
Troubleshooting Step 4

Christa: Just a quick video about troubleshooting step four. All the magic is going to be in your PDF, but some things, as you start to introduce the HCL challenge or other ways of optimizing hydrochloric acid. Hey, your patients and clients may start to get chronic belching, especially on Plan S, and it might become worse after they eat. It doesn't mean that it's not working. It just means we can make them comfortable while their body is optimizing and resetting the HCL set point.

[00:00:30] The pathogen purge and the receding phases, they may have helped take sugar cravings away and maybe they come back. That's rare, but it happens. So it is in our top 10 for step four and for terraforming because we can't control the pace of the way the new seeds of bacteria are growing, but we can respond and adjust accordingly.

Plan F, some people may still be experiencing candida symptoms, and that's where we may say, "Okay. We're going to add in the clay and Diatomaceous Earth. We're going to keep it going [00:01:00] and keep the candida diet for an extra two weeks and then do their 80/20 at the end." So just some things you might come up with.

You may have some Plan S-ers that are still experiencing gas, constipation and skin rashes that are appearing out of nowhere. If they didn't in step three, they may in step four, and we've got plenty of recommendations for those.

You may have someone, again, on Plan S... You can tell I keep talking about Plan S because they are the ones that have the most trouble, [00:01:30] and sometimes week into the HCL challenge and adding in fermented foods and fiber, it's too much and it creates a rumbling stomach. It might create foul smelling gas, especially if their methane CBO or constipation. So we will then have to backtrack and adjust some of the levels and layers of what we're doing there in the way of pro- and prebiotics. We'll shift the strain or we may have to wait an additional three weeks before we can add [00:02:00] those things in. So this is why it's truly a practice.

Stepping down, some people will have trouble stepping down on the HCL challenge after they start to reach a lot of capsules. Like let's say 14 capsules and then they start experiencing digestive stress or invariable changes in

stools. But yet they're still getting the burn. So we'll really help you work and amend and maybe do a combined approach with them.

There's other [00:02:30] things they may be asking. They're asking questions like, should you keep doing the coffee enemas as you're moving things along? What other modifications can you make based upon whatever protocols is being administered, which one of the four protocols is being administered.

You may have someone who takes one capsule. We've had this happen before many times, enough to be included in the top 10, and they felt a burning sensation. And the next day they went down to a half a capsule 20 minutes before eating, [00:03:00] and never felt a burning sensation. So they're going to say, "Okay. Well, what should I do?" In that case, we're just going to keep the half a capsule with the largest meal of the day.

So these are all adjustments that we want you making in real time. You may be emailing with your clients to make these adjustments because you're not going to need an actual session with them to make minor adjustments in between.

Now you may have some of your people on Plan P. When these guys finish the pathogen purge, they're feeling better than they've felt in many years. And they could take a [00:03:30] dip once they complete the HCL challenge and introduce probiotics. They may experience a resurgence of symptoms, but that could be bloating. Again, intestinal spasms or food sensitivities or skin rashes. It's just the turnover of the genetic code of the gut that we have some growing and some healing pains. And we can make them more comfortable along the way. Again, it doesn't mean that the program's not working.

You're going to also get questions about the burn. What does this burn me? What should it feel like? Do I [00:04:00] have it? Do I not? I can't tell. And so we'll make sure, and that's why again, you've got to be your own lab rat. You've got to experience it yourself so you can adequately articulate it to your clients and patients. But you're going to really want to describe... It's going to take the anxiety out of it for them. The more you can preemptively share the experience that they're about to have and say, "Hey, if you hit these pitfalls, that's all they are. They're little roadblocks along the way for healing. Don't think it's not working." They're going to be able to handle [00:04:30] it better because we don't want them to stop doing something and just wait a week or two weeks until they come back to see you. You're going to want to make sure you're monitoring them throughout this process.

So low hydrochloric acid and rosacea are intimately connected. So we'll have people, they're taking a number of capsules. Let's say seven capsules and they don't get a burning sensation, but they have rosacea and they experience the burning sensation along the face. That counts as a burning sensation. Even if they're [00:05:00] not feeling it in their stomach but it's a sign, and that rosacea's going to get better. It might get worse for a little while, but then it will start to get better.

The other thing, some participants are going to want to stop taking all supplements when they complete the receding phase. They're going to want to take a two week break before they start the transition. There's all kinds of things that you can do to continue to support them in a highly customized way. So a lot of these questions are going to come up, and you've got to [00:05:30] write down the questions, ask them to us, share them in your case studies because we'll be more effective for you if we understand the total picture.

So happy troubleshooting in step four.