



Transcript: #364 The Pros and Cons of IV Chelation Therapy with Dr. Melina Roberts

Wendy Myers: Hello everyone. My name is Wendy Myers. Welcome to *The Myers Detox Podcast*. I started this podcast when I founded MeyersDetox.com to educate everyone about the issues and dangers of heavy metal toxicity and how to detox them. I truly believe that heavy metals and toxins are the number one, primary driver of disease today. I want to empower you to improve your life with the power of detox.

Wendy Myers: Today we have Dr. Melina Roberts on the show to talk about the pros and cons of IV chelation therapy. I get a lot of questions about this, so I wanted to finally do a show on it. We're going to talk about what you need to consider before doing IV chelation. Is it right for you? Why IV chelation is not the answer for everyone and why people need to be careful. If you go to a functional medical doctor, a lot of functional medical doctors are doing IV chelation and testing to see if you have high heavy metal levels. They then might recommend IV chelation as one of the only things that they do, when it comes to detoxification. It's not right for everyone, especially if you're very ill or you have compromised kidney function. You need to consider some gentler options before diving into that. Granted, every situation is different, but you really need to weigh the pros and cons.

Wendy Myers: We will talk about how many IV sessions you really need, and we'll talk about the biggest pitfall when it comes to IV chelation. We'll discuss whether or not IV chelation really can do a deep, deep detox of all of your body's heavy metals and toxins. We'll also get into the gallbladder and the key role of the gallbladder for detoxification. What kind of things contribute to poor gallbladder function? What diet and lifestyle issues are causing so many gallbladder issues today? How do we support healthy gallbladder function and bile flow, which is so key for detox?

Wendy Myers: I know some of you listening are concerned about the levels of heavy metals and toxins in your body. I've created a two minute quiz you can take at HeavyMetalsQuiz.com. It will help you discern the relative levels of toxins that you have in your body. After you take the quiz, you get a free video series. It answers all of your frequently asked questions about how to detox your body, what testing is best, what supplements are good to take and how long it takes to detox. Answers all these questions and more are answered, so go take that quiz at HeavyMetalsQuiz.com.

Wendy Myers: Our guest today, Dr. Melina Roberts, is a naturopathic doctor and author of *Building A Healthy Child*. She is the founder of Advanced Naturopathic Medical Center in Calgary, Canada. She is recognized as one of the top biological medicine practitioners in North America. She is a lecturer for the Paracelsus Academy. She is already a leading author in the field of naturopathic medicine, specializing in biological medicine, which effectively treats digestive issues, chronic disease and cancer.

Wendy Myers: Dr. Roberts is a graduate of the University of Waterloo and the Canadian College of Naturopathic Medicine in Toronto. She did a two year post-graduate study in biological medicine with Paracelsus's Clinic in Switzerland. You can learn more about Dr. Roberts and her work at AdvancedNaturopathic.com.

Wendy Myers: Melina, thank you so much for coming on the show.

Dr. Melina Roberts: Thank you so much for having me. I'm excited to be here.

Wendy Myers: Why don't you tell us a little bit about yourself, how you got into medicine and focusing on detox.

Dr. Melina Roberts: I had a few different influences in terms of how I became a naturopathic doctor. One was personal experience. I was a kid that had really bad allergies and eczema. When I was about 13 years old, a family friend said to my parents, "You know, you should try taking her to see a naturopathic doctor." This was many years ago, we had no idea what a naturopathic doctor was and if they could even help me or what they could do. We went and saw this naturopathic doctor, and within a pretty short period of time all of my allergies cleared up. To me it was like magic. At that time, I had no idea how it all worked. That made me realize that the body had that amazing ability to be able to heal itself, and that also made me want to have that kind of effect on people's lives. That made me want to become a naturopathic doctor as well, so I followed that route.

Dr. Melina Roberts: When I was at the naturopathic college, in my second year in school, my dad was actually diagnosed with pancreatic cancer. This was pretty challenging to me because my dad was my world. I was definitely a daddy's girl. I started doing tons of research, trying to figure out how to treat cancer effectively. I was coming across a whole bunch of amazing answers, but I really needed more time. Unfortunately my dad passed away nine short months later. That really

started my road to heal the body and how to treat cancer effectively at the root causes. I started making that the focus of my practice once I graduated. I was doing more research into it.

Dr. Melina Roberts: To me, a big part of treating cancer is healing the gut and making sure that pathways of detoxification are working optimally.

Wendy Myers: Yes, that's one of the reasons people develop cancer. All this toxin buildup in their body can't exit and starts wreaking havoc on all the different organ systems. One approach to heavy metal toxicity is IV chelation. I want to do a deep dive on this. I get so many questions about this because when you go to a naturopathic doctor or a medical doctor, typically the option is usually IV chelation. Let's talk about this. What are the benefits of IV chelation? We'll get into the cons in a second, but what are the benefits?

Dr. Melina Roberts: With IV chelation, what we do is we are putting a chelating agent into a bag really, and then giving that to a patient intravenously. The benefit of the IV chelation is those chelating agents pull heavy metals from the tissues. They pull them into circulation but then your body has to be able to detox them. They'll move them out, typically through the kidneys, and then you will pee out those heavy metals. It's a fast and effective way to move heavy metals out. When we say fast and effective, sometimes patients can't handle fast.

Wendy Myers: Especially if they're very ill.

Dr. Melina Roberts: Yes, exactly. You have to gauge a patient to see where a patient's at, and whether we can do IV chelation.

Wendy Myers: Okay, great. What are some of the benefits of the IV chelation? You said it's fast and very effective. Are there any other benefits? For me, personally, I think there's a time and a place. If you have a life threatening heavy metal toxicity, you need to get that out really, really fast. What is your take on that?

Dr. Melina Roberts: It kind of depends on how much it's disturbing a patient's function. Basically we can be accumulating heavy metals over a lifetime and that's a challenge. You might not notice that you are accumulating heavy metals over this period of time until it starts to affect the function of how your system's working. We are accumulating heavy metals from the environment that we live in, from the water that we're drinking and from the foods that we're eating. Unfortunately, as they accumulate, what's happening is that those heavy metals will be going into different tissues in our body. The challenge is that in every person it's going into different tissues. Depending on which tissues they're going into, they can be affecting how those different systems are functioning.

Dr. Melina Roberts: For example, heavy metals have an affinity for our nervous system. If we have heavy metals that are affecting the nervous system, then this can actually be

affecting how that nervous system is functioning. That can actually lead to a host of other problems. We need to be working on getting those heavy metals out.

Dr. Melina Roberts: For example, someone with MS which is a neurodegenerative disease, one of the underlying causes can be heavy metal toxicity. It really depends on which system it's affecting and how quickly we need to get those out. Do we have enough time to be able to do it more gently, or do we need to be moving them out as quickly as possible?

Wendy Myers: So what are some of the chelators that are used when you're doing IV chelation?

Dr. Melina Roberts: So one of the main chelating agents that we use is EDTA. We do a calcium disodium EDTA that we do via IV. Another chelating agent that we use is one called DMPS. That's a common one. We'll typically do those both via IV. One goes in the bag and one we push after the IV. The other thing that we do is we put it into a Myers cocktail IV.

Wendy Myers: That's my favorite cocktail.

Dr. Melina Roberts: Well, it's named after you. It also has some B vitamins. It has vitamin C. It has some minerals in there but not too many because those minerals tend to be chelated out. It also gives the body some nutritional support as we do it. We're not just sticking the chelating agent by itself. That's those IV chelators.

Dr. Melina Roberts: Then we do have some oral chelators that we will use sometimes as well. This would be DMSA, which is the other one that we use. That one is typically done orally. We can sometimes do some gentle chelation for patients whose kidneys aren't as strong and can't handle the IV chelation. Some gentle ones like chlorella, still transport heavy metals out of the body but do it a bit more gently.

Wendy Myers: Okay, great. I've taken oral DMSA before. I've never actually done an IV chelating agent before. I don't really need to. I did it in other ways, but there's certainly a time and a place. Let's talk about problems with IV chelation therapy. What can go wrong? What do people need to be aware of if they go to their doctor, they're told they need to detox and they're given this as their only option? What should they be considering when it comes to IV chelation?

Dr. Melina Roberts: I think that that's a good question. A lot of people aren't aware of the risks and they're just told about the benefits. We'll use IV chelation for a number of things. I was talking about neurodegenerative problems, but it's also good for cardiovascular issues as well. What we need to realize is that there's risks involved in terms of IV chelation. It can be challenging on the kidneys because the body will move those heavy metals into circulation, and then the body has to actually be able to properly detox and move those metals out, typically through the kidneys. If those kidneys aren't functioning optimally, then that can be a stressor on the kidneys.

Dr. Melina Roberts: The other challenge is that as we bind onto those heavy metals, those chelating agents will also bind some of your minerals. We've got to make sure that if you're doing some IV chelation, you are doing support for the kidneys and re-mineralizing the patient or else you're going to leave the patient deficient in minerals.

Dr. Melina Roberts: I think that when you're speaking to practitioners who are doing chelation, you need to be asking them if in this protocol are we doing some kidney support? Is there some remineralization happening either through IVs or through oral supplements? Make sure that you do supportive therapy while you're doing that IV chelation.

Wendy Myers: What are your thoughts on practitioners that are doing both EDTA and DMSA at the same time? I've heard of them doing that before.

Dr. Melina Roberts: I think that it's possible and safe to be able to do both at the same time as long as you are giving patients the right dose. I think the challenge sometimes is that practitioners can push the patients too hard. I would say, in general with IV chelation, we are doing it at most once a week. In a lot of cases, we're actually doing it once every three weeks to just give the body some time to be able to move those metals out. I've heard of some patients telling me that they were seeing a practitioner and they were getting IV chelation every day for three weeks. I think that that's so hard on a patient without doing the proper support with the kidney support and the remineralization. If we go too aggressively with IV chelation, it can be pretty challenging on a patient's system.

Wendy Myers: Yes, I've definitely heard of people having kidney damage. It's not worth it. It's not worth it if you're already ill or ill enough to warrant IV chelation. You want to take it really, really slowly. It's not worth detoxing to permanently damage your kidneys.

Dr. Melina Roberts: We normally do a test on patients prior to doing IV chelation. We do a test to see where their kidney function is at. We make sure that their kidneys are in a healthy range to be able to properly detoxify. We also do some testing to see what kind of levels a patient is at in terms of those heavy metals. I'm sure most people, if we're to test them, have high amounts of heavy metals. We want to make sure that we're using the right chelating agents with the patients and that their levels are in those high ranges, that they are problematic in their system.

Wendy Myers: When someone starts IV chelation, how many sessions would you normally do maybe before you retest again?

Dr. Melina Roberts: That's a challenge because you actually need to be doing quite a few of them in order to get the benefits. We are doing a range of 15 to 30 before we retest because the challenge is you retest and the testing doesn't tell you what your body's overall amount of metals in your system is. We don't know how many. We just know how much your body is pulling out in that session. The challenge is

that you do a test and you have high amounts of metals, and then we do a series of say 15 to 20 chelation IVs. Then we retest and sometimes those metals are still showing up as high, and a patient will say, "Oh well that didn't work." It's not that it didn't work. It's just that there are so many metals that we're pulling out that we're still pulling large amounts. That can sometimes be the challenge of testing even after doing it. I would say no matter what, every time we're doing chelation we're pulling metals out.

Wendy Myers: I think it's important to see that even if you do a test, a heavy metals test, and you have no metals coming out, that doesn't mean that you're metal free and you don't need to detox. That means your body can't excrete them.

Dr. Melina Roberts: That's true too.

Wendy Myers: It means your body can't excrete them, and that's not good. That means that you're accumulating and not excreting them. When we get people started on a detox program or doing IV chelation, they're finally able to mobilize this stuff. You start seeing it on tests. It's almost the opposite of what people think.

Dr. Melina Roberts: That's sometimes exactly what happens. We're working with patients and their first test has high metals, in their second test sometimes their numbers are even higher. They're like, "Oh my gosh, I've been doing all this work." You're like, "No, it means that your body's dumping more." Yes, that's a very valid point. Even if we do the test and the numbers aren't high, it can be that you're just not detoxing very well. You're a poor detoxifier and you need to work on those organs of detoxification so that your body can effectively move those out.

Wendy Myers: What are some of the most common metals that you're seeing with patients coming into your clinic?

Dr. Melina Roberts: The most common ones would be lead, mercury and aluminum. Those are the ones that tend to show up highest in the general North American population. I think that it's always surprising that people have high amounts of mercury because I usually blame it on those metal amalgams in people's mouths. We see that even patients who've never had a mercury filling are still showing up with high amounts of mercury. I think that lead used to be in everything. Lead used to be in everything from the paints on our walls to gasoline. It used to be part of toys. You're accumulating them over a lifetime, so it's not uncommon to see lead show up.

Dr. Melina Roberts: We get aluminum from aluminum cans, aluminum pots and even if our water is going through aluminum piping. It's actually surprising, but I think that our soils are also quite contaminated, so our foods end up being high in heavy metals. Most of our foods aren't being tested for heavy metals. It's hard for us to really know. I think that a major source of where those heavy metals are coming from is from our food sources.

Wendy Myers: Yes, it's amazing. That's one of the reasons why food doesn't have metal labels on them. They did it for supplements, but I think that's not terribly effective. I don't really believe in Prop 65 myself. I think that's a way for pharmaceutical companies to steer people away from natural supplements and foods. The reality is something with a Prop 65 warning on it, you can get more lead in a cup of beans than you would in this supplement. It's a little bit of a joke. With most high quality supplements, you don't really have to worry because you're getting more metals in your food, even if it's organic. Organic food means pesticide and chemical free. It doesn't mean metal free.

Wendy Myers: I have another comment. It's statistically impossible not to have lead. It's impossible not to have aluminum. Our medical director, Dr. Bruce Jones, did a statistical analysis of all of his thousands of patients that he's tested. Everyone had aluminum and everyone had lead. Almost everyone had mercury. Most people had cadmium and nickel. It's really impossible to avoid these metals in our environment.

Dr. Melina Roberts: I think a valid point is that our bodies are meant to have zero heavy metals in our system. Even though when we do the testing, there's a normal range of what's acceptable and then there's those high ranges. Really, in terms of all of those metals and how our body's function, we should have zero metals in our system. We don't need metals to function.

Wendy Myers: That's a very good point because a lot of people get these tests back, their hair mineral analysis, urine test, stool test or blood test and they're like, "Well, that's not in the toxic range," but it still can be causing problems. That small amount that you're excreting over that 24 hour period or maybe it's a hair test, so it's a three month period, that still can be very problematic. Where you see one rat, there's 1000 more. There's probably more of that in your fat, your brain tissue, your bones and other tissues. There's more where that came from. That's just what your body is able to excrete.

Dr. Melina Roberts: Yes.

Wendy Myers: One thing in regards to IV chelation, I think a lot of people think, "Oh, I'm going to do a detox." They'll do the 10, 20 or 30 IV chelation sessions. They think that they're done and that they've detoxed. The reality is that IV chelation can remove a lot of heavy metals, obviously, but there are still a lot of them deeply embedded in tissues that have built up over decades. You're not going to be able to just do IV chelation ongoing for years. There's a certain point where you have to do other things. Things that we talk about here at Myers Detox, in order to really get to the deeply embedded tissues. It's an ongoing process. It's just not something where you're going to do a detox for a few months and then you're done.

Dr. Melina Roberts: Yes, I always talk about health as a process. Health isn't just a destination. I think that IV chelation is part of that process and it's one of the tools that we use. I

think that you also have to look at it like the body is a holistic system. We also have to look at cleaning up the diet, cleaning up those organs of detoxification, supporting them at a nutritional level and also at a deep cellular level, and making sure that toxic loads are moving out of our system. Whether those toxic loads are more environmental toxins, whether they're heavy metals or whether they're coming from our foods. You always have to be in a process of cleaning up your system, and one of the ways is to make sure of that on an ongoing basis. I'm not a strong believer in that you just do a detox for a short period of time. I think that if we can live a healthy life on an ongoing basis, that's going to have more of an effect on our systems than just doing a chelation therapy session.

Wendy Myers: Yes, the work isn't done. You have to do some stuff on your own.

Dr. Melina Roberts: Exactly. There's more to it, for sure.

Wendy Myers: What are some of the things you recommend once a patient is home and they have done all their sessions of IV chelation? What are some of the things that you recommend?

Dr. Melina Roberts: I'm a strong believer that we need to be eating clean diets. We need to be eating diets as much as possible that remove a lot of those toxic loads. I know it's not possible to do 100%, but it's best we can. Making sure that we remove major inflammatory foods from gluten to cow's dairy to refined sugar to unhealthy oils and those vegetable oils. Those are the start. We want to also work on balancing out the microbiome. Putting the healthy bacteria back in and removing overgrowths of bacteria and fungus. I think that that plays a big role. We need to be making sure that we improve organs of detoxification, the liver, kidneys and lymphatic system. To me, those are all part of making sure that we get the system functioning at optimal capacity.

Wendy Myers: Another organ of detoxification is the gallbladder. For anyone who doesn't know, what is the gallbladder's role in detoxification?

Dr. Melina Roberts: Even as when I just listed those off, it's a much forgotten organ, but a very important organ. The gallbladder, what it does is it releases bile. Bile helps to emulsify fats and it helps to move healthy fats into the body, like your fats that are going to help to support every cell membrane in our body, in our neurological system and our brain. It's going to help to move those fat soluble vitamins into our body. The other role that gallbladder plays is it helps to move fat soluble toxins out of the body. Heavy metals are a fat soluble toxin. The gallbladder has to be working at really optimal capacity in order to effectively move those heavy metals or any other fat soluble toxin, effectively out of the body. The gallbladder definitely plays a big role in terms of heavy metal detox.

Wendy Myers: Yes, and for a lot of people their gallbladder isn't working that well. They're not producing enough bile or they have gallstones. There's a lot of women, especially in their 50s, that have gallbladder issues. Usually they go to a

conventional doctor. The doctor's like, "Oh, just take it out. Let's just cut it out. So you won't be in pain anymore." That is such a travesty to me because you need your gallbladder. It's very easy to reverse issues with the gallbladder, gallstones and things like that. What are some of these things that contribute to poor gallbladder function, and what can this lead to?

Dr. Melina Roberts: Things that can lead to poor gallbladder function is if we have an overload of fat soluble toxins. What happens is that the bile that's within that gallbladder should be quite a fluid substance. It should be a dynamic system. What can happen is that when it gets all gummed up with a lot of fat soluble toxins, then the gallbladder just ends up being more like sludge than like a nice fluid. That can definitely decrease the proper function of bile flow and how that gallbladder's functioning, as well. What the gallbladder ideally wants to do is a proper time release of bile into the digestive tract when we consume any sort of fats in our diet. It won't be able to function optimally if that bile is gummed up and more like sludge. Those fat soluble toxins are definitely a contributing factor to that sluggish bile and sluggish gallbladder.

Wendy Myers: Yes, that leaves people vulnerable to developing little cholesterol balls that can grow bigger and bigger and bigger and then turn into gallstones that cause attacks, gallbladder attacks and pain under your rib cage. Then you're off to the doctor, and they're like, "Let's get it out. Let's remove that. You don't need that gallbladder." What's wrong with that picture?

Dr. Melina Roberts: I think the challenge is that people think that is your easy fix to any sort of gallbladder attacks or gallbladder pain, let's just remove this organ. I think that what people really need to realize is how important that gallbladder is to our body's function, how we digest foods and how we properly detoxify. Without that gallbladder, it does change your life. It's going to make it so that you can't have a lot of fats in one meal. You would have to separate those fats throughout the diet. You're probably not effectively absorbing your fat soluble vitamins and some of those fat soluble vitamins are A, D, E, and K. We need all of those. We talk a lot about D right now in terms of getting proper sunshine. We need that D in order to help boost our immune systems. Especially in women, we talk about bone health, but they need vitamin K in order for us to make sure that the minerals that we're absorbing are going to the right places.

Dr. Melina Roberts: I think that we lose sight of the role that that gallbladder plays. We think that it's just this holding place for bile, but it's playing such an important role in terms of how our systems are detoxifying, how they're functioning and how they're absorbing fats. We need fats for every cell membrane in our body. Our body's made of cells so the importance of that is proper fat absorption, how our brains function and how our nervous system functions. We need fats. I think that often we get confused and people are still stuck in that mentality that eating fats will make you fat. "Why do I need proper fat absorption?" That's the role that the gallbladder's playing in terms of being so important for detoxification.

Wendy Myers: I've heard of people getting their gallbladder out and they have chronic diarrhea for even up to a year after they've had it removed. It causes a lot of digestive problems, not for everyone, but certainly for a number of people.

Dr. Melina Roberts: It's because we haven't resolved the issue, just by removing the organ. It doesn't solve the problem. I feel so bad because so many of my patients are having stomach problems and they've had their gallbladder removed. The gallbladder being removed didn't resolve their stomach issues. They're still suffering with stomach problems. They were told that the gallbladder was the problem and that was kind of their magic solution. It didn't resolve their problems because you weren't treating things at the root cause.

Wendy Myers: I think people have to be really careful when they go to a conventional medical doctor and are really looking at the person's skill set. A conventional doctor is not going to be doing functional medical tests. What is the root cause of what's going on and how do we address that? Are they just addressing the symptoms with medications or surgery and cutting out the gallbladder? The same holds true with the appendix. You need your appendix for digestion as well. People just say, "Oh, you don't need that. Let's just cut it out." It's really doing a huge disservice to people. I always say get a second opinion with a functional doctor, a naturopathic doctor, or anyone. Don't just rely on one person to make very major life altering decisions, like a surgery.

Dr. Melina Roberts: I agree, because you're told that, "Oh, it's a very minor surgery. It's in and out."

Wendy Myers: Routine.

Dr. Melina Roberts: Yeah, "It's very routine." I think it's tough to see so many people losing that important organ.

Wendy Myers: It's a routine, life altering surgery. No problem. How can a person support their gallbladder function?

Dr. Melina Roberts: There's lots of ways that we can support that gallbladder. One of the ways is through incorporating bitter foods into our diet. I think bitter foods tend to be something that gets forgotten. We talk about sweet and salty foods, but we don't talk about bitter foods. Bitter foods can help with proper gallbladder function. There are some bitter herbs that can be helpful for that. Fermented foods can also be helpful with proper gallbladder function. We usually do them with supplements but you can do them as food sources, too. One of them is choline, which you find in high amounts in egg yolks. Choline helps to make the bile thinner and can help with better bile flow. Those are some easy ways that we can help to support the gallbladder.

Wendy Myers: Then there's coffee enemas. Everyone's favorite protocol for detox. I am a big fan of those to help thin the bile and to help the liver function better, help the

body detox better, but most importantly help to make more glutathione and get that bile thinned out and cleansed.

Dr. Melina Roberts: I think the benefit of those coffee enemas is that the rectum is so highly vascular and so you absorb that coffee right into the bloodstream. Then you have direct access to the liver and the gallbladder through those portal veins. That's also an effective tool.

Wendy Myers: Are you recommending those to your patients?

Dr. Melina Roberts: Yes, I have patients who ask me about them. If they are willing to do them, I am definitely in support of them doing them. We don't do them in the office. They have to do them at home.

Wendy Myers: You need to go home and do them in the privacy of your own bathroom.

Dr. Melina Roberts: Yes, exactly.

Wendy Myers: That's what's great about coffee enemas is you can do it at home. You don't have to go pay someone. It's one of the most inexpensive and most effective detox protocols out there. Is there anything that we've left out of the conversation, that you wanted to add in regards to detoxification or things that you like to do with your patients?

Dr. Melina Roberts: I think that we really covered it. I think that the point that does often get forgotten when we talk about heavy metal toxicity is the important role of the gallbladder. I'm glad you asked me about that because I think that that's an important system that often gets forgotten in terms of detox, especially in terms of heavy metal toxicity.

Wendy Myers: Okay, great. Why don't you tell us where we can find you and learn more about you? If anyone listening wants to work with you, how can they get in touch with you?

Dr. Melina Roberts: The best place to find me is through my website, which is AdvancedNaturopathic.com. Then on social media, probably the place I hang out the most would be on Instagram and my handle there is Dr. Melina Roberts.

Wendy Myers: Okay, fantastic.

Dr. Melina Roberts: Those are the best places to find me.

Wendy Myers: Where is your practice located?

Dr. Melina Roberts: We are in Calgary, Alberta, Canada. Basically, on the West Coast of Canada.

Wendy Myers: Fantastic. Well, Dr. Roberts, thank you so much for coming on the show. I very much appreciate your input because I've gotten so many questions about IV chelation, when to do it, should I do it and what have you. Thank you for answering all of our questions.

Dr. Melina Roberts: Thank you so much for having me, Wendy. It's been wonderful.

Wendy Myers: Everyone, thanks so much for tuning in to *The Myers Detox Podcast* where we talk every week about different topics related to heavy metal detoxification. You'll get all your questions answered. Thanks for tuning in. You can find me on YouTube at [YouTube.com/WendyMyers](https://www.youtube.com/WendyMyers). You can also find me on Facebook, Instagram and all the social media platforms at Myers Detox. Thanks for tuning in. I'll talk to you guys next week.

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