#)):

Mm yes. Step into the discomfort and uncertainty. And that's how we truly heal a wonderful message. Where can people learn more about you work with you and just connect?

Lauren ([01:05:17](#)):

Oh, well, I'm on Instagram @Laurenvaknine. And I, my website is Laurenvakninecoaching.com, where you can see about my private coaching and about my academy, which only runs three times a year. You can sign up to the waiting list there. We're running it again from August. And yeah, just, Instagram's a great place to connect. We also my podcast, the Reconditioned podcasts. So I'm a, that releases every week today, we just released one with Shaman Durek, talking about all the stuff like the darkness, the matrix, he goes super deep. So it was really interesting. That is bound

Caspar ([01:05:49](#)):

To be an amazing one as well. So Laura, thank you so much. This was really a pleasure connecting with you. Thanks.

Lauren ([01:05:54](#)):

Thank you so much, such an honor. For me, I'm such a fan of the podcast, so thank you so much. Thanks.