

Reversing Rheumatoid Arthritis - Clint Paddison

Reversing Rheumatoid Arthritis

Clint Paddison helps people dramatically improve and may be able to help with Reversing Rheumatoid Arthritis symptoms so as to have a better quality of life, live with less pain, and require less medication. After recovering from a severe form of Rheumatoid Arthritis, he is now one of the world's leading authorities in the natural approach to reversing inflammatory arthritis.

To learn more about Clint and the Paddison program visit www.paddisonprogram.com

Transcription:

Intro 0:04

Recovery After Stroke podcast. Helping you go from where you are to where you'd rather be.

Bill 0:14

This episode of the Recovery After Stroke podcast is brought to you by my own personal website, BillGasiamis.com. It's where you can go and find out more about what I am passionate about and how I help people recover their health after serious injury, particularly people that have been affected by a traumatic brain injury like stroke.

Bill 0:37

I am in my fifth year of recovering from three brain hemorrhages and surgery, which caused complications that meant I had to learn how to walk again. It's been tough, but I've come a long way. And now I use what I've learned about the brain and recovery from stroke to help others overcome fatigue, recover movement, get back to work, and live an inspired life after stroke.

Bill 1:01

Visit the page and drop me a line. If you have any questions, I'd love to hear from you. rheumatoid arthritis is a chronic progressive disease causing inflammation in the joints and resulting in painful deformity and immobility, especially in the fingers, wrists, feet, and ankles. The onset of rheumatoid arthritis is usually in middle life between 25 and 45.

Bill 1:26

Although it can affect children as young as three years old, the disease affects about 1% to 2% of the world's population, mostly females. In rheumatoid arthritis, the immune system attacks normal tissue components as if they were invading pathogens, causing an inflammatory response. The inflammation associated with rheumatoid arthritis primarily attacks the linings of the joints.

Bill 1:54

Symptoms vary from person to person and may include swelling, pain, In hate in the joints, persistent fatigue, joint stiffness, particularly in the morning, sleeping difficulties because of pain, weak muscles. factors that increase your likelihood of developing rheumatoid arthritis are age, gender, family history of rheumatoid arthritis, ethnic background obesity.

Bill 2:26

My guest today also believes that you are at high risk of developing rheumatoid arthritis. If you have ever been to a GP and been prescribed a very common medication that most of us have taken at some time in our lives. He has a proven method to reverse rheumatoid arthritis and has reversed his own serious rheumatoid arthritis condition, but you'll have to listen further to find out more.

Bill 2:50

If you liked the episode, please leave us a five-star review. It will make it easier for other people affected by rheumatoid arthritis to find the podcast and it could make it massive difference in someone's life. Now, it's on with the show. Hey, Clint, welcome to the program, mate.

Clint Paddison 3:06

Thanks for having me, Bill.

Bill 3:08

It's my real pleasure, actually. And it's good to interview somebody who is a native Australian as well.

Clint Paddison 3:16

Oh, yeah, mate, what if there's only \$22 million of us or something, we've got to try and get ourselves out there somehow out of the world.

Bill 3:22

We're going to get stuck into the interview. But before I do, I'll just tell the viewers and the listeners a little bit about what you do. And what it is that you do is that you help people improve their rheumatoid arthritis symptoms, so as to have a better quality of life live in less pain, and require less medication.

Bill 3:42

After recovering from a severe form of rheumatoid arthritis yourself. You're now one of the world's leading authorities in natural approaches for reversing inflammatory arthritis. Mate, it's so good to have somebody like you so close to home, and now we're going to share with You know, to the rest of the planet. Tell me a little bit about yourself.

Clint Paddison 4:05

Well, I'm not your classic kind of medical expert who comes at this with a Ph.D. in, you know, rheumatology or something like that I'm someone who went through the most excruciating, multiple years. And I had to really get to the bottom of what was going on with my disease because the answers weren't coming to me through an education that I'd had or through education that the medical professionals were giving me.

Clint Paddison 4:34

So I'm someone who has a relentless and never-ending determination to try and solve problems. And my education is actually laser physics. So I come at this from a background of the science of my degrees actually a Bachelor of Technology in Opto electronics which is the light associated with optical fibers and lasers and things, and I got the highest thesis grade that has ever been issued at my university in the department of maths, physics, computing all electronic.

Bill 5:11

The room started to get small.

Clint Paddison 5:14

So look, but let me just offset that with them. After being, you know, following up my education or that went into the startup world I was a, an engineer hired into a

company here in Sydney. And then after a couple of years, I had 100 staff working for me as a production manager for these small components that were being shipped to a worldwide technology boom. Anyway, after doing that, for sort of five years, I then just put a completely different spin on my sort of career.

Clint Paddison 5:48

I then moved into entertainment and I found a passion for making people laugh and have been involved with stand-up comedy and being a professional. stand-up comedian for seven years now. So I've made a great living out of that traveling to 16 countries performing entertaining the troops in Iraq and have performed in Hawaii and Island and God Solomon Islands, and you name it.

Clint Paddison 6:14

Yeah. So it's just been a very interesting journey that's taken me on cruise ships and country towns and yeah, so it's been, it's been very eye-opening. And so the benefit of having sort of a problem-solving kind of education, and then a journey that gave me a lot of spare time, I was able to treat my health condition with the utmost of attention, and try and work out what the bloody hell was going on with my body because it was attacking itself.

Bill 6:46

Awesome. I love the way you came into problem-solving and the way that you got to well let me put this problem-solving thing that I'm good at doing into solve Solving my own problem, I mean, that's awesome. Rather than putting that out to somebody else to solve your problem for you, which is what we do with doctors now, I wouldn't be here without doctors and hospitals and all that kind of stuff. I absolutely needed them to be the ones to open my head and operate on me, right? I wouldn't want to be doing that on my own.

Bill 7:22

But when I went home, there were certain things that I couldn't do. That I could do that they couldn't help me with, which was informed me about how I go about stroke recovery, healing my brain after, you know, the challenges that I went through. And that was my responsibility. So I had to do that. And I went on a similar problem-solving process as you and before you tell me about how you got to eventually sort of getting to that point where you really, really well these days, tell me what actually is rheumatoid arthritis and how did you experience it?

Clint Paddison 7:58

Yes, so What it is it's an autoimmune disease. So there are about 100 different of these intricate, complex complex Lee titled diseases called autoimmune diseases things like rheumatoid arthritis and Crohn's disease, and localizing spondylitis. And they are, they a situation where the body is confused and is attacking its own cells.

Clint Paddison 8:24

So another example is type one diabetes and so the body is attacking part of its own tissues, and consequently that part of the body suffers and begins to deteriorate. And so with rheumatoid arthritis, the chosen enemy within the body is the lining around the joints. And so what you have is a very inflamed, swollen, red set of joints throughout your body and they are very painful, hard to move and they stiffen up so you feel like when It's in your feet that you're walking on shards of glass, that's the feeling that you get when you're walking on your, on your, on your feet.

Clint Paddison 9:06

And throughout the rest of the body, it's hard to describe because it's such an unnatural form of pain like it's not the sort of pain that you kind of feel. When you say bump your elbow in it feels okay there's a there's a pain there, it's a familiar pain, you sort of feel you know that pain and you know that it'll go away and then your body will heal.

Clint Paddison 9:27

With autoimmune pain in your joints. It's a very foreign feeling and it's very irritating because you know, that the source of that pain is coming from your own body and you can't just walk away from it because you are actually causing it. It's very, very unsettling.

Clint Paddison 9:43

So I had it, you know, quite severe throughout my whole body and, and just, you know, answer your question and not to take it too much further, is that it's just swollen joints that can end up in surgeries and For me, I had to have elbow surgery, my left elbow. I was looking at a knee replacement when I was just 34 years old, which I managed to avoid narrowly because I worked a lot of the problems out there just in time.

Clint Paddison 10:14

But yeah, man, it's a tremendously debilitating condition. And within 10 years, something like 15% of people with RA has to leave the workforce, and certainly, a lot of people that I now coach, though, you know, my reach beyond that stage, and I help them to want to, you know, I just got one person back to work recently, which was amazing. So, yeah, man, it's a shocking disease. That's debilitating.

Bill 10:42

You know what? You look like a pretty young bloke. And you mentioned the number 34. How old were you when you started to experience rheumatoid arthritis what happens to old people man?

Clint Paddison 10:54

So I'm glad you mentioned that because, on the flip side, you can get it we can get rheumatoid acts. Right as even as a child and the youngest child that I've worked with who's got the disease is about two and a half. So these poor little children get this autoimmune condition. And then they get the same drug options as the adults. And I know that as an adult, these drug options are some of the worst that you could ever want.

Clint Paddison 11:22

The cancer drugs, that's where you start, you start with the cancer drugs. And then you work your way up into these other immuno-modulating drugs that have side effects that, quite frankly, can change your life. So, I mean, the spectrum of drugs goes from terrible to extraordinarily terrible, and the children get offered the exact same combo of drugs.

Clint Paddison 11:42

So it's challenging. So the reason you can get it at a young age is that it's autoimmune. It's not your body just slowly getting wear and tear arthritis like osteoarthritis, or old age, arthritis, this sort of thing. This is something where your body's made a mistake, and your body's attacking itself. Their mechanisms behind it are somewhat complex, but certainly, something we can talk about if you want. Or we can go into other directions where they however you want to run it.

Bill 12:12

I want people to know what causes it. Now, I have a thyroid condition. So I have

an underactive thyroid,

Bill 12:20

Hyperthyroidism. Not Hashimotos Thank God, it's not Hashem odos Okay, I've been tested and did all that stuff. But what happened to me was one of the thyroid glands was really enlarged, it was about the size of a cricket ball. Further viewers overseas or the listeners overseas a baseball and we had to get to the point where it was interfering with my esophagus in my windpipe, it had moved it by about six centimeters into that side.

Bill Paddison 12:51

Wow. So we needed to make sure that my windpipe and my esophagus when compromised any further and over a long period of time, so removed that half. And that half of the thyroid gland put me into space when hypothyroid. And even though I was hypothyroid, I put on a little bit of weight, but I wasn't putting on an excessive amount of weight because, like you, I had I've done for years of researching how I'm going to heal my brain, and I'm pretty sure we did some similar things. But that's, that's a different story for another day.

Bill 13:24

And what I've been able to do is I've been able to manage all of the, the, the most debilitating part of the symptoms, and I take a little bit of thyroxin which helps my body you know, regulate my hormones. So that's the only thing that I take, I'm not putting on weight. And I'll go to this point pretty much doing my own research and the hardest part for me, and I wonder what happened with you, but the hardest part for me was, I went and paid what I consider a lot of money for half an hour 200 bucks to go and see a specialist who was dealing with The endocrine systems and the chronologist.

Bill 14:03

And when I asked the question, what causes a thyroid gland to stop functioning properly? Or become enlarged? The answer was nothing, nothing causes it. And I was dumbfounded. I was like, Well, how could you possibly say that nothing causes there's got to be something. And from that, instead of getting offended, or taking it the wrong way, what I understood was that the medical profession had one approach to it.

Bill 14:28

And that was, well big, not working or cancerous, we just take them out. And that's the one approach that's a solution for everything, then we put you on medication for the rest of your life. And I'm curious how it was that you went about the process of being diagnosed, and then what your experience was with the medical profession, and I'm going to go back to remember what I said was without the medical profession when I had my brain stuff, I'd be dead. So I'm not saying that there's anything wrong with the way a medical professional approaches it I'm just saying that people's experiences are similar. I'm wondering if yours was the same.

Clint Paddison 15:08

So my guy my rheumatologist was outstanding. One of the issues with getting an inflammatory arthritic condition is that it's very hard to see specialists, you can spend sometimes two to three months on a waiting list around the world. I've seen this consistently doesn't matter which country you're in the West seems to be a two to three-month turnaround to get to see the doctor. And then when you do see the doctor, there can be a great deal of skepticism in the doctor's mind with regard to any kind of alternative to medical treatment and their treatment.

Clint Paddison 15:48

And now I got very lucky because my rheumatologist was absolutely outstanding. And my wife and I were just talking about this the other night for the first time in ages just have Good he was and basically humoring me and allowing me to go off and try my various experiments which they were. Now, he diagnoses me by just doing a physical exam. So you investigate the range of motion of the joints, and he puts a little pressure with his thumb and forefinger into the joints and also through a series of blood tests, which I'd actually already done from my GP.

Clint Paddison 16:29

The blood tests they look for with rheumatoid arthritis or a couple of things called rheumatoid factor and anti-CCP and they're indicators of the presence of the disease in your body. And also then they look at the inflammation markers, liver, enzymes, all sorts of stuff. So C reactive protein and sed rate are a couple of markers that they used. So I was elevated across the charts. And, you know, my markers were extraordinarily high, so my rheumatoid factor was in the multiple hundreds. So as soon as the anti-CCP and I were in a fairly severe case when I went in and was suggested on my very first visit to go on to the cancer drug methotrexate.

Clint Paddison 17:12

And just to sort of follow that story along a little bit, I then you know, thought, you know, I had never actually even broken a bone prior to that point I'd never had any other health condition of any kind. I was a cross-country champion at school. I was the sports Captain at my university college. I ran the Sydney city to serve for the very first time without actually having trained and was in the top 5000 out of the hundred thousand runners and I didn't I don't even think I warmed up like stupid.

Bill 17:45

You're one of those guys that just takes the sport like a duck to water. I know people like you.

Clint Paddison 17:50

Right? So, here I was at 31 so I'm 41 now so 10 years ago 31 I walked into the rheumatologist's office. He said this drug and then this and it's going to be you know how bad the whole thing is. And in the first meeting, I said to him, has anyone ever gotten rid of this? And he's like, No, not that I've known since I've been working in my practice.

Clint Paddison 18:13

Now. He is at the end of his career. So we're talking thousands of patients that he has seen in our lifetime, multiple decades. And anyway, I thought, okay, now it suddenly dawned on me what, how serious this is. And so anyway, I said, Look, let me give me some time before I start taking this drug. And remarkably, one of the recommendations from early on was to take antibiotics, and this is where we're getting in the crux of the coals.

Clint Paddison 18:42

Okay. Because even 10 years ago, when I was diagnosed, which now you know, it sounds so long ago, but it just doesn't, you know, going through this does still has a role short feeling to it, you know, but when he started suggesting some antibiotics in conjunction with methotrexate alarm bells went off because when I was a teenager, I took five consecutive years of antibiotic dose for my acne as a teenager.

Clint Paddison 19:10

Now, I've since seen through my own surveys, and I've got a survey running

through all of my clients. I only started about six months ago. I've got 300 responses now, just through new people uptaking, our program who filled out the survey response, that long-term antibiotic use seems to be the number one risk factor for developing rheumatoid arthritis.

Bill 19:34

Wow.

Clint Paddison 19:37

Right. So now, now this is stuff that I actually don't believe is in any publication in the medical community because I have a unique viewpoint because I have people coming to me wanting to have natural solutions and sharing all of their, you know, past dietary changes their exercise regime. And giving me some anonymous, because I'm not going to be sharing any names or anything, data that I can use from a statistical point of view.

Clint Paddison 20:10

And, and that that was profound because it's not just me, it comes up time and time again, long term antibiotic use is an enormous issue way beyond what we think so anyway. Short term again, antibiotics are wonderful, long term, big dangers. So I've been on those antibiotics for a long time. So when he said to me, hey, I want to get you on this doxycycline I looked at him I'm like, Where do I know the words doxycycline?

Clint Paddison 20:37

That's the stuff that I took for five years when I was a teenager. And here's the big punch line. The same year, I got diagnosed just months before I'd been over to Iraq and entertain the troops over there, and the anti-malaria drug you have to take whilst deployed is doxycycline. And so months prior to getting My rheumatoid arthritis, I went back on the doxycycline that I had been on earlier in my life. And before I knew it, I was wiped out with joint pains and began my rheumatoid arthritis.

Clint Paddison 21:10

So is it the only thing that brought it on for me? No, because you have to have a lifestyle that also supports you know, that kind of disease. And a footnote to that, with regards to the kids gets complicated with the children, but I have answers for those as well. But for the majority of us, you know, there are lifestyle choices

we can make, which minimize the chances of getting such a disease not completely eliminates but minimizes and I wasn't using them disease-minimizing diet, right?

Clint Paddison 21:44

And so with the terrible antibiotic use, and a non-disease minimizing diet, I got the throw the autoimmune disease, and so I spent 12 months trying to not use the drugs And trying to reverse the disease naturally. And in that 12 months I just worse and worse and worse and I outsourced my condition to every naturopath and I went to homeopaths and I even went to like, like Maury to go to mud baths up in the northern central coastal region of New South Wales.

Clint Paddison 22:20

We're in Fiji and I'm going in my bath every day trying to use whatever this mineral content mud Botha, that relief paints. I mean, I even had a natural path run electrical currents through me every week. For several months we went and we spent thousands of dollars with this naturopath because he was targeting particular microbes in me with certain frequencies of electrical currents, none of which I could feel but we're you know, below the level of sensation but I mean, I was trying everything my the one thing I didn't go crazy with was with my diet and exercise which are now the two pillars of my recommendations to everyone the two pillars. The two things that I did only small amounts of changes on.

Bill 23:10

We'll talk about that in a moment. I want to go back a little bit, huh? What do antibiotics do that create such a high risk of rheumatoid arthritis? What do they actually do other than get rid of the blocked and stuffed up nose when you go to the GP and get prescribed and get rid of pimples and all that kind of stuff?

Clint Paddison 23:31

Yeah, so then nondiscretionary antibiotics just are like an atomic bomb on your healthy gut bacteria and take out all the good guys with the bad guys. They're like a monkey with a machine gun running around just killing everything right and they kill well, and so we're meant to have about two kilograms, or a little under of healthy bacteria inside our gut, right?

Clint Paddison 23:55

We're meant to be we actually have like 100 to one number of bacteria living

organ inside us as cells, I should say, as opposed to human cells, where, you know, you can get really kind of like bizarre when you start watching TED talks and stuff about people who are experts in bacteria and stuff because they can sometimes go as far to quite accurately say that we're actually a bacterial species with a human form. I mean, we're that much driven by bacteria, so it gets a bit wacky, and we'll keep it we'll keep it a little bit more straight and narrow.

Clint Paddison 24:32

But what happens when you drop in these atom bombs on your hill on your gut bacteria? It then ends up with a wasteland of what's meant to be a complete ecosystem of vibrant bacterial life forms. And instead of that, you've taken out the rainforest, you've cut down everything and all you're left with is this space where pathogens can thrive, right?

Clint Paddison 24:58

Okay, so So what actually happens with rheumatoid arthritis and autoimmune diseases in general is that particles that are meant to be confined to your intestinal tract, end up moving through the walls of your intestine and into your bloodstream. Now, under normal healthy conditions, this is how we receive the energy we move digested proteins, fats, and carbohydrates right into our bloodstream. And from those we we get energy and we rebuild proteins and fats.

Clint Paddison 25:37

And so this is how our body is designed to work when those particles are really really small in their in their most finite smallest components. So fats become fatty acids and carbohydrates become simple sugars and proteins become amino acids, all of these things in the blood, Happy Days, right? But when An incompletely digested protein enters the bloodstream, the body that the body can see that as an enemy because we're not meant to have whole proteins inside our blood, they're not meant to be there. Right, right.

Clint Paddison 26:15

So the body sees this protein floating around in the blood, and it says, that's an enemy. And what it does is start shooting the enemy with the antibodies from the body, it attaches to it actually tries to move it out of the body. The big problem occurs when those proteins look very similar to some parts of our body. Okay, so, in the case of rheumatoid arthritis, those proteins look very similar to the lining of the proteins of the lining of our joints.

Clint Paddison 26:52

And the reason that this is quite, you know, commonsensical is that there are only 20 amino acids, right? So it's like the letters of the alphabet, there are only so many different proteins that we can actually make in nature because all proteins are made up of the same number, a finite number of amino acids, right? And so you're going to get some proteins that look very similar to proteins in your own tissues.

Clint Paddison 27:21

And when you're consuming animal-based proteins, you know, particularly cow's milk is a good example. Then we can the proteins in that milk look a lot similar to that of human tissue. And then we have to have a predisposition to a certain diagnosis, a certain name, or a certain part of our body that's going to get attacked, and for me, it was the lining of the joints, but the same mechanism is at play with other autoimmune diseases.

Clint Paddison 27:51

And so the body just detects the one that you are, I guess, genetically weakest. And so that's what's going on. And so you asked, how does Antibiotics play a role in this? Well, bacteria helped to keep the integrity of the gut wall. And so they helped to create what's called the tight junctions. And so that stuff can't get through in the gaps. And so bacteria are very important in this in this process.

Clint Paddison 28:19

So they do a lot of things, but that's one of the things. They also create vitamins. They also link to our energy levels, all sorts of stuff, but that's the one that matters most when we're dealing with autoimmune disease. So if you start dropping the bombs on them, you're susceptible to big things, not just autoimmune diseases, but all sorts of problems.

Bill 28:40

So the gut bacteria prevent leaky gut.

Clint Paddison 28:45

They do.

Bill 28:47

And leaky gut is now how the condition is described when particles that are not meant to be inside of your bloodstream inside of your body that is meant to be

contained in your gut from your esophagus right down to your anus when escaping when they're not meant to be anywhere else, but inside your gut and they escape and go into the bloodstream.

Bill 29:11

That is because what we've done through diet through the use of antibiotics is compromised the gut lining, which keeps all the junk in. It's allowed some of that junk to go out that junk mimics some proteins that are not supposed to be in our bloodstream. The immune system says, hey, that's not supposed to be here. Let's attack it.

Bill 29:34

And then the immune system attacks that play protein that's not supposed to be there, but that looks like a protein of a joint or a thyroid gland, or anything else. And it says, Well, let me eliminate all of those as well. So the body's going, Hey, I'm doing a good thing here. But it doesn't know the difference between what is an invasive protein and what is a protein. that's meant to be there to help us.

Clint Paddison 30:02

Did you get it up? Did you get it? That's exactly correct. And then what's fascinating is that once you stop the crap entering into the bloodstream, and I say crap, like, it's just, you know, a lot of it is, is food particles that have just been incompletely digested. A lot of it, however, is, you know, pathogenic bacteria.

Clint Paddison 30:23

And what and, and there's a little sort of refinement or addition, I should say to our definition here is that sometimes the proteins in the lining of bacteria as well can trigger and this is a little bit more difficult to conceive because of the size. I always thought a bacteria might have been bigger than a protein, sorry, a protein might be bigger than a bacteria, but it's not the case at all.

Clint Paddison 30:48

The proteins are very small, and bacterial, it can have proteins in the lining of its shell around the outside. And this also can create problems with the immune system. And so what's really interesting And this is where the crux of my whole approach lies. And this is the fuel that made me so determined that I could heal this disease because when you stop eating when you have rheumatoid arthritis, the pain completely goes away.

Clint Paddison 31:19

Okay, now, this is profound. This is like this. This is so profound that in the absence of having stuff entering the bloodstream, the body stops at attack. Wow. Okay, now, now, I could say with a fair degree of confidence, that 95% of rheumatologists that treat this disease around the world don't know that

Bill 31:51

Yeah, wow. Yeah. Oh, I think my opinion would be the same that 95% of rheumatologists definitely will No that and that's why they wouldn't know that is beyond me, but it's a topic for another discussion. But that's the other interesting thing about what you say is that when somebody recovering from a brain injury doesn't eat, that process of not eating in that short period of time releases a product called ketones it releases, ketones, and ketones, ketones are enough, are created by the body to supply the brain with energy in times of famine.

Bill 32:41

And as a result of that. What happens to the brain is the inflammation from the sources, you know that the inflammation that we put in via the food, like you said, is decreased and the brain starts to heal and recover, even though the person's not eating so I can completely relate to them. Yeah, and they were starting to hear the word and talk about how a ketosis-inducing diet supports brain health. And it doesn't surprise me that perhaps similar mechanisms are going on. When somebody's suffering from rheumatoid arthritis decides, man, I can't be bothered eating right now I'm not going to eat. I'm going to go on a fast for a little while.

Clint Paddison 33:26

Yeah, one of the issues with most people with rheumatoid, is there are two extremes normally with their weight. Those who have developed an understanding of the pain and food consumption relationship all end up skinny, because when you've worked out that the more you eat, the more pain you're in. Over a long period of time, you're naturally making choices to eat less food or to eat fewer calories, whether it's subconscious or conscious. That's what you see. You see a lot of skinny people with rheumatoid arthritis.

Clint Paddison 34:00

And making matters worse is that his skinny folks find it hard to exercise because they don't have a lot of muscle mass to support, you know, the body weight and movement, so their joints and it hurts to move their joints. So they are our

exercise avoidance. And so this is a problem in itself. And then the other flip side is that drugs like pregnant zone, really add weight to your body and blow out give you a moon face and all sorts of stuff.

Clint Paddison 34:30

So you kind of got these you got these fatty fate drug taken sort of pregnant zone consumers. And then you've got the people who are on the other side of it on the thin side because they are so aware of the fact that the foods are giving them pain, even though they might not know which foods they just go with it. I'm not going to eat too much kind of approach.

Bill 34:53

And then like the body going into this sort of instinctive, instinctive you guys are going Hey, Food Association pain, let's just not let him think about it, but let's just make him eat less. And as a result, we'll have less pain to go for if the body again tries to go another step of self-healing, but we haven't worked it out yet we haven't potentially paid attention to what our body's saying.

Clint Paddison 35:21

That's right. That's right. And I like what you're talking about with regards to not eating with regards to going into the, you know, ketosis and, and one author that I love, and I hope to interview him in the coming in. His name is Hiromi Shinya and he wrote a book called the enzyme factor. And in the enzyme factor, he has this lovely little, you know, he's a Japanese man, a gastroenterologist, his whole career is looking at people's colon.

Clint Paddison 35:50

So you can imagine like, I'm sure he's fine at you know, parties, but he he he has a lot of these eloquently put expressions that come from that kind of humble Japanese background and, and he has one that I love. It's called make friends with gentle hunger. And the reason that he says that is he says because it takes 10 metabolic enzymes to convert to create one digestive enzyme. So nobody has all these enzymes that we use for all functioning.

Clint Paddison 36:22

Everything I'm doing right now is using enzymes from blinking to talking to moving everything right. And so they're all metabolic enzymes that digest digestion requires digestive enzymes and they are able to convert back and forth

the body is able to repurpose the enzymes. And the digestive enzymes required 10 times as many. And so it's hard to digest food and do a whole lot of anything else. And so it's a big consumer of the body's resources when we're breaking down food.

Clint Paddison 36:58

So if we give our gut a Break, we just giving our whole body tremendous relief and an opportunity to heal, to repair to calm down inflammation. And yeah, it's a wonderful thing. So in a society where 60% of people are overweight, I mean, why the heck isn't every person who's in that category? Taking a meal off once a week?

Bill 37:26

Yeah, let me go back to what my mom used to tell me about fasting. But if I fasted, I would go to heaven, you know, but turns out that the people that invented religion and all the different versions of religion over the decades, I've ever hundreds of thousands of years that we've been on the planet who thought their fasting was a good idea.

Bill 37:47

Turns out that they may not have had the science to explain why fasting is good, but they must have realized that when my population or my flock or my parish fast for a month Or awake, or whatever it is over a period of a year. What happens is that their health improves, they just get better. That's it so true make it about God.

Bill 38:10

Why don't we say that God said you need to fast? But now that the God message is kind of getting lost in this new age world that we live in, we need to start talking about things like the things that religions teach, but from a different perspective so that people can relate to it, especially the people that aren't that way inclined,

Clint Paddison 38:33

Yeah, sure. I mean, everyone comes back to me and says, I want to see the science and so all morning this morning. Coincidentally, it's not because I wanted to share this on the podcast, but just this morning, coincidentally, I'm going way back into the science again, I've been working on a new guide for

rheumatologists. Because every doctor who my clients go to see for themselves says, I'm doing this program I'm making great results.

Clint Paddison 38:57

And they say, Oh, look, there's you know, still No evidence to support any dietary impact and they say I want to see the science well wait till they see this, I mean, I've got this, you know, put together this massive summary, that's just a one-page document that summarizes all this and so doctors want to see the science, right and so I'm creating a big IKEA but I'm coming back to what you just touched upon.

Clint Paddison 39:22

But it's hard to work out what the general public wants to be able to you know, make their health choices because you tell someone that they're ruining the planet by eating red meat every day and basically having an enormous meat intake diet, for instance. Now in case you tell them that same diet, same sort of diet with some of you tell them that, you know, that that that you know, V or whatever it was a young calf and show them pictures like they don't really care they just assume.

Clint Paddison 39:57

But what motivates them is when They're in physical pain. And I think that religion also can drive someone to make the right changes. But other than pain, I don't know what can. Yeah, I don't I don't know, you know, people, people will lie on a table and have they have a chainsaw go through their chest to have bypass surgery, rather than eating a bean burrito.

Bill 40:24

You know what I mean? Yeah, I know, people will. And people will go and opt for, you know, the surgery that makes the stomach smaller, so that they can lose weight, then just stop eating carbs, for example, or drinking 10 liters of beer or whatever it is, right? So it is interesting. And I find that as well because now I'm aware, I'm fully aware I do.

Bill 40:48

My approach is very similar to yours. And I coach people that are recovering from brain injuries, whether they're traumatic brain injuries or strokes or whatever they are to heal their brain, and as a result, what they achieve is they take control

of their condition and a better long-term outcome rather than just this short term. You know, we've since stitched your head up and go back home. And you know, she'll be right whatever happens happens. So what I understand now because of what I did, what I did to myself with nutrition is smoking working too much drinking too much being a standard Ozzy bloke that grew up going out eating out and, you know, stuffing around with my mate.

Bill 41:36

What I did to myself was preventable. And I don't say that just because I think it's preventable because the world stroke Organization says that 95% of strokes are preventable, which means that if we can find a way to motivate people and let them say the future what is painful after stroke, Which is painful with rheumatoid arthritis, then we perhaps can get them to take action. But my message is falling on deaf ears as well because the people that I talk to are my direct family members, mum, dad, my wife, and everybody, and not experiencing that right now.

Bill 42:19

And because they're not experiencing that right now, it's not a priority to take action. So if your roof isn't leaking, but there's a crack tile. Yeah, well, you know, it's no big deal when it rains and we have a downpour and it starts leaking. And now it's damaged the ceiling. Well, yeah, it's gonna cost more. It's gonna take more time, more money, more effort. But yeah, I'll do something about it right now because I actually saw it leak.

Bill 42:42

And it actually did make more for my ceiling falling. So this kind of process that the preventative prizes I'm not sure either and I kind of feel like maybe we're losing that preventative talk battle. Unless you're good. Government Department has hundreds of thousands and millions of dollars to throw at the non-smoking. You know, the no-smoking kind of process? Hmm, I think that the best thing that you and I can do is say, I lived through this.

Bill 43:15

It wasn't pleasant. If you know somebody living through this suggests that they pay attention, listen to this podcast, cleanse, podcast, whoever's a podcast, take some notes, and get them to help themselves. And then the biggest question I get when I present about stroke is people say to me, is it? Is it hereditary? And what's

interesting is that people don't like to want to say no, stroke is not necessarily hereditary stupidity is hereditary.

Bill 43:42

And they look at me and I go, what, what does that mean? And I say to one, well if you're dead if your dad's dad, your dad's brothers and uncles, and their dad, all died of a stroke and you're doing what they all did. Is there a chance that you will suffer the same outcome? And that is the only message that kind of gets people thinking about prevention because they see it as, okay, so what they did perhaps cause that with the statistic of 95% of strokes are preventable.

Bill 44:18

They kind of see it as Oh, okay, so maybe I should change my ways and not just do the smoking, the drinking the executive, everything because that might end up to where everyone else came rather than you know, and then as a result of that, it's a bit of conversation then. Hey guys, prevent Rubato from my rheumatoid arthritis, prevent cancer, prevent stroke, prevent heart disease, prevent all of that kind of stuff.

Bill 44:47

Now, I love what you're doing. That's why I want to interview I know only a small amount about you but I got a feel that what you are is passionate about supporting people once they've been on that terrible part of the journey. And if that leads to people, to your site creating prevention, and I think it will. I think that's kind of the bonus. But the work needs to be done on the people that are suffering now is the way I see it. And that's why I do what I do.

Clint Paddison 45:15

So what you've described is exactly the same as mine. I've never used something publicly quite as strong as stupidity is hereditary, but that's something near accurate with that. But absolutely, man, it's hard to look, I don't even know if I would have taken upon a message, a sort of message that I talked about now, before it happened to me, because I think we all feel immune to it. things going wrong.

Clint Paddison 45:45

We all feel like we're superheroes and nothing can impact our health and it'll always happen to someone else. And it's, you know, I think that it goes beyond the

scope of what you and I are capable of right now. But certainly, on the disease management, reversal, definitely or employee improvement path coaching, I think you know, we share similar views.

Bill 46:12

I love it. So we are, I really want to, I really want to give a few people some tips about what to do. They've just been diagnosed. Let's talk about day one. They've had the diagnosis and they've happened to come across your podcast or they've come across the episode here. What do we tell them?

Clint Paddison 46:35

Well, it's a, it's really everything's up to them. That's the bottom line it's how much you want to take responsibility for having discipline in your life, managing what you eat, how you exercise, how much stress you want to bring into your lifestyle with your job, your personal relationships versus weather, not you just want to take medications and then manage the ongoing battle with side effects and drugs filing.

Clint Paddison 47:07

So you've got, you know, it's and somewhere in between those two camps, because I believe that let's cut let's say, let's say case a does as much as you can to be as healthy as possible to require the least amount of medications because that will be the outcome, a dramatic amount of effort into becoming as healthy as possible will require fewer meds or you know, yeah, just defer to the medications as I said in which would be case the.

Clint Paddison 47:38

Now both of them suck. It is a disease that my doctor said of all the diseases I would not want to get that would be at the top of my list. He said that to me, right? And so it sucks, however, you can. If you apply incredible determination and absolute commitment, get to a point where you might be able to manage the disease, virtually symptom-free without medications, okay? However, that's like, you know, a small percentage on case a.

Clint Paddison 48:17

And then you can, as I said, just case be right medications and there are lots of challenges with that's not a happy path. And so what I would say after saying that to someone who's newly diagnosed, this is the tips that I would do straight away.

Let's say we're leaving a plane, I've been sitting next to them on the plane, I'll never see him again. And we're going in different directions at baggage claim.

Bill 48:40

I was lucky to sit next to you though, and they nailed the seat, right? And God, the universe, put them in your seat.

Clint Paddison 48:48

Okay, here's, here's what I would say. I would say that this might contradict some of the things that you teach your listeners with regard to what needs to be done. With stroke recovery but this is what you need to do when you've got an autoimmune disease you must go on a low-fat plant-based diet so which means you gotta eliminate all animal products because animal products even lean chicken 30% fat by calories and must have a low-fat diet for autoimmune conditions right?

Clint Paddison 49:20

And so we must go on a plant-based diet now people freak out what on earth am I going to eat? Well, it's actually pretty straightforward. And you can get most of your calories from rice potatoes, sweet potatoes, beans, legumes, you know lentils also stuff right? And eight tremendous amounts of leafy green salads. So I'm talking bok choy, baby spinach, cos lettuce, anything that's a leafy green plant that grew that goes into salads. That is your number one greatest friend because not only is it absolutely tremendously rich in Omega 3, you know, fatty acids.

Clint Paddison 50:05

And I'll talk a little bit more about that in a second. It's very, very alkalizing. And it's prebiotic, so it feeds your healthy gut bacteria. And that's one of the points here all the foods that are in plant-based foods all contain fiber. And nothing creates a culture of happy bacteria more than fiber, they live off of fiber. And so our aim is to have as much plant matter in our intestines as possible for our little bugs to age on it. And the diversity of the fiber can affect the diversity of the bugs. And we know that the diversity of bugs equals health.

Clint Paddison 50:44

That's been proven across all cultures and research done in all the microbiome studies. And so we want to have a large diversity of gut bacteria, and we want large volumes of healthy gut bacteria. So we feed them, feed them and Feed them

lots of slight variations of their favorite food, which is plants and especially leafy greens. Now, if someone's listening only did that 50% of their inflammation will be gone by the end of the week, and it will stay that way. And I'm talking doesn't matter how long you've had the condition 50% of your pain will go in a week just by doing that again. Now what about the other 50% Well, then it gets a lot harder.

Clint Paddison 51:31

Okay. I wanted not 50% gone I wanted 100% going right that was my goal. So what I did then is I had to experiment and work out well what can I eat that doesn't give me pain if I even if I stay within a high fiber-rich plant-based paradigm. It took me You took me two years to work out. And what I did in those years is his settle upon after doing a raw food vegan diet for eight Which is the hardest thing I've ever done. And I actually don't recommend clients do it, even though it was very effective. For me, it's just too dangerous. Like I lost so much weight.

Clint Paddison 52:09

I mean, it was just, it's just not a sustainable diet in my personal view. After doing that, I then shifted across onto a completely alkalizing what I call a baseline diet, a set of foods that are very simple that gave me the lowest amount of pain that I could have the highest nutritional concentration. So although it was a restrictive diet, it wasn't creating malnutrition. Right. And for me, that was a combination of buckwheat, which is a pseudo-grain Xinhua.

Clint Paddison 52:46

And another thing called amaranth and these are actually seeds, right, these seeds off a plant and they end so I would cook them all up together based on again, the advice from Dr. harami Shinya because he found that the healthiest intestinal intestines and the most beautiful digestive systems he ever saw, were for those people who consumed these pseudo-grains, and also brown rice and these sorts of things on a regular basis. So I went down that path.

Clint Paddison 53:17

And so I would say to the person, look, if you want to just, if you want to challenge, just go low-fat plant base, if you want to take it to a whole new level, you're going to have to go through a baseline period where you drop your pain levels even further, and then test foods back into your diet because you have different food sensitivities than the next person than me, then what you know

anyone else who has this, and so we need to just do food challenging back into your diet. It sounds so laborious, and it's as laborious as it sounds.

Clint Paddison 53:53

And I've created a guide that helps people do this, but even the reintroduction process is still only a suggested sequence. And within the suggested sequence, people need to find their own like a Choose Your Own Adventure path. And so I might present to them a range of around 10 to 15 foods for, say stage two, stage three, and within those they can choose from those foods. So what else I would tell them is I would say that food for people with chronic inflammation is only going to get you 60% of the way no matter how hardcore you go into this process.

Clint Paddison 54:38

I mean, you can go raw vegan like I did, which is, I believe the most aggressive pain reduction approach that isn't going to get you the hallway even then if you've got chronic rheumatoid arthritis, and the other 40% is exercise. And I say you've got to think about exercise. As if you're training to compete in some kind of event that's extremely important to win. And so you don't need to be capable of many sorts of, you know, amazing physical abilities.

Clint Paddison 55:20

You just need to give it everything you've got. So this means scheduling exercise and doing it every day. It means doing where possible working up to this, at least 30 minutes of cardiovascular exercise every day, which sounds hard, but it's not really you just go to the gym and jump on a push bike at the gym and stay on it for 30 minutes and you're done.

Clint Paddison 55:42

I mean, it's not that hard, right? Go for a swim each day for 30 minutes. At first, people might just be going to hydrotherapy classes, they might just be standing in the water and moving their arms because these are people with serious challenges, right? But it's got to build and build and We need to be extremely fit, highly exercised, disciplined plant-based human beings and we will have the lowest medications that we need to balance off or to complete the pain reduction.

Bill 56:19

Yeah, I love it. And yes, it is completely different from what the world's leading neurologists, neurologists will talk about recommending to get a better get better

brain health, especially when you're recovering from a brain injury. Brain injury, people told, told are starting to be told high fat, high protein diet include all of the leafy greens and veggies, that's a standard thing but they told to make sure they increase their fat consumption and to because that helps to heal neurons and heal you know, there's a specific purpose for it. And it sounds like there's a specific purpose for what you're talking about.

Bill 57:00

Everyone is different. And every condition is different. And not one diet helps everybody for every condition. Absolutely not. And that's what I like about it, it's different. So pay attention to the differences. And be that version of yourself for that period of time while you're healing. And then you know what, if you feel like not eating a plant-based diet for a week or whatever, you're going to go on a holiday and you want to splurge, see what it's like, give it a try.

Bill 57:28

And then just ask your body, how it feels. And if your body's going, mate, what are you doing to me? Then just know, you know what you've got to do, you've got to sort of ease back off it. And then just keep testing the waters if there's something that you must have if you must have that stake. Or then you know, keep testing the waters until you can have it effectively but in my you know, in my recovery, it was all about my recovery.

Bill 57:54

Everything else was second, I wasn't interested in, you know, the short-term gratification We're all about the long-term results. And then came the ability to introduce foods back into my diet that I hadn't been eating. But I'm still, I'm still off grains like wheat and gluten-containing grains. Tammy, what, what your thoughts are on that for rheumatoid arthritis big? Yeah, surely.

Clint Paddison 58:22

Yeah. And let me just add that for anyone who wants to see the science on any of this, I can provide all of this. I mean, this isn't stuff that I'm just flipping out trying, to share my personal opinions here. This is stuff that, you know, it's been well documented. And the reason I thought to add that is that cereal grains containing gluten are very problematic for people with rheumatoid arthritis. It's just a challenging protein.

Clint Paddison 58:49

Gluten is just a protein that's a little harder to digest than most other proteins. It's a long structure. And so my view on it is that I don't think pro Don't think gluten is all the enemy that everyone makes it out to be. I think that everyone who ate such crap dot has poor exercise habits as you put it said earlier drinks and smokes.

Clint Paddison 59:11

And what happens is the gut is compromised. And what happens when you get compromised anything is what happens is the thing that's hardest to deal with is the first thing that it finds it can't do anymore. And the first thing it can't do anymore is digest this bloody long protein that's coming in, right? And so we say we've got gluten sensitivity. Well Yes, you do. But why? Because the guts are a mess from eating all that crap and all the lifestyle choices that you make.

Clint Paddison 59:42

Okay, so gluten itself is not the problem. Our lifestyle has created a condition that means that we're pathetic at breaking down a little plant protein. Okay. Okay, so, so this means that I have all my clients avoid gluten as well, right? Because they're in that position. And we can't reverse that at the moment that's going to take time. But what we see is that people who are very compliant with the reintroduction process to their exercise.

Clint Paddison 1:00:19

What happens with time is that a portion of those people are then able to reintroduce gluten-containing foods again, the first one that most people seem to be able to handle is out. And so there seems to be a little bit more of a soft landing back into gluten-containing foods via oats than what there are say just to go straight into, say wheat, so yeah, that's something that seems to come up quite a lot. And so people eating just normal wheat-based breads and stuff. I can't say that too many of my clients are at that point, but certainly, a lot of them are back to eating oats again for breakfast. And it's taken a long time, but you can get gluten sensitivity, which I believe is reversible.

Bill 1:01:06

Yeah. Awesome. With your help, we're coming up to the end of the interview, and I just want to work out. I want to give people an understanding of where you were, how bad it was, and where you are now.

Clint Paddison 1:01:22

Okay, so people can, you know, look online and watch videos of me and agony and hardly able to walk in that but like, let me just paint a little picture. So I had the inflammation in all the little metal tassels on the bottom of my feet, joints that you don't even know exist because you don't think about them until they feel like broken glass, right? I had it in those I had it in my ankles and in my left knee was an atrocity.

Clint Paddison 1:01:54

I had it in my chest so much that I could actually with every breath, I would feel pain in my chest. I had it in my jaw. said that with every bite of food, I would get paid. I did all my fingers so I couldn't create a fist, right so I was like glory like that. These two fingers were blown up so much that it looked like I don't know like marbles in my fingers.

Clint Paddison 1:02:17

But my I think, you know the hardest to heal when my elbows because they, you know, at nighttime you can't protect them from rolling onto them. And one of the issues amongst them, you know, amongst the hundreds with rheumatoid is that when you're sleeping, your joints can get into positions that aren't good for them and you can't sort of prevent it because you're asleep, right and then you wake up and you've actually caused more problems.

Clint Paddison 1:02:45

So I was like that I could barely walk. One time I was trying to walk to a comedy show that was only a five-minute walk from my house. And it took me half an hour to get there because every 20 or 30 steps, I had To stop, reset money sit down on a park bench, or a bench on the side of the street. And my wife was with me and she was in a panic. I mean, imagine your loved one and they can't walk and I mean it was shocking stuff.

Clint Paddison 1:03:16

And I was on maximum dose of methotrexate you know, I said, I tried to avoid that drug at the start of this conversation. I ended up going on the maximum dose, I got to the end of that and I was not holding my condition at bay. So I had all those physical symptoms. I was on the maximum dose of methotrexate. My doctor said we need to go to a different drug. I was not able to have children because of the toxicity of methotrexate means there was no family planning, but

all of my options for me, none of which were family-friendly, all the other drug options.

Clint Paddison 1:03:48

And so it was at that point, that I had that sort of moment that turning point, like in a film where like, you know, there's no turning back, you know, your net was there anyway. Yeah. I'm going all in it. So it was shocking. And now you know, now I can, my knee doesn't allow me to jog because it's so damaged from the joint, from the damage from the inflammation that was in it. But I don't have inflammation in my body, but I have damage from where I was.

Clint Paddison 1:04:19

And I have to be careful. I'm not going to take any risks on trying to deviate from the lifestyle changes that I found got me better, because I'm well aware that this disease, once it's turned on, is, you know, at best, you're able to not have symptoms, but I don't want to go and mess around and eat cheese pizzas, and, you know, drink every night because I'm pretty certain that if I wanted to, I could start to bring pain back into my body, I don't want.

Bill 1:04:55

You're not a glutton for punishment mate.

Clint Paddison 1:04:58

Now, so it's this The expression that serves this best is you've always gonna have some pain in your life. And it's a choice between the pain of discipline versus the pain of regret. And so I'm, I'm choosing the pain of discipline for the rest of my life. And I encourage the pain of discipline for all of my clients.

Bill 1:05:19

Brilliant, brilliant, I'm curious. You, I'm not sure if you've looked into it yet. But I hear a lot of good words about collagen, especially collagen that comes from bone broths grass-fed animals, and as a result, the bones boiled for 12 to 18 hours to remove the collagen. I've heard that's really good for rebuilding or working towards rebuilding joints, even other tissues in the body, including hair, and cleaning everything. Have you ever looked into that at all? Do you know anything about that at this stage?

Clint Paddison 1:05:56

Yeah. So obviously I have discussions about that. hundreds of other similar

approaches to rebuilding gut health every day because I have a community support forum where I have nearly 300 people I talk about every day and all sorts of topics such as that we discuss all day every day as I work with people. Now, my take on that is that I never used bone broth. And I have almost 8000 clients, none of which, have used bone broth bio one that I can think of.

Clint Paddison 1:06:32

And my success rate is like no other of anyone in the world, including medical professionals, who can improve the quality of life of people with a natural. Yeah. And so my response is, well, I didn't, none of the people who have had amazing success in my program used it. And so I actually get very little feedback from it. And I just like the fact that it's not necessary. I just like that. I like that it's purely, you know, we're living off plants and we're not harming the planet and we're not harming animals and it feels good. Yeah.

Bill 1:07:14

Okay. Awesome. That's like I said, it's everyone's different and it's good to hear different opinions. And I'm sure the people listening and watching are going to really take a lot out of this interview if they want to connect to you. After they've watched this interview, how would they go about doing that?

Clint Paddison 1:07:33

So our website is Pettersen program.com. And my spelling is pa DD is o n PR o gra m.com. I have a free mailing list on there. So if people just want to get free information from me, I send out emails regularly, and I transcribe all my podcasts so that people can read or watch the video versions of them. I have In training via email, so the people can really have a great experience and learn a lot without having to spend a cent ever. If they want to buy my program, it's very affordable. And it's also available on that site. If people want to really just have it all put together in an easy-to-follow format, they could do that as well.

Bill 1:08:24

Awesome well, what I would encourage people to do who are listening or watching is if you know somebody with RA, definitely get him to have a look at this video. But then also get them to get in touch with you. And perhaps jump on the free mailing list, join a forum, exchange ideas, listen to what has helped other people. And maybe that could be a way forward for you to feel better than you felt maybe in a long time and relieve you of some of the pain and some of the stress

that comes with our re hopefully get you back to work.

Bill 1:08:59

You know and hopefully, Just make your life better. So I think that you're doing an amazing service to the community. And it's kind of interesting that we've got to go through some of our own sort of turmoil, pain, and heartache. But then we can offer a lot back. And the people who have recovered and are recovering from your program and other programs, do the same thing. Give back and let people know what you did, and how you got better. And maybe we can make a difference. And maybe we can influence doctors, specialists, and all that kind of stuff to listen and pay attention more to the evidence that is out there. The thousands of people that have recovered and are recovering, because that's evidence to the right claim.

Clint Paddison 1:09:46

I mean, that's it. That's social science, man, we're running it I'm hoping to do it. Well, I will be doing a documentary this year. So there's going to be all my archive video footage, I have a lot of video footage of me in agony and that's all going to be put together and combined. And we're running a documentary, we're going to be interviewing about a dozen or so of these people who I've mentioned, who've made tremendous recoveries.

Clint Paddison 1:10:09

We're going to be interviewing doctors from around the world who are experts in immunology and gut bacteria. And we're going to do a clinical trial and put people through this process because we want to, you know, I want to change the way the whole industry is running. It's a complete failure right now and I want the first thing that a rheumatologist says to a patient is what are you eating?

Clint Paddison 1:10:32

And how are you exercising based on those answers, develop a plan that's much more, you know, supportive to their future than just hitting them immediately with the hottest drug so hundred percent bill man it's been Finally we got a lot of work to do.

Bill 1:10:52

We have man thank you so much for your time I really appreciate you doing what you're doing and I really appreciate you being a part of the program.

Clint Paddison 1:10:59

Thanks for having me.

Intro 1:11:02

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