

Paige Figi - Episode 765

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cbd, seizures, charlotte, started, drug, colorado, people, hemp, talk, pharmaceutical, doctor, hospital, test, military, seizing, thc, years, kids, child, plant

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This episode is sponsored by a company I've used for well over a decade and that is 511. I wore their uniforms back in Anaheim, California and have used their products ever since. From their incredibly strong yet light footwear to their cut uniforms for both male and female responders, I found them hands down the best work were in all the departments that I've worked for. Outside of the fire service. I use their luggage for everything and I travel a lot and they are also now sponsoring the 7x team. As we embark around the world on the human performance project. We have Murph coming up in May, and again, I bought their plate carrier I ended up buying real ballistic plates rather than the fake weight plates. And that has been my ride or die through Murph the last few years as well. But one area I want to talk about that I haven't in previous sponsorship spots is their brick and mortar element. They were predominantly an online company up till more recently, but now they are approaching 100 stores all over the US. My local store is here in Gainesville, Florida, and I've been multiple times and the discounts you see online are applied also in the stores. So as I mentioned, 511 is offering you 15% of every purchase that you make. But I do want to say more often than not they have an even deeper discount, especially around holiday times. In fact, if you're listening to this in the months of April or May 511 days is coming up between May 9 and may 16, you will get 20% of all gear and apparel. And that applies both online and in store. But if you use the code shield 15 That's S H I E L D one five, you will get 15% off your order or in the stores every time you make a purchase. And if you want to hear more about 511, who they stand for and who works with them. Listen to Episode 580 of behind the shield podcast with 511 Regional Director will airs

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Welcome to the behind the shield podcast. As always, my name is James Geering. And this week, it is my absolute honor to welcome on the show, page Figgy. Now for any of you out there that recognize the term CBD, Paige and her daughter Charlotte are the origin story. So as you will hear in this incredible conversation at only a few months old Charlotte started developing seizures and was ultimately diagnosed with Dr. Ace syndrome. By four years old after trying a gamut of pharmaceuticals. Charlotte was on life support with only days to live. As a last ditch attempt. Paige had been exploring the world of plant medicine and found the cannabinoids in the hemp plant not only pulled her daughter from life support, but ultimately gave her nine years of healthy living. So we discuss a host of topics from Paige's own service in fire and water rescue the role of a military spouse, Charlottes diagnosis, and illness, how hemp not only helped Charlotte but 1000s of other children, debunking the myths around CBD, the

certification that can prove both efficacy and safety in workplace drug testing how this brand has ultimately been trusted by Major League Baseball and so much more. And before we get to this incredible conversation, as I say every week, please just take a moment go to whichever app you listen to this on, subscribe to the show, leave feedback and leave a rating. Every single five star rating truly does elevate this podcast therefore making it easier for others to find. And this is a free library of well over 750 episodes now. So all I ask in return is that you help share these incredible men or women's stories so I can get them to every single person on planet earth who needs to hear them. So with that being said, I introduce to you Paige Figi enjoy

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Paige I want to start by saying firstly I hope that you're okay after the snowstorm that you had yesterday and secondly, they welcome you on the behind the shield podcast. Thank you. Thanks James. Thanks for having me. I really appreciate you giving this a voice. So based on my last comment obviously you're not here in Florida where on planet earth are we finding you today? I'm in Colorado and yeah, we had another freak Spring Storm so all the plants start budding and then it's snow seven inches and and so the power goes out trees go down. But I'm in Colorado. I've lived here since I was 17 years old. For most of my life I've been here. Well I want to start at the very beginning. Obviously your daughter has been a very

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Powerful story within itself. But let's say your kind of origin story. So tell me where you were born. And tell me a little bit about your family dynamic what your parents did, and how many siblings? Sure, I'm from Connecticut. So I was born in Hartford, Connecticut, and I'm the youngest of three girls. And when I graduated high school, I really wanted to go out in the mountains to the mountains, and live out west and climb and experience that. So I went out to Fort Collins, Colorado, went to CSU, Colorado State, and I've just stayed out here I was a military wife for a while. So I floated around the country. But mainly I've been in Colorado most of my life, and it's very belong to where, you know, it's maybe not where I'm from, but it's where I belong. Now, what did your parents do?

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They were in various things, banking, finance, that sort of thing. So not at all what I'm, what I'm working on right now. And then what about the household that you grew up? When was there an element of a more holistic approach to wellness or diet at that point? No, not whatsoever, you know, conservative Connecticut, old fashioned traditional Western medicine. And I think that's what happens is you kind of pendulum back and forth, right, you either become your what your from your environment, or you pendulum back the other way. So I probably pendulum to this Western, Western State, kind of holistic, crunchy granola, Colorado thing. But I always was rooted and science and in tradition, and so that I think that pair of those two things together is where I ended up landing. And that's what worked for, for me to become an advocate for this topic we're going to discuss today. So you mentioned about climbing as you were when you were still in Connecticut, what was some of the sports and athletics that you're doing that? Right? So there's no, that wasn't rock climbing, or mountain climbing in Connecticut, I was I played field hockey, lacrosse, and I was planning I had a scholarship and I

was planning to go to college, for sports. And and that was that was not on my mother's plan. She said you can't play sports in college, you have to go for academics. And that's when I applied to this one, one off school Way Out West thinking, you know, just let's just see what happens. And when I got accepted into CSU, I just said, Yeah, that's what I'm going to do. If I can play sports, I'll just go out west and, and that's what I'm gonna do. And so I actually came out here and started some of the sports teams like as clubs at the college. So I still was playing lacrosse and field hockey, and climbing and doing all these new sort of independent sports. Now, what about career aspirations? You get in there because of the love of sport? What are you hoping to do, as that progresses through, I was Sports Med, I was an exercise physiology major thinking I was gonna go into physical therapy. And then I was thinking maybe I'll go on to med school, I didn't want to be a professional student. But I was really involved. I was really curious about the science and, and the physical body and sports definitely all rooted in, and physiology and sports medicine. So you know, I just I still am and I think it's, I think the whole, that whole genre is really fascinating and very important. So you talk about it as if it's past tense. So did you actually get to that point, or did something kind of make you deviate? No, I, I fell in love and moved up into the mountains, and really just spent a lot of time climbing. I'm glad I'm glad I didn't go down that path. Because I you know, I just, I don't know, and I'm raising my kids in a in a sort of a different way because of that. And I, I would have been in debt, like major six figure debt, and I probably wouldn't have used it because it would have been, I would have been working in what rehab with knee surgeries and that sort of thing. It wasn't going to be what I really saw myself doing like heavy in the sports and the professional sports world would be what I wanted working with young athletes, it would have been old rehab, you know, just kind of like that SLOG and when you talk to people it's kind of it's a burnout job right? It's I think back in the 90s when I graduated high school it was you know you're looking at I remember these people would come in to the to the school and coach you and advise you on what what subject what thing you should pursue in college and it was like what are the top three paying college majors and I remember PT physical therapy was up there actuarial scientist and you know, with the least amount of school for the most amount of money and that really wasn't that doesn't interest me that wasn't why I was going into it but that you know, you just have to pick something so I was volunteering in that space since I think I was 11 You know, cherry striping and hospital burn units and, and I think I burned myself out a little too soon. So I dropped out of college, moved up to the National Park in Estes Park, Colorado, and just started businesses and and was living in the mountains as backcountry skiing. I was climbing mountains and just kind of live in the dream really. The first relationship that wasn't Charlotte's father or that was so



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Yeah, Charlotte's father was my first relationship. And it's a funny story. So he ended up going into the military. So that's where I was a special forces wife.



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But, but yeah, we he was he was the father of my three kids. Okay, so let's kind of explore the the military marriage dynamic for a moment then. So a lot of people on the show, obviously a lot of operators themselves and some of the spouses as well, as you've come from, you know, as you said, kind of



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safe suburban Connecticut. And then now you find yourself in this military family with this dynamic. What was your experience within that the pros and the cons? Well, even before military before he joined the army, we were both we were both in a fire department and a volunteer fire department in Estes Park, because it's only it was only volunteer back then. And we were divers, I was a rescue diver on a volunteer fire department. But um, I think they went to a paid situation, it was just so busy, there's a lot of water and rivers, that sort of thing. So that's how I like dip my toe in this in this arena. And then he joined the military late in life, he was actually



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probably one of the older guys that went Special Forces, I don't know, the the record. And, you know, we don't I hate superlatives. But I think he might have been one of the oldest guys that that went through special forces and, and made it you know, he went through selection and all that stuff, but But you know, it wasn't that outrageous, we were just, I don't know, we're like, independent kind of go getters starting businesses and, and like mountain people, you know, but but it was really fun. It was really gratified fun work to be on the on the fire department for a couple years there. And like tough work. And a lot of the stuff wasn't wasn't rescue wasn't dive rescue at all, it was just recovery, like body recovery. And, and you might I remember thinking, you know, at the time, like what this is this necessary, this is a lot of time a lot of training, you know, an intensive, equipment intensive sport, which is everything I did was some equipment intensive sport. And it was, you know, it was really gratifying to see that the families that needed closure, after they had a death or drowning. And it was really important to them, I think I can't imagine not having, you know, to be able to see your child or your loved one after they die, and just, they're just out there somewhere. So we were doing a lot of body recovery. And it was, I've heard from the families it was really meaningful. So even at times when you feel like what am I doing? Is this even matters? Is this even changing? Anything? It? It absolutely does? Or what are one or two stories that you kind of would consider a career call in the time in first response. I think



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one of the stories was a young kid, so they were on vacation, he slipped off a rock and went under instantly. And it was a really, it was really learning for everyone there we learned a lot and what not to do. And and it was just it was really tragic. It was just a young kid who was right there within arm's length of his dad, his dad was I believe, I think he was he was like FBI, he was in that sort of, you know, realm of work. And it was just tragic. It was just really tragic to see, I think one of the worst things that can happen is the loss of a child. And and yeah, I just, I just think that was life changing for me like this is absolutely a valuable thing. It's understaffed. It's a burnout job, doing it for free. And it's it's time consuming. It's expensive. All we did was Train, train, train. And, and so that that one call really made me value and realize this is an important thing and that service mindset that a lot of people don't have, like, what's it worth to me? Or is it worth my time, that service mindset really, it paid off, and I never really left that, you know, that arena and I really got it, I got the whole service thing. And I've spent my life since then, really just trying to serve and help other people with no recognition, you know, looking for kudos or a pat on the back or money. You're just doing it because it's meaningful.



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Now from the Mental Health stone standpoint, you know, you have these traumatic calls, and then you transition out what was your own personal perspective of that.



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That's interesting. So I



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I was actually I mean, who knows, we all think we're fine. I was fine. After that call. I think I had a healthy understanding. I talked to the parents and I, you know, from a mother's perspective, it was difficult but I remember the fire department who was involved not even just the dive team, but the whole fire department went through therapy. They went through counseling, and they were a train wreck. You know, these big tough guys who've gotten calls multiple times a day. Were just absolutely devastated over this particular college. Remember, it was a it was a tough one. And it was it was kind of like it was eye opening for me you know, because in that goes to get the stigma with a firefighters is like you got to be tough.



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Have, you're not any tougher than any average person, we're all just human beings, right? We just you just have to stomach a lot more. And so I saw that like that we're all human. It's okay. In fact, it was required that they had counseling. And so that was very interesting to me. That whole tough guy thing is,



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I don't know, I think it can be dangerous. Yeah, it's something I talk about a lot. There's there's masculinity, which I consider the yin and the yang, because anyone who became, for example, a police officer, or a firefighter, remember the military, if you look deep in their heart, there's the service of selflessness, there's compassion, there's kindness for most of us. And then you get into this profession, all of a sudden, you're painted as this two dimensional, I'm using air quotes, hero, none of us would call ourselves that. And it does, it redefines the way that you're you think you're supposed to act and we disregard that very soft, you know, almost feminine quality that brings your men and women into this profession in the first place. So I think we're finally now getting, you know, alpha males just to totally caricature coming out saying, No, you know, I, this is my struggle. This is, you know, this is me crying, this is whatever, because, with so many of us are raised on this kind of, you know, Hollywood John Wayne bullshit, instead of what a man or a woman actually is, which is, you know, you've you're in your dive gear, and under the water, you're trying to find that child, you're not thinking about rain, you know, unicorns and kittens at that moment. But you also have to give yourself and other people compassion to process that cool laughter as well. That's probably why I fared so well, because I'm a female. You know, I'm a tough, I'm a tough female, but I'm a female. So I'm allowed a

different leeway. Right, like, to your point. And so it's probably I've never really thought about that. It's probably why I'm not tougher than any of these guys, who are, there's no, it's not a competition. But I probably was, was allowed more.

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I don't know, to process a lot more motion to process that or something. And, and I didn't have to put up that wall that's very detrimental to healing. And so that's interesting. I never really thought about it like that. But there was a lot of calls. But that was one that was one that was like, ah, it opened my eye like, we'll have to all be tough. We'll deal with it later, and just do the work. And we'll handle it later. And we should expect there to be something to handle. Absolutely. Well, you talked about doing that for a couple years. So what came after that. So then my husband joined the army, and we moved to Georgia, Fort Benning. And then we moved to Fort Bragg. And my son was born in North Carolina at Fort Bragg. And that was our first child max. And so we left Colorado with the hopes that we get stationed back here. But just like, who knows what's gonna happen next, threw it up in the air needed to change and I was just in that supporting role in a new mother in that supporting role. But we weren't young, we weren't young parents, we had like a whole sort of marriage and lifetime and relationship together. And we decided later in our in our life to have kids. So anyways, it was like, I felt more mature. I don't know, I can't even imagine having a child in my teens, or early 20s, I had a whole I had this great, whole interesting life before I had kids, and I'm really grateful for that. I'm not saying there's one right way. But for me, that wouldn't have worked if I had, if I had not, you know, dip my toe in the life experiences before I had children because my children, at least, that was a whole, you know, very intensive situation with my daughter, with my twins. And so I would have missed out on certain things. And I think there's, you know, you have regrets or you have, you know, I don't know, I would have questioned having I'm really young, so I'm really thankful that I got to have this whole these whole experiences beforehand. And I think it prepared me for what was to come. Now, did your husband deploy overseas? Yeah, he did. He went to Iraq. And then when he got out of the military, he got out when my after my twin girls were born soon after Maxwell he, he had to decide to get out because we were the hospital so much, we'll get into that I'm getting ahead of it. But he ended up working as a contractor for the majority of his life. After the army, he actually worked overseas, he was deployed much much more frequently out of the Army as a military contractor. So how did you deal with the dynamic of him being overseas and then talk to me also about the transition back that can be jarring sometimes for the dynamic you know, the the husband or the wife has been home you know, almost like a single parent for a long time. You know, the other person comes back into the life and sometimes that can be heads knocking or sometimes it can be more fluid depending on that relationship. Yeah, it's interesting you say that that's not usually what people talk about. But yeah, I'm pretty independent woman, and I'm fine a loner, I'm independent. I had a habit, you know, had everything under control. But yeah,

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Having them come back, I think my main focus was just just facilitating their relationship because like, every time they come back, they have to kind of meet their kids again. And they're a different age, you have to start over. And so just really making sure there was a healthy, healthy time healthy platform, making sure they had, they had a, you know, a great relationship, because that's tough on kids too. And so instead of focusing on that, this is hard

for your victim and you poor, you poor kids, just this is our normal life. This is how it is and, and your dad's doing this great thing for the country and just just kind of support I was like in a supporting role. And but yeah, you're right. It's tough. It's tough when they come back, because you have everything that you want it right. I had I cook how I want it, we have a schedule, how we want it, and it throws a weird wrench in there. So I just really tried to focus on like a path, a positive path forward. So you mentioned the twins. So first, you have you know, the first child, and then you have two little babies. So talk to me about that birth, and then, you know, the first couple of years. So yeah, so we Max was born in North Carolina, we he got assigned to Colorado to 10th group. So we were like, we pulled some strings for that. And we went and got sent back to Colorado, which was awesome, because that's where we wanted to be, I didn't want to be in Kentucky, you know, and his base is the Middle East. So you know, it's gonna be like a heavy deployment rotation at war at a time of war. And so we got to Colorado, it was North Africa and Europe, and was his was his area. And, and then I had the twins. I had twin girls soon after we moved back to Colorado, and we lived in a different city. So while I had lived in Colorado since I was 17, I didn't know anybody in Colorado Springs. So I was like a brand new mother with a kid pregnant with twins, and had no network, no family, no social network. And again, like I'm a loner, it's fine. I figured it out. And I started joining these groups, we started moms groups. And we started to you know, gather people because you start to realize it's kind of like the military wife thing is kind of lonely. And then and then just really immersing myself in the town because I knew the kids were going to need I was I was planning on homeschooling my kids, and that's what I did.



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But I knew they were going to need like a social network. So I really started to plug in while he deployed and get ready for the twins birth. So as far as health wise, talk to me about Charlotte as an infant. And then you know what changed as she started progressing through the months? Yeah, so everything was healthy pregnancy, they were born on their due date, twin girls, everything was awesome. And it was like the longest my this doctor ever let twins go. And everything was fine for three months, just a normal, healthy, incredibly chaotic time. And at three months old, I was hosting this mom group at my house for people who were their children were like we've made baby carriers and worm because with twins, if you're breastfeeding, you know you can't do you need your arms free. So we were tied, tie a baby on my back like I'm living in India, right. And I'm dealing one on the front. I have my son and I'm cooking and I'm my husband's deployed. And it was chaotic. So I threw this these parties. And we were people were coming over and it was like, five minutes before this, this brunch. And I'm upstairs Matt. My husband Matt is changing. Charlotte getting her ready getting her dressed. And he just yells up and again, like we were both first responders. So we like there's a sound that tone of someone's voice when you know something isn't right. And he just shouted up. Something's wrong. Something's wrong. Come down here. So he actually he ran her upstairs to me. And this little three month old baby and later on the bed and she's having a seizure. So she's blue. She had been seizing for a couple minutes the seat we call 911 We're dealing with that we're doing first first aid. She seized for 30 minutes. So a 30 minute long tonic clonic they're called, you know these to be called grandma seizures. So she's unconscious. She's, she's convulsing, she's not breathing. And we have 911 but I just remember feeling like slow motion very calm. sort of took the emotion like took myself as her mother out of the situation. And you know, you just go into that. That training mode where you're like, Okay, this we just got to deal with this. She might die so it's like she's died. It's just look like she was dead other than she was convulsing, and it was very long. You in the movies, seizures are not typically with children of babies 30 minutes long. That is very unusual. She didn't have a fever. It wasn't a febrile seizure.



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So the ambulance got there. We went to the hospital and they do the million dollar workup. I call it they do all the tests. They do the MRI they do everything scans, nothing. They don't find it. I was praying that they would find a mass or a tumor. You know, okay, surgery. She has a brain tumor. We'll do surgery because she wasn't sick. There's nothing



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wrong with her. And so they couldn't find anything. And we went home the next day and then she started seizing once a week. So she started having these seizures once a week, I remember the ones they were all 30 minutes, or longer or the longest was four and a half hours. And so when when you're seizing for that long, you're not breathing properly. So you're on life support, you're every one of these seizures is a, you know, rushing her to the hospital, they don't know what to do, they never say anything like and when you start to see the, you know, that the 911, the paramedics and the ICU staff, it's kind of panicking, you know, that this is not normal, you know, I'm a new mother. So I don't know, like, kids sees, right, this can't be this, isn't that abnormal? They're like, No, this is, this is probably, you know, brace yourself, this is probably going to be something major this is this is not normal. And so of course, I start doing research and digging online and not research. I'm not a scientist, but you know, I start digging around for information. And there's no type of pediatric epilepsy where status seizures that just seizure longer than 20 minutes, is the is the is the normal, you know, is the is the presenting thing. So it was like, there's a mysterious, you know, mysterious illness with note with nothing on her scans. So we had no idea so she started seizing more frequently, then she started having them every day. And then she started having them every hour. And so she was at that point, losing all of her skills, she you know, that little that she had, she's a newborn baby, she really started to, to fall behind, right. And so I have her twin sister, they're fraternal twins are not identical. So Chase is neurotypical sharing, she's progressing. And Charlotte just starts kind of falling behind on those on those goal posts, you know, they're supposed to be walking at this age is supposed to be talking and, and so it was kind of like he's causing brain damage. And her now her scans are looking like she has brain damage at this point. But still, we have no answers. And we didn't really, I think she was two and a half years old, when we finally did this genetic testing, I did fly her to Chicago to the specialist, and we did blood tests and, and they found the source of her seizure disorder, which I already knew what it was because I had been, you know, Googling, don't ever Google your medical condition. They say, right, but in this case, that it was actually helpful. So we got the results, and it was drove a syndrome. So Gervais syndrome is was relatively new. In fact, Charlotte drove a the name of the doctor was named after was still alive in practicing in France. So that's how new this this disease was extremely rare.



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It was life limiting, so she's not gonna survive it. And it's untreatable, there's no no medical treatment, there's no pharmaceutical treatment for it. So I was like, you know, the doctors, like you should sit down everyone get everyone on the phone, we're gonna tell you this. I'm like, It's okay. I already know, this is what it is. I'm a practical person. And, and so it was, it was actually

like a relief to have an answer as devastate like, it's a word. It's the world's worst kind of epilepsy. And it was kind of, you know, in my mind, as odd as it may sound, it was relieving to have something because I think being in limbo was worse to not know what the hell was going on.

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So what me through the four years, what she endured from pharmacologically, you know, procedure wise, and then also there's talk about the cost. I mean, there must have been an immense cost to that as well. Right. So, remember, my husband had he had gotten out of the military? And this was devastatingly right when the real estate thing right before the real estate crash, right? The economy collapsed in 2008. He had just gotten out. And the reason he got out is we were just in the hospital too much. He's like, I really think I need to be here. I don't know how you're gonna do this. I'm in the hospital. She's tied to the bed on a on a ventilator. Right. I have a twin tied on my back and a baby carrier and my son's rifling through the medical waste. And I'm trying to, you know, keep it lively, and my husband's deployed and I'm trying to keep everyone spirits up. I'm trying to homeschool my son. And and, and deal with this. It was just incredibly difficult, and I'm not much of a complainer, but my husband was, you know, I'm tough. I'm like, We're fine. We're fine. We got this just, it's okay. Because stressing someone out who's overseas, and his incredibly difficult job that he couldn't talk about, I couldn't know where he was. And then whenever he got a satellite phone to call, you just hear like air raid sirens, they're getting shot out. They're getting shelled, so gotta go. So it was like this just really stressful, sort of situation, but he decided to get out. And then the market collapsed. And so we had no insurance at that point because he couldn't get a job. And so it was we lost our TRICARE, our insurance. And so yeah, every I

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I don't remember I remember adding this up but every 911 trip, not even flight for life, but just every ambulance ride was was just astronomically expensive and, and bankruptcy, we had to file bankruptcy was like, it was like whatever I don't that wasn't even the factor. It was like we just dealt, I'll pay it later, I'll pay it all back later, we just we have to keep this kid we have to try everything we can and, and go down this line, but it was like, everything went wrong all at the same time and financially and it was very difficult on our marriage. I mean, it was just difficult. And, and yeah, so that was that was, that was a tough time. And that's why he went he ended up going back overseas and working as a contractor because that was the job like, what kind of experience do you have? After you know, a couple years and Special Forces who's gonna hire you after your military experience tensive incredible military experience. It's not really a hireable thing, unfortunately, oddly, and so that's why they go get hired by Blackwater and all these companies. So that's what he did. And he was, like I said he was deployed more after when he was out of the military than while he was in?

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Well, I mean, the reason I asked that is I've had many, many conversations, I come from a country where, yes, the taxes are higher. But if something like this happens, you're not, you know, the first thing you don't ask for when you walk into a hospital as a social security

number, you're asked what's wrong with your child, and then you're, you're helped. And so you know, we're gonna get into, obviously, the prevention side and the holistic side as well. But this is what's so nauseating about profit based healthcare system, is you've got these people that have been diagnosed with cancer that just been hit by a bus, you know, just have Gervais syndrome, whatever it is. And the last thing you need to be worried about is can we pay for this? You know, so I think it's an important thing that underlying, as you mentioned, in bankruptcy, and about the worst financial crisis, you can have layered on top of all these other things from a husband and wife who have served this country in a number of ways already.



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Yeah, and isn't that I'm correct me if I'm wrong, but the number one cause of bankruptcy is medical bills probably are, it's one or two. It's got to be close. And that was certainly our case. But yeah, the drugs to treat this untreatable epilepsy are very expensive. And hospital trips are very not you know, ambulance trips are very expensive. So I started to, I started to just drive her myself in the car, and you can't put a seizing person recumbent in a car seat, and drive 20 minutes to the hospital, because they're now aspirating. They're lit, they're leaning back. And it's the worst thing to do. So that's all that's all I had to do, I would just drive on myself because it became so expensive to deal with. So talk to me about the kind of pharmacological journey and the the benefits or lack thereof of these chemicals that you were being given or she was being given. So the pharmacy, the pharmaceutical options for pediatric epilepsy, at that time, and mostly still are all used off label. They're not drugs for epilepsy, they haven't been studied for and never been studied on a child for the use of epilepsy. They're off label. So they were created for another disease state, and never been tested on children. And every doctor we had, we had many, many different neurologists and epileptologist. They all admitted on like, unfortunately, the brain study of the brain is witchcraft. We really have no idea we don't understand it, we have no idea how it works, not physiologically, not even emotionally, and we were ill equipped to treat this disease that we're told is untreatable, but we have to try. So the drugs are like, like Beano. barbitol, I think at the time was like the oldest seizure drug used, which isn't really reassuring, you know, you want to go into the hospital. I remember her first doctor, he's such a nice guy. And I fired him. After one visit, he was really, really nice, but I wanted like a killer. You know, I wanted someone to like, get the hell out of my way. I got this. And I remember going into the sky and saying, Okay, finally, we've been to the hospital a ton, we finally have a doctor doctor. And, and he said, Okay, sit down. Here are the three, you know, 123 drugs lined him up. And which one do you want to try? And I'm like, What the hell do you mean? What do you tell me? What, what? What's going to treat that status seizures every day, every hour. There's not a drug for this. He's like, Well, you get to pick. He's like, this one's the oldest drug with the most information. This one has the least amount of medical side effects. And this one has the most medical side effects, but the least psychological emotional side effects so I picked the one with the least right in the middle with the least amount of side effects thinking medical side effects thinking. This one seems the safest, but what I didn't realize is that had the most



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had it totally destroyed her personality so she's no longer



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She's like, they call it's Keppra was the drug. And it's, they call it cap rage. And so they're just not even themselves anymore. There, she would rip off her, her fingernails till they were pouring blood and her toenails, she was just angry and uncomfortable. But she had no medical side effects. It didn't work her seizures remained. But we had to deal with all those, all those side effects, which then we had to treat the side effects, which looked like autism. With other drugs that weren't for were use off label. So you just end up in this cascade of a bit of a shitshow, you know, of, of stuff. And each thing has its own side effects. And we're talking about a baby an infant, so I don't even really know her. And I don't know what her personality is, and the doctors are like, well, babies cry and babies, you know, sometimes they don't eat, and sometimes they miss their, their milestones. So you're just being an irrational parent, you know, but I mean, I knew were enough to know, one day, she was Charlotte. And the next day she was, you know, Rosemary's Baby. And it was like day and night. And so we kill that drug and I try another drug. And each one had a had a slew like I try this drug and her seizures would increase just rapidly increase another drug, she started having a seizure, where she just completely turned blue, stop breathing, and I'd have to do CPR.

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Well, you know, the only time I took an ambulance is when I'm when I'm doing chest compressions on her.

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This drug she stopped eating, so we had to get a surgical feeding tube, this drug, she completely stopped sleeping. But most of those side effects are like,

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poo poed by the doctor, because they don't have to they send you home with this drug, check that box, but they don't have to deal with what this looks like for you at home. And it was it was

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it was eye opening, it's very eye opening to see okay, no one has a clue. Like you're asking me to pick what to give her you haven't. There's no one has a clue. So from day one of her first doctor visit, I realized, I'm going to have to, I'm going to have to be her advocate. You can't sit back. Even without insurance, it can't just sit back and trust Western medicine, you have to do some digging, which I think that it throws a wrench in the in the doctors, you know cog because they just want to do it for you. They don't want to deal with a difficult parent who wants to get involved. But obviously, this isn't working. So I really at that point, at the first doctor's visit appointment, I realized I really had to get involved if I wanted to help my kid.

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Well, I mean, as a paramedic, I saw over and over again, some of the drugs that you mentioned, you know, patients that were just



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taking everything that they were told, you know, I watched some of these people, you know, we ran on for years, so I watched their personality change, and then we'll get into it. But some people like, you know, new and ran on they transition to a holistic alternative. And then we hardly ever saw him. But what was really maddening is people would say they will see a pseudo seizures. And the fact that you will flop around in you know, on 120 degree asphalt in the middle of the Florida Sun, for attention, you know, was was disgusting. But this is the problem. I think they're all you need to take your meds, you're not complying with your meds, yeah, or maybe their shit, maybe they just don't work. And as you said, especially when you start reverse engineering and learning the origin story of this and the lack of efficacy. And then as you said, it's not even being used the way it's prescribed or meant to be used. Now you are far from north, you know, your way out left field and, and to say, oh, no, you still need a trust, like I think that's completely deviating from that do no harm, you know, the vow that we make to do the best for the patient. And that could be with words, it could be with alternative treatments, or it could be with some of the incredible meds that do work. But I find those are normally in emergency medicine in anesthesia, you know, in some of these areas were absolutely hands down, that's a great medication. But when it comes to treating chronic disease over and over and over again, if you look at the prevention side, and you look into, you know, ancient wisdom, like the, the the medicine that's been around for a long time traditional medicine in its true form, not what we call traditional medicine. You know, that's where we have to let the egos in medicine go and start looking for other places. Because if we keep fooling ourselves that these, for example, seizure meds are working, or that your hypertension matter, your cholesterol meds is going to make you live longer. That's smoke and mirrors. That's not that's a bandaid. Yeah, and like you said, we're treating these things we're not curing them you're gonna get paid to and I don't want to start a whole conspiracy conversation because I do think there's good doctors and good side



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My aunt is looking for solutions, but it is one of those careers that they're not going to have me as a customer if they fix my problem. But, but yeah, it was it was, it was really outrageous to, to really, we had never had medical, I had never had medical problems in my life. I didn't even have a doctor, we were very healthy. And so it's my first foray into into medicine. You know, and I think what is I read some quote, It was like, you don't really you don't have real problems until you have health problems. And it's like, you know, you might think you've got real real problems, financial problems or marriage problems, but until you have a health problem and and maybe even until it's your kid that's suffering, having health problem, like a major medical life or death, daily life or death, daily health problem, you really don't have any other problems. Like it's hard for me to listen to people's problems because I've you know, stomach, so I lost a bit of empathy was chipped away over the years watching my kid, you know, suffering, just physically suffering. And, and so yeah, so I get it, but I don't want to get to conspiracy about the about Western medicine, but I'm with you on all of that. I just, I just,



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I just don't want to think the worst of people, you know, and I do I just all I'm doing is forging ahead and finding other solutions. If I don't like this, instead of sitting around complaining about it, I'm going to find another solution. Absolutely. I think that's the thing. It's not conspiracy, it's just when you have a system built on profit, there's clearly a pull towards disease. If you have a system, for example, some of these countries where they have health care, there's a desire to make people as healthy as possible. So you don't drain the taxpayers money. You know what I mean? So I think it's not so much a conspiracy, but some people absolutely make a huge amount of money off the disease in the US, for example. So I don't think that's a conspiracy. I think that's just a truth that's been pushed down that we need to pull out into the daylight. And until we I don't know how to solve this. But until we solve that litigious nature of this country, that's the system we have. And if you don't go through this rigid, 10 year, phase three trial, you're going to be sued, because it could possibly be dangerous, and someone's going to abuse the system. And that's why we have so many lawyers in this country. And doctors are afraid of lawsuits, and they're bound by those contracts, working for that hospital, to cover their ass, and not really be able to pivot and be innovative, because that's, that's the nature of our country. I don't know how to solve that. But I know that there's other solutions, and sometimes they come from nature. And that's not unheard of. And there's ways to sort this out.

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So she starts seizing as an infant. Now she's four years old, talk to me about where she is as far as palliative care. And then let's walk through Israel and your journey into plant medicine. At four years old, Charlotte was had reached the end of her life, she had reached the end of her pharmaceutical options. We had tried every drug multiple times. And because I had to prove that it sure didn't work. And most of those were using a cocktail of multiple meds so who knows what's doing what and your liver getting metabolize. So I went through multiple trials of these drugs. I don't remember we were over a dozen we were probably at 1818 meds we had tried. And we were told there's nothing left to do at that point. She's seizing every half hour. Remember her seizures are about a half an hour long. And so she's just seizing 24 hours a day we put her in hospice, we signed a do not resuscitate and brought her home. And so she was at home hospice. My living room was a medical unit. She was on an oxygen. She was unconscious, she couldn't swallow. She couldn't. She had a feeding tube. And I just fed and watered her, gave her air and kept her body alive and just watched her cease. And she'd have like two minutes, five minutes an hour of postdoctoral recovery where she just wasn't seizing, but she's posting photos. So she's not, you know, you she had no, no emotion, no feeling no nothing. And, and then the next seizure would start again. And, and so you know, it was like, Okay, I guess that's it, but I'm a mom. And I'm like, there's gotta be something we haven't tried. I mean, we were already trying things out of the box. We were trying diets. I know. I know, the ketogenic diets like a fad thing. It's been a thing and it's a working diet for reasons for fitness or weight loss, but at the time, and the way we were using on Charlotte was it was a high medical situation. And it actually was, I would say one of the worst. It worked. It did help some of our seizures before it stopped working, but it caused the most medical side effects. So she had the bones of a 99 year old woman she had osteopenia, and

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she, you know, I practice walking with her whenever I could. When I would do physical therapy

with her while she was unconscious, we would her femur would break. And she was weak. She had her we had weakened her bones. So it was like, you know, these things are not benign. So I know everyone's on keto, but you have to be careful. We are in a very, very high ratio, keto, a medical keto, but, but I mean, everything has this has its side effects. But we have we're trying all kinds of stuff. So it wasn't outrageous to me to to try the next this next thing that I tried, and I was, um, I wasn't really hopeful that I would find something to help Charlotte. So when I, when I started down this, this row that we're going to talk about, it really wasn't for Charlotte. She wasn't going to live long enough to see the benefit of the things I was going to do research on. But I figured there's got to be some other kids like her that might benefit from from this work I'm doing and I was really diligent. And I was very, I categorize everything I charted everything I did. And then I shared all of these things. And for every different therapy over all these four years, I shared all that with everyone. So this was no different. It wasn't like outrageous. What was outrageous was the source of the next, this next treatment. So I was reading from researchers in Israel. So they're they breed rodents to be born with epilepsy. And that's what they test drugs on in the phase two parts of these trials. They were they were using. They were using lab rats, and they said they had found what was likely the next 10 or 20 years was like the next anti epilepsy drug. And it came from cannabidiol, which is an extract from the hemp plant. So it's a non toxic eating, we call it CBD, but it wasn't called them back then. And so I thought, huh, I live in Colorado at the time in 2010. This is a medical marijuana state. Like I could probably find some some hemp and if I can't, I could build a laboratory to extract this. So I was I hired some translators, we called Israel I talked to these researchers. And I wrote down all their data that they had been amassing on the rodents, they shared it with me, there were people in France and Brazil, also that were doing similar and seeing similar things a very powerful anti convulsant. Then it worked. It just had never been tried in humans, and it wasn't legal. Just schedule one substance in 2010. And I thought, Well, I'm here in Colorado, I'm going to call I'm gonna call everybody I can to find someone who can make this for me, or who has this for me. No one had even heard of it. So I was calling 1000s of people. And most of these people today still know me. 13 years later, they remember that call. And they remember hearing Charlotte's seizure cut her seizures were loud, like you're screaming, she's not screaming, it's just the air being compressed. But they remember hearing this this horrible, horrible, haunting sound and like, Who is this person calling me this is a child, I'm not gonna get involved with this, a kid's never done this before. And I'm not giving marijuana to a kid, then like, well, it's not marijuana, I have a clinical trial that I wrote for her for a human. And this is exactly what I'm looking for. I don't have \$15 million to open a laboratory and, and an extraction. You know, process I don't have I don't even have a plant to extract this from. So I called 1000s of people. I said, just before you hang up on me, just give me five phone numbers. And I'm going to call those people. And that's what I did. And I called every single person. And one of those people I called and most of them thought this was outrageous is very fringe back then. One of those people showed up on my doorstep and knew what I was talking about. He knew what cannabidiol was, he knew how to pronounce it. He and he had the solution for me. And he just came over one night I shared my data. And he shared what he was doing. And that was Joel Stanley, one of the Stanley brothers there seven Stanley brothers. So they all have a name starting with Jay, at the time they were running a medical marijuana business for started with their uncle who had cancer and they were just giving free cannabis away to cancer patients. And Joel was messing around in this in this like a pharmaceutical grade greenhouse and laboratory was messing around like if you can get THC, this high in a plant. What else is in the plant, maybe there's other stuff that we can study. So he was breeding plants to be high and cannabidiol CBD and other things. And he had the exact ratio plant that I was looking for, that no one had heard of had never been done and it didn't exist. And so I'm thinking I gotta I gotta talk this guy into helping me because this is like here, hold. Hold Charlotte for a second.

I'm gonna go show you what I'm looking for. And you know, sighs first seizure. He met Charlotte and he was probably terrified because, you know, we're all under the threat of getting arrested for this.



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Pediatrics was written into the medical miracle



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A law in epilepsy was written, they had the foresight to do that. But no one had used this in a pediatric epilepsy situation. So I had the Attorney General's on the phone ahead or epileptologist, multiple around the country, Governor, I had all these people on phone calls, telling them what I'm doing, this is what I'm going to try. It's a non intoxicating, because the THC is low enough to be less than point 3%. It's low enough to be considered hemp. We're making apple juice in a pharmaceutical grade greenhouse from growing apple trees and trying to make this benign apple juice, right. It was like this expensive, tedious, ridiculous situation. But they said, Finally, after a long time of convincing, they said, Yes, we'll allow you to do it. CPS Child Protective Services, law enforcement was involved. And I was under the threat of having my kid removed from my home, like who's going to raise this kid, like, who's going to medic, like, who's gonna take care of this kid, she needs a doctor full time. 24/7. So I was concerned. But I also was like, they're not gonna take her out of this house not doing anything wrong. I felt like I was in the right I wasn't within the law. It was just sort of it was just outrageous to them. Because it hadn't been done before. That's all.



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So let's kind of reverse engineer that a little bit. Now knowing what you know, because I've talked about, for example, drug prohibition, which is not even what we're talking about. We're talking about hemp. But even when you reverse engineer drug prohibition, you realize that it was it was really founded on job justification and racism and some really negative things and never really for the benefit the country and eight years later here we have a border with murderers and gangs on the streets. So clearly an epic failure, but that's an entire other conversation. Talk to me about hemp specifically, what was it doing positively and then what change in the law that took it from a benign plant to a schedule one drug that a mother could almost be arrested and have a child taken away for having? Well, I at that point, I hadn't even given it to her yet. So I'm fighting this fight. I don't even know why I've just I've been called relentless. Maybe it's just because I'm relentless. belligerent, I don't know. I just was like, if I start down this path, and I feel like it's the right thing, and the data lines up, I'm gonna continue down is going to help somebody. I hadn't even tried it on her. I don't even know why I was going through these hoops. Because, one, it wasn't going to work. This is like, tree bark extract, like essence of lavender. Like this isn't gonna do anything this kids on like the heavy heartstopping benzodiazepine, like, she's not gonna work. But how interesting and let's check it out. But I don't even know why I didn't have to go down this road. I don't even know why I think it's just, I don't know, I think I'm just relentless, like, right like, obnoxiously relentless.



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we formulated this oil, and, and to the exact specifications for my clinical trial that I wrote, right, put it in her port in her stomach, and she stopped seizing. So she didn't have a seizure for seven days after her first dose, not a single seizure. And that's, that's 50 seizures a day. That was 350 seizures a week, on average, that she didn't have. And so it did it ended up working on her and stop her seizures. Again, I didn't think it would work. And I certainly didn't think she would live to see that first dose. She probably had a couple of weeks left to live at that point in her life.



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So so what happened was, yes, I'm giving my kid now a working fair, it's obviously working. Nothing had touched her seizures in her life.



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Now I'm giving her a schedule one substance, so I can't leave the state of Colorado. I can't I can't get this across state lines. I can't study this. I cannot study this because it's a schedule one drug. And so what do we do? Like what do I do next? What do I do next? And what we decided to do was to tell the story with a doctor and we chose Dr. Sanjay Gupta. With CNN, it took me 18 months to turn down all this all these like weed stories, all these pot, mom, sensationalist media stories because I wasn't going to let them fuck this up and tell it wrong. And so I want so Sanjay is a neurosurgeon. And he agreed to tell the story. I was very nervous because he was anti cannabis publicly, but he's like, I'll check it out. So he flew out here. He met us and he, they filmed it and, and he literally we had to turn the cameras off. So he could cry. He has daughters. And he just sat there and was crying like, Oh my God, let me I shared everything with him. He got to see this kid running. She's running



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seeing and talking and eating and living a normal life and not seizing, from what it was before. And he got to just see the whole I tried to just package the whole thing and show him. I'm not crazy. This is what has happened. And now there's about 1000 Other Charlotte's that have come here for this. And, and so he changed his mind. That's when Sanjay Gupta changed his mind on weed. And he saw the whole thing and we're really good friends and he's filming nine of these documentaries. So back up. What happened when we told that CNN, it's just called weed weed. One was the first one.



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People pack their cars it was like a Sunday night primetime was when it dropped is when it aired, people saw it pack the car I had never seen a child sees on on television on national television. They said that that that looks like my kid. We have no treatment. I'm going to Colorado and had to decide do I stay in Texas? Do I pass a law in Texas? Do I break the law, go to Colorado get it go back to Texas, they didn't have a lot of choices. But it was illegal to cross state lines. And it didn't exist anywhere else. But here in Colorado, this magical, ridiculously

simple hemp treatment. So they moved here and they had to get residency in most of those families. Many of those families lived in my house, it was like a hotel. And I would just give them 48 hours tops. Help them get on their feet, give them a place to live and say there's another family coming. So you have to you have to go find a place but just like a soft landing spot just to help them and it became this weird, crazy movement. And I got to firsthand, give these kids their first dose. And I got to see this this scenario that I got to witness with my own daughter, I got to see that, you know, and hundreds of hundreds of other people didn't work for everybody, this isn't a cure. Most of these kids have brain damage, and they can't come off their other drugs, they're addicted to them. And so it didn't it wasn't a cure cure all. But I got to see hundreds of other kids with a very similar, sometimes even more even more efficacious situation. It was like, Okay, once we reached 100 people, I was like, maybe this is really working, you know, I didn't really believe in until I saw other people's kids. And, and so started this whole movement. And that's where, like, that's basically how the whole thing the origin of this whole thing started was, was this cool, you know, grassroots thing with parents fighting for their kids.



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So you there's no problem prescribing opiates and all kinds of other benzos and all these different families that are being tried on the child which are known to have horrendous side effects which are known for example, opiates to take hundreds of 1000s of lives at the moment. But hemp is a schedule one drug was it lumped in with drug prohibition was it the paper companies and other story we hear like what how did this plant even become so demonized? You know, whenever it was decades ago?



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Yeah, I mean, there there is a deep history and people disagree on it. But like you said it was racism. It was other competing countries. And it was just it was the whole the whole law enforcement reform problem and putting these putting people in prison who are a different color over drugs who are harming nobody. You can argue they're harming themselves by getting intoxicated, but they're harming not harming society not harming anybody but themselves in their jail for this. And Trump got lumped in to this, this this thing with marijuana. And, and so I, I knew what needed to be done because we were being laughed at in the hospital like, This is crazy. You're crazy. I'm like, well, just you don't have to study it. You don't have to agree. But can you just chart this? Can you just put this in Charlotte's medical chart and write it like chart what we're doing so it's on the record, and they wouldn't even do that they thought we were crazy. They thought we were like marijuana activists, and God bless them. The marijuana advocates because this would this law wouldn't have existed. This medical marijuana law wouldn't have existed in Colorado for if not for them. But to lump a hemp user to the incredible success a child who cannot be faking this. There's no placebo effect with a with an unconscious end of life. Child Right? Like I don't, maybe you can argue that there could be a placebo effect. But but this is this is an anticonvulsant. It's an anti inflammatory and that's how it works in your brain, likely an anti inflammatory like we use aspirin and Advil works in that same mechanism in the brain. It's not that outrageous. They're studying it's gonna be the next seizure drug. But we were these crazy pot moms. Charlotte's better at the



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It's time. So she's walking, running, eating, she's going to school, and I put her on the school bus, she pack a pack her, her, her box of lunch, walked down the driveway, and she'd hop on the school bus alone and go to school. So I started going back to those, we call them the the media called the medical home refugees, that people who moved here from other countries and other states, I started going back to those states and countries and to change their law. And we started changing the CBD making the CBD as much as the state would allow someone full medical marijuana, as much as they would allow as fast as possible to create access. And we changed the law and half the country really, really fast. And then we went to Washington, DC, and asked them to do it. Because what I needed for the doctors to take this seriously was we needed data, we needed research. First we need to educate people, then we needed science, you can't do science on a schedule one drug, right. And then we needed to change the legislation. So in order to have like utopian, where you can have access, and you can you can find this by it, it doesn't need to be marijuana, it doesn't need to be pharmaceutical only that can exist as a dietary supplement. The only way to do that is to do research, prove it safe, and then change the legislation to provide access. And so that's what I've just started doing. And that's what I'm still doing 13 years later.



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So I've taken CBD for six ish years. Now, I had Dr. Gregory Smith on the show. And we talked about that before he was a pain manager is a pain management physician in LA and found immense success with CBD I had Dr. Bonnie Goldstein on the show, she's basically talked about your work and apply that to her patients, again, with with great success. But I've watched in a very short time that I've been in this world, and literally as a consumer, that's it and someone who's curious about it and wants to bring it to my population. It's the kind of open door initially, and then the slamming shut again. And these you know, you can't sell it online, you can't do this, you can't do that.



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Of course, and we're gonna get into that there needs to be oversight, there needs to be standards, and you know, efficacy and certifications. But what I was seeing, and then when I kind of delve into the research a little bit, it seems to be very obvious. There's a lot of companies that are probably very threatened by the holistic healing potential of plant medicine. So what was the resistance that you started to see, as you started kind of bringing this the stories plural of the amazing impact that this particular CBDs cannabinoids were having on these children? Did you start getting pushback from some larger entities that didn't want that in the world? Right, so one of my more, I'm not gonna say I regret this, I want to say it's a naive moment, but I actually don't regret this was I shared the data that I had amassed with a pharmaceutical company in England that was studying this as the next drug. So that's how it was gonna go, it's gonna, it's gonna go, it's called Epidiolex. And they were making a CBD drug. Now pharmaceutical has to be a single compound isolated, what I was giving Charlotte, what we were finding was efficacious was the whole plant. So it's the entire plant in a very exact amount of ratios grown a very precise way, extracted, a very precise way tested in a laboratory by third party the entire process many, many times to the process. So it's, it's done like a pharmaceutical



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actually higher, almost like a higher standard, but it isn't one single component isn't just CBD, but there's a company that's just CBD making a drug. And I share this data, I shared her dosing a share of what we were seeing. And to help raise this drug through the FDA process, which can be like 10 or 15 years easily to get it on the shelves. We I help them thinking I want these people, myself included parents to have another tool in their toolbox, people who want it covered by insurance, right? What's the harm in that? And that's where like, maybe I was a bit naive, thinking more, the more the merrier. And then as I started to go lobby, at state capitals in different countries and in Washington, I started to see the pharmaceutical industry lobbying against having CBD be a dietary supplement, because how in the heck are they going to compete with an agricultural crop that is d scheduled, when they have to go through all these hoops to get their drug to market very expensive, very, very tedious, which I respect and I understand this is different. This is a supplement. And it's it's not any it's not that less stringent. It just has more stuff in there. Right? It has more compounds in there. We don't isolate things out. So yeah, I saw I started to see the pharmaceutical industry lobbying, and they're very well funded, lobbying against me



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because they're just they have to protect their assets. So things like this is could be dangerous. The you can't have this floating around in the market, you have to buy this as a drug only. And to give you a number, an idea of that number of what this is worth to this company, the British company was just sold to an Irish company for \$7.2 billion.



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And so they don't. And this is the this is the main thing that they make this one drug. And so the drugs obviously not worth \$7.2 billion. What that's worth is patents and the patents that they have on this. But that's what we're at like little old me in Washington is up against Pharma. The people I helped the people, I helped get their drug to market, sell the company and make \$7 billion, or now lobbying against people having access to this mold since Charlotte started, there's 45 million Americans, Americans that take a daily dose of CBD from patient zero. So you're not going to stuff that back in the tube, right? The market has itself identified it this must work. People take that data daily, I'm sure that's an underestimate. And so that's what they're trying. That's what they're up against. Well, my whole household does for a start, you know, just just kind of relay I started taking mine after the surgery was prescribed opiates. And I took them for the first script, I think was only seven days. And then I happen to have just got some CBD from Dr. Smith. And I tell her tore up the second prescription. I don't need this anymore. This is ridiculous. And so that worked incredibly well, for me, it helps my sleep. My wife has anxiety, and she's in med school. So you know, she's she's an older student in med school. And I've just watched it works so well for her my son had kind of, it wasn't technically asthma, but it was bronchospasm as he would wheeze very badly. And when he takes his daily, it never happened. So I was seeing this. And again, I had no skin in the game, I didn't come into CBD going, this has to work. I went in go and okay, I've heard someone explain it. All right, prove it, you know, so by far and it was no placebo for us, my dog, it's kind of hard to get a placebo effect from a canine, you know, so I was watching all these success stories.



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But when you talk to me about the company wanting to make a pharmaceutical, this,



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it



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kind of is it happens over and over again, in history, you have something as natural that you can find in botanicals that you can reproduce, as you said, under stringent



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parameters to make sure that you have that purity and efficacy. You don't need to spend millions and millions and millions to turn it into a pill. And this is what nauseates me is all that wasted money. And then ultimately, as you said the word pattern. To me, I hear someone who basically said I want all the money, I'm going to I'm gonna take all this research, and I'm going to make this mine. And that way you can't have any more unless you pay me 20 times the price that you would have for a tincture. So I don't know what your perspective is, I don't want to put you on the spot. But that when I hear someone saying I'm going to take something natural, and turn it into a pharmaceutical, immediately I'm thinking well you want monopoly on that on that thing that's actually making a difference in the world. And you're not gonna win, I'm not gonna I'm not foolish to think I'm gonna win against a pharmaceutical company. I'm not, I'm not I have no skin in the game. I don't sell anything, just so we're clear. I don't make I don't sell CBD oil. But I believe deeply. I saw it firsthand. I know too much. I can't unsee what I've seen. And I believe in this. And I believe this is worthwhile. So in order to go up against these companies, I have to make this a profitable, we have to be proud of this industry in this country. We have to make it profitable, because we want innovation, we want competition, right? It's America. And so in order to do that, I have to lobby I have to go up against them in Washington, but I can't go up against them financially. And so if I can get these laws passed and I have not failed Yeah, I'd have been undefeated in doing this. I've never lost



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I'm working with the FDA I'm working I'm up against pharmaceutical and and you know as long as they put a bit of fear whoever has the most lobbyists in a person's ears going to win. But what I have because I don't have those things I have science and logic, right like I'm I'm in the right



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and so I believe that this can exist in this lane, and pharmaceutical can also exist and be profitable. And I think that they all can exist and we can we can help people and this is just an


alternative alternative solution that came from nature. And I don't think that's too outrageous a thing so, so I see it, I get it. They paid this money they have to see it back.

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So you're not gonna win there. You just have

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To make it a profitable industry, and you have to go and it starts with education. And so that's how I spend my time is in Washington now working to pass a bill that said that CBD is a dietary supplement, and we'll pass it this year, we're hoping to have this done by December.

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Now, what about on the farming side? You know, the Farm Bill, again, can be viewed in a number of ways. What are the pros and cons or what's the resistance or, you know, reception that you're getting when it comes to the agriculture side of this? Sure. So so the first early bills they actually named after my daughter is the first federal bill was in 2015. And that bill did two things. It D scheduled CBD, it removed it from the definition of marijuana, right, it's no longer a schedule one substance just completely D scheduled. And the second part of those early bills was have it be regulated as a dietary supplement by the FDA. The Farm Bill could only take care of one of those things, the Farm Bill took care of the agricultural component, it could D schedule CBD, take it out of the definition of marijuana, this is obviously not marijuana, this shouldn't be a scheduled substance at all. And they could handle that that's an agricultural jurisdiction. The second part is an FDA dietary supplement could not go into Farm Bill. So while everyone's talking about dealing with CBD regulation, in this year's farm bill, it's up for renewal. They did what they could in 2018, they did half of half of what I've been fighting for in 2018. And this is just that second half this language is the same, I have not changed my tune in 13 years, just have this be regulated by the FDA. And I believe they would have handled that back then if the Farm Bill was the vehicle to handle that, but it's not. So there's a bill that right now is a standalone bill, HR 1629. So hr 1629 is obviously not big enough or sexy enough of a bill to pass on its own, it's going to have to go in on something else. But the Farm Bill,

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I don't believe that that's the vessel or they would have done this when when it was doable way back in 18. So it's not going to go there. And you don't want your bill to go in the Farm Bill and then sink and be a vote pusher, you know, in hurt the Farm Bill. So this is going and adapt in a different way. People are going are fighting for this in the Farm Bill, they're fighting for hemp agricultural, that fight. That's not my fight. I'm not working on the farm bill. I'm working with the FDA, and I'm working with Representative Griffith.

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So as this kind of, you know, opens up and you talk about 2015, Charlotte's got her own bill. Now, her own law, now from through my eyes just kind of roughly when I started seeing CBD coming in myself, and then you know, understanding the cannabinoid system and all these other areas that make you realize, oh, okay, as you said, this is a supplement you're bolstering. The system is literally in the human body.



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Now you have some great great actors in this space trying to forge forward and bring great products to people. And then you have, you know, the other side of the spectrum. So talk to me about that tidal wave after that, and then how you're pushing for regulation. So people know that if they take a particular product, they know it's going to be effective. No, it's going to be safe. Sure. So and that was that last part was critical, and it's why I'm still relevant is how rigid I needed this to be how clean I needed this to be done for a dying kid. I needed to have these standards of operation it was almost to the level of of a brand name pharmaceutical I need it to be grown a certain way. So hemp is a is a phyto remedial crop. So they plant this at Chernobyl. They plant it to clean up brownfields. It cleans the soil, it's a very, it'll just leach everything into the soil. So when there's a train crash, and there's toxic chemicals, they'll they'll plant hemp, and there's other phyto remedial crops. They'll plant hemp, for example. And it cleans the soil. The danger there is if you're not careful how you're growing it, and then you're you're concentrating this down into heavy doses, and then you're ingesting this as a health product. It could be dangerous, it could be heavy metals in it if farmers aren't cautious. So when the time since 2010, that I started with this. There's now like I said 45 million Americans take it every day. 4000 Almost 4000 brands are making CBD products. There's probably a handful, a small handful that are operating as dietary supplements already. They don't have to, but they're so clean. They're they're doing it's so perfectly organic. And the way they test it, they have NSF certifications, and they're doing it so clean that they're preparing that this will this bill will pass it'll be a dietary supplement. They already are living there. They're applying to the they've applied over the years to the FDA to get dietary supplement regulation on their product.



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tucked in, were denied or ignored.



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And then the other 3000 Whatever companies, you know, there's some, there's some dubious stuff, right. But my, so I started the Coalition for access. Now, that's a 501 C four. And that's what we are. That's a platform that we're pushing 1629. And so the Coalition for access now is a consumer based organization in Washington. So I don't, I don't profess to represent the industry, I am not the industry, I'm, I'm representing the consumers, those 45 million human beings of firefighters, the veterans, the your grandmother. And yes, the smallest percentage of people using this are kids with epilepsy, right? That was the initial population, it was the only people using this. And now it's the smallest, they're still using it. But now we have to, we have to speak to athletes and veterans and a different population of people, they are taking this more as a health product, right, a health supplement. And when you get involved in the athletic when in the professional athletes, they as well as everybody, even just me, I care what I'm

eating, I care what I'm consuming in my body, and I found paying money. And I'm hoping this helps my health and improves my life, I want it to be clean, and I want it to be done a certain way. So my presence here, fighting for this is sort of reflective of how I gave this to Charlotte and how healthy and clean and cautious I needed it to be. And I feel that that is necessary, there should be clarity and truth and labeling, there should be third party testing, at the very least, right, and there should be adverse event reporting, and all those things are taken care of under the dietary supplement framework. And so that would, while at my goal is not to hurt 3000 companies, they'll either have to clean up how they're doing this. So learn about how to do it more cleanly. We want competition out there, right? All I want is safe access for these consumers that I represent. So I'm not trying to shut down an industry. I'm not my job isn't to brighten the industry. My job is not the industry at all. And and what I hear in Washington, I spend a lot of time on the Hill



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is they want to hear from the consumers. And so because this is like on the shelf, and people think this is a no biggie legal thing, they don't fight for their access, I do they don't call in and they don't fight for their access, because it exists. But there is a threat that this possibly may not exist very soon if we don't pass some sort of regulation because I don't know how long we can up we can expect to operate with 4000 companies selling who knows what, and who knows if they're testing, it shouldn't be testing your own product should be shipping it out to a, you know, a third party laboratory. And companies can't afford to do that. So they're making shortcuts I'm sure it's all a matter of time until, you know in the absence of proper action, it's just a matter of time until someone is injured and something bad happens.



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So one of my sponsors is Thor, the supplement company and the reason why I think they're amazing. Firstly, unbeknownst to most people, they are actually the supplement of choice for the UFC and CrossFit and pretty much all the large sporting organizations, but for my population, not only is the efficacy but it's the NSF it's the the ability to know that you're going to take protein or you know, whatever particular product that you use, and you're not going to then go take a workplace drug test and fail. And if you actually look into the world of supplementation, you can literally import powder from China, put a James's swallow mix 2000 sticker on the outside and then resell it. So that efficacy and that trust is very important to me. Now you mentioned the Stanley brothers, I know that you ended up lending the name Charlotte's Web because their





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participation in this entire saving of your beautiful daughter's life and extending her her lifespan by a long, long time that I actually totally independence is even why we're having this conversation. I knew of the story but I was doing research looking for that same level of efficacy for my fellow first responders. Now I'm out of the uniform now so I don't have to worry about the drug testing, but so many people do. And in all honesty, it terrifies them. So the NSF the certification that you will pass a stringent don't drug test whether you're a firefighter or stepping on the scales in the UFC is a huge kind of, you know, label for people to identify and

go Okay, whew. 4000 CBD companies. I can trust this one. So I would just love to kind of give you the microphone for people that are terrified of CBD terrified of failing drug tests. And you can by all means, you know, I mentioned Charlotte's Web CBD specifically

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how

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How do we rebuild that trust? Again? How do we get people to realize that look, this is, as you said, this isn't the marijuana plant. This isn't high levels of THC. This is a supplementation that will bolster your wellness, and then enable you to sleep better to move better, which in turn will just be a kind of a

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force multiplier in your own physical and mental health.

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Sure, so yep, I was one of the founders of Charlotte's Web, and they use my daughter's name in the company, we, I'm one of the founders of the realm of caring that was the 501 C three, just to kind of help the families that removes how it started was to help these people moving here. And then I started the Coalition for access now, which is where I work. So that's why I do that's all I do now is that is a political stuff. But Charlotte's Web recently got the NSF for sport certification. So it's really it's heartening to hear you say that you read labels, and you know these things, because I kind of wonder sometimes if people don't care, you know, if they really care what they're taking, and putting in their bodies, I care, but you can't care for somebody, right? They have to care for themselves. And I feel like that's only gonna happen if someone gets hurt. And then we, you know, there's a fear based decision, they're like, I could get hurt, I have to now care. And then it's probably too late. But so they did the real responsible thing. And that's one of the companies already operating as a dietary supplement. Anyway, they don't have to, it's not the law yet. But they're doing that. And they went for this NSF for sport, very, very stringent and difficult and expensive and tedious and slow certification process. And they passed, they just did a, a, they come in, and they and they recertify you and they do they they come in and they study your lab, and they go through you with a fine tooth comb, and they passed with 100%. And so they what that ended up allowing them to do is one prove the validity and the how clean and safe their product is. But it allowed them to partner with Major League Baseball. So as a first time major league sporting agency, entire, the entire agency for sport, had partnered with a CBD company. And and like I said, you know, they had me come and throw the first pitch out at Yankee Stadium in the playoffs in the fall on a few. And if you saw that, hey, I got it in his glove. Or you did bounce it, I got it as met. But it was a really cool moment to see the whole thing almost come full circle. And it wasn't just about the cameras and that stuff. For me. It was about going from having my kid taken out of my home by law enforcement for giving her the same thing we're talking about right now for having major

league baseball backing its players. And the reason that they did this was because they know it's an alternative to opioids. And they know their players are playing injured, or post surgery or pre surgery. And they know that this isn't a functioning thing. You can't be a professional athlete if you're taking addictive substances. And so they know this is an anti-inflammatory, they researched the company, they looked at all of their products and stats, and they backed them. They backed their NSF sport products for their players. And I worked with the Chief Science Officer for MLB. And I work with their lobbyists in Washington. And they all agree that this should be a supplement, but they stood up first to back their players. Like we know you're using this and if you're not you probably should be and we want some health options for you for further, you know, and I'm not gonna make medical claims on what this does. I'm not a doctor, but we know it has anti-inflammatory properties. And that can work in many functions in your body, it could just work on mental acuity and focus besides sleep, and loss of inflammation, inflammation from an injury. So anyway, that was kind of a cool moment for me simply because it validated everything I've done.



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I'm not a criminal. In fact, the you know, the Yankees are out there playing and using this, it was kind of, you know, just kind of was cool, almost full server almost full circle. And I was really proud to see that partnership coming together. That's amazing. I mean, this is this is what I want from these conversations is for people to understand the origin story, the Genesis and the why behind it, and then take a step back and go wait a second. So I can with a prescription. I can take opiates and benzos on shift. But I can't take as you said, basically something that will boost a cannabinoid system that they actually have in my body. And the one analogy I use as a firefighter is when we have a car accident, we have what's called cribbing. So we'll use the airbags or the tools and we'll raise the car up and we'll put two by fours. So if it happens to slip, it doesn't come down on the person who's trapped underneath. And that's what I see a CBD it's not a magic pill. It's not a you know, a magic bullet. It's lit



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It truly cribbing. So for example, you're stuck in this cycle where you can't sleep, you're kind of hyper vigilant, it allows you to kind of calm that, that that nervous system a little bit, and then you start sleeping better. As you start sleeping better, you start healing, or you've got an injury. It's not, you know, a magic painkiller, but it dulls out the inflammatory response a little bit, it takes away some of that anxiety around your injury, you're able to do a little bit more in PT, and then you start healing better. Or as you said, in a more acute version, you're you know, maybe on chemo and your your diet is I mean, your appetite is gone. Maybe you're a pediatric seizure patient, now you can start messing you're not messing but choosing a different intensity of that medical grade, you know, whatever a mixture that you choose, and now you can go down that road as well. But just the as you said, the wellness you don't have to be hurt CBD you don't have to be, you know, Charlotte to take CBD, I think what we've realized is it's, you know, I take a daily multivitamin, because I know that all those those letter vitamins are going to do good things in their own way. And to me, CBD is another adjunct I take mine at night, and it helps me wind down and I usually have a great night's sleep and for us on shift, you know, you can take it to deal with the shift, you know, with with the ups and downs on a shift and then it will have a different effect when you're back home on your day off to actually sleep in your own bed and down regulate. Yep, and you're not going to test positive for THC,

which is the intoxicating part. But the point is, is like okay, so James, it was when you take it daily, do you feel euphoric? Do you feel intoxicated? Or do you feel like you couldn't drive a car? yet? I mean, you might feel something but but are you you know, are you feeling impaired in any way? No, I mean, sometimes you feel more relaxed, which is always a good thing. You know, but I mean, not in a like you said not in a psychoactive way just in a downregulation way but that's that's the point is, as you said, the the hemp that has the point 3% They, you know, people are worried about that being tested for and that in itself. I mean, I think they're slowly starting to review even the marijuana side now because they're realizing that for responders, there's a benefit, but people are terrified of that. So then you choose the you know, zero THC option where now that's, you know, as you said, NSF this is not going to



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you're going to be take any workplace drug test, and it's guaranteed to be completely fine because they are not testing for CBD. Because as you said, as a dietary supplement, you know, THC is another entire thing. And obviously in larger amounts in the human body that may well you know, cause an issue but with CBD and the NSF, you know, certification that tells a police officer or firefighter or dispatcher, a corrections officer, a paramedic, member of the military, that you are completely safe taking this and you take away that anxiety and actually start improving your life. I was having before that NSF that national science certification, I was having these secret. I won't name anybody around the country conversations with firefighters who, who wanted to talk about it because maybe they had had a seizure or maybe they're wanted something else for their migraines or whatever medical stuff or their opioids or their surgeries. And my husband's a firefighter. So I'm married to now married to a firefighter, divorced and remarried. And he's he's medically retired. And so I'm sure he's not going to join me talking about this, but I have to watch him struggle. He's had nine, eight surgeries, and was medically retired. And you know, he struggled to get out of bed and so he's has a much more freedom to use this now than he did when he was on the fire department risking a potential drug test. But now that they have these products that are at a safer NSF and Major League Baseball is taking them you know, it kind of seems silly these conversations I have with these firefighters who were like what do you what do you think? Don't tell anyone we're talking when I learned more about this? Am I going to test positive on a drug test pre before the THC free stuff? You know, and it's like yeah, you might like a third I think a third of people test positive a third you know, don't I don't know that. I think it's like half and half on a high dose of high CBD, you might test positive but on the NSF stuff, you know, it's a much different conversation now, but it's um, it's, it's, it's outrageous. You know, even the testing though, the THC testing. That test is highly unscientific, you know, you think it's 234 weeks some people will test positive after having used a THC product. So you'll test positive it doesn't mean you're high on the job or high driving around but that needs to get, you know, hammered down that testing exists the accurate testing, it's just expensive and and they use they're using the wrong old testing to do to do this and to base a whole police department or fire department or military off of something that's just very outdated and inaccurate is and here's a potential tool.



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for their all their problems, it's unfortunate. So yeah, we're absolutely trying to change that and, and give the American people I just give them a tool to stop suffering was funny you say about workplace testing. The reason why I didn't become a firefighter in the UK is because I

failed again, using air quotes, the color vision book, you know, with all the dots in the numbers. And then fast forward years and years later, I ended up challenging it and naming things in the doctor's office, and he's like, Oh, you're fine. And then check, you realize, again, again, that that's just giving you some data on, you know, what deficiencies? Is it red, green, is it but you're not like, walking around completely black and white, or perfect color. There's a spectrum in between. And even the psychological tests, I think it's the Montana personal personality assessment test, something like that. I've asked my psychology friends, and they're like, Yeah, that was never meant to be a standalone test. It's used with a gamut of other tests in forensic psychology to create an entire kind of view of a person. And it's not a Oh, yes, you pass, you will be a good firefighter or you're a raving lunatic. You can't use that test. So, again, here we are, you know, we're forgetting the question, the very things that we believe for so long. So I think this is a big paradigm shift or awakening of our generation now is that we have to turn around and question things. And if it's valid, you go, Oh, okay, beautiful. I'm gonna keep doing that thing then. But if you go, drug prohibition was started by Harry Anslinger, who after the, the absolute failure of alcohol prohibition had to justify his job, and he was a screaming racist, and was the man behind reefer madness. And that's why we have this now. Maybe the War on Drugs isn't a good idea in a maybe the CBD was zero THC, is what I should be tasked trusting, and the opioids and benzos that my doctor throws at me, maybe that's the one I should be questioning now. Right. But you're crazy for even questioning them, like you're made to be, you know, but yeah, the whole thing is outrageous, when you when you look at it, people are in jail for this, did you in Singapore, they hung a guy for trying to sell for trying to sell marijuana for selling marijuana, and just last week, because their laws are very strict, and he broke the law. But it's I mean, it's, you know, the stigma behind this, that war on drugs, as outrageous as it was, was effective. And it worked. And we believed it. And so the hardest thing to do is to change a person's mind. If they believe something to be true, the hardest thing to do is to go forward and change their mind. And that's what we're up against, like, no big deal. But it's difficult, but it's doable. And it doesn't have to directly affect you suffering or someone you love suffering for you to change your mind. We just have to be open minded about this. And I think it just starts with a real pragmatic approach. Like we can talk about these philosophies we have and, and our western medicine is a disaster. And people need to open their minds. But I think it's just going to be done the long slow scientific way through these good companies doing good science, third party science through the through research centers, and and doing the things like NSF certification and just getting this out there with no adverse no serious adverse events reported. And I just think that's the way to do it to change someone's mind, it's going to take some some data and science and it's slow, and it's tedious, and it's expensive. That's the only way to regulation. And I'm willing, I'm in this like, I'm willing to do this, I vowed to help these people. Like I said, I know too much I vow to not stop until this is complete. And we're almost there. I should I think we'll have this done by December, we certainly probably won't get it done next year in a general election. And so I need to get this done this this December but but that's what we're fighting for, you know, kids with epilepsy, they have access to this. And if they don't, they have access to a pharmaceutical now. Now it's like we said as athletes and veterans and these people deserve to know, one that there's there's an army of good solid people working on this, and we're gonna get this done and to whether they take it or whether they've heard of it, at some point, it's going to come across everyone's played and they're going to have to decide if they want to try this if they need it, if they're suffering, and they have a conflict that has a solution they have to decide to, to do this. And now the information is out there. It's not. It's not like real fringe anymore. It's out there. And that's because good people are working on it. And that's because there's an industry that's profitable. And that's the only way this makes sense, unfortunately, is as long as they can make money. No one's gonna do anything for free. I mean, I will because I, I don't know, law, my last two brain cells, but I'm

willing to do it because I care like this is very, very worthwhile. It's very worthwhile and I know that it's a rare opportunity that a lot of people don't have is to work on something meaningful to them and fire was like that for me or diving was like that for me.

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This is another way I can be of service and do something useful and not just sit in a cubicle and hate my job and hate my life, I actually get to work on something really cool that can change can change people's daily lives. And so so I'm not going to stop until this is finished but

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well, so Charlotte went from literally palliative you know, palliative care just waiting for the day when when she passed to having nine extra years or nine years as she should have had. We talk about science, we talk about questioning things, and that middle ground of truth 2020 rolls around, you know, a virus sweeping through the earth that the two sides the two extremes seem to have the giant, you know, mouthpieces, but ultimately, this is a virus is very real, and certainly if you are immunocompromised, so you have some sort of underlying issue. It can be even more deadly. So walk me through early 2020. You know, where was where was she at physically, mentally? And then let's talk about, you know, one of the real tragedies that did come out of COVID.

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Yeah, so not my favorite topic, but I'm happy to have

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Charlotte when nine years she was never on another pharmaceutical. She took Charlotte's Web CBD every day, and she never went to the hospital. She never had another hospital trip. So I don't I know that might it's hard to understand. But if you can, we were high high medical situation she wasn't going to live through that she wasn't going to live to adulthood. And the power of never having visited a hospital and never having to go on not one single pharmaceutical, no rescue drugs, nothing is outrageous just for this syndrome. And so so I am very, very fortunate that I got that time with her. I got to know her I got to meet her. I didn't the first four years of her life or not her. And so for those till she was 13 we really got to meet this crazy funny, interesting human being. So I'm really grateful for that 2020 March rolled around.

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We we all came down with COVID What was we thought was COVID We weren't tested, there was no testing back then. So we were quarantined in the house. We were very, very sick. We were giving IVs to each other. My husband paramedic taught me how to do IV so I'm doing I'm on a kid him, Charlotte, the whole family that hospitals like don't come in, we're full of these

COVID patients. And when we can't test you and kids aren't getting it, so you guys are probably fine. But Charlotte had it for four weeks. We all had it for about four weeks, and it really just saps everything, everything out of her and she got pneumonia



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from the from the COVID. And she had it the I don't even say she had it the worst. But but she was the most affected by it. Because she had a pre existing condition. And it just took it just took every last bit of what she had left. So she went to the hospital for a seizure. For a large seizure, she was dehydrated, and she had fluid in her lungs. So she was she had pneumonia, went to the hospital and she ended up passing away and dying on a ventilator on the COVID floor. But untested so we don't know for sure what she had. But she had a COVID doctor, we were in quarantine COVID Flora and I was allowed to be there with her. But unfortunately because it was a quarantine situation she passed away in April on April 7.



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So it's tragic.



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She didn't suffer she had a seizure and didn't suffer but we did. You know, she died in the home is what I think happened. But we kept her on life support in the hospital for for a day. But I feel like she died in her sleep with a seizure here. She just didn't have anything left after after that virus and pneumonia. And it was it was a tough I mean, I think like, you know, you've I don't know how many people you've ran on. But my husband and I were doing, you know, CPR on her. here that was three years ago. It was tough. That was the toughest call he's probably ever had. And, and it was it was



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it was just surprising, I think because she was so healthy. She was doing so well. And but But it shows you people who have these, these these immune disorders and pre existing conditions and underlying stuff and drugs they might be taking it affected different people differently. And you can't just count that so so yeah, it was it was it was tragic. But I look at it as a positive of those. I look at the nine years I look at the solution we had for her and I'm just thankful she didn't suffer for those nine years and then just die of Gervais syndrome. You know what I mean? Like she got to have this really cool life. She got to make all kinds of change throughout the world. And it was like just like a really, really interesting story. And I'm just very grateful for all that time with her but it was super tragic and I mean it's fun.



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because she has this life limiting illness, you think I'd be the most prepared you think we would be the most prepared for her death for the eventuality of that. And it was just like, Major, it was just major. And then you see 1000s of people dying, you know, each week, each month, and you

just major. And then you see 1000s of people dying, you know, each week each month, and you just see everyone's going through this. This trauma, it was, um, this is heavy, like those years were just a really heavy time. One cool thing that came out of, of all of that was the governor of Colorado polis declared April 7, the day she died, Charlotte Figi day here in the state of Colorado, just because of she, she made so much change. She advocated for so much change with her little special needs life. And so every year on April 7, we celebrate. I mean, I celebrate her every day, but every every day, the whole state celebrates Charlotte Figgy day. So that's like, what a cool honor you know, that, that they saw it and, and I think what I take from that, as is people think you can't make change, or your life doesn't matter, or you're just this one little cog in this huge wheel of society. Well, she was a special needs kid, you know, that probably had there's no hope for her. There was no hope that she would amount to anything are mean anything or do anything in the world, and even Charlotte's little life for 13 years, did more than I can say I've ever done in my life. So it's like, I see it as an inspirational thing. And a lot of good came out of it.



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To lose a child, especially as you are, you know, so enthused and optimistic after the treatments and her not having seizures, not going to hospital anymore. And then to lose it right at the beginning of 2020. With all the shutdowns and isolation and lack of communication, a lot of people. What was some of the tools that you and your husband and your family used to get through that very traumatic time, especially when both of you were carrying traumas as responders as well? Yep, yeah. And like I say, every first responder has PTSD, I, I'm convinced of it, and every special needs parent probably has PTSD. I'm talking severe PTSD. And, and so what I did was, I used EMDR therapy. And I use the special this fella we were zooming, which is crazy to do that kind of therapy on a zoom call, but it was really effective. He was sort of famous for he was at the Oklahoma City bombing. He was at Scotland school shooting Sudan. You know, he did real real traumatic things were kids saw their parents heads, you know, beheaded and, and machete and Tribal Wars and school shootings and that sort of thing. So he was very familiar with working with police and fire and military and, like heavy heavy duty trauma. And, and big tough guys, right, like we talked about in the beginning, like big tough guys who, who certainly don't need counseling, you know, for something that made them a little sad at work well, he perfected this and he said, Absolutely, and it's probably going to take you this many sessions with me, and this is how it's gonna work and, and you're gonna get out of it, what you put into it. And I was like, I was traumatized by the whole thing. I mean, I'm a tough I'm a pretty tough cookie. But I was having really traumatic nightmares, like dreams where I was terrified to go to sleep at night, because I had my brain had chosen to remember the death as a trauma. So every night I had relive some way she would die with right there within my reach. But I couldn't help her and some new way every night, some horrible new, like a horror movie, but scarier like every single night. So I just stopped sleeping. And I really realized I needed to deal with this. So he helped me and like I said, I went full all the way in. I mean, I went all the way in willing to do the work. And I highly recommend, I highly, highly recommended if you have had traumatic events or even childhood stuff, it doesn't have to be as one singular event. But it absolutely helped me and I think that being vulnerable and going through it that was an absolutely huge useful tool. I take CBD that was a very useful tool for me. And I'm and now I'm, you know, I don't have that, like it's hard enough to deal with the loss of a child as it is to deal with it the way I was choosing, I guess, subconsciously to deal with it was just making it

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I don't even know if I would have survived much longer going through the way I was dealing with this trauma. I mean, it was absolutely, and I know firefighters and I was just talking to my husband about this. There's firefighters we know many many many that have had trauma had to quit had to get off the force the fire department because of like, like emotional and mental stress of it and and it's you can't, you know, they can't hear sirens and they can't just like veterans of war. You can't hear fireworks. You know, these are major things there are tools

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To help to help yourself get through this stuff, and I'm a total testament to that to that, and it worked. And I solved that problem, that one major problem. And now I can just deal with, you know, death of a kid, like a normal person.

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Now, I've heard nothing but good things about EMDR, when it comes to an acute event, so obviously, you know, literally the day that she died, or, you know, some of these tragic calls that we run on. So I think another thing as well as the more time goes on, the more the toolbox expands. And so we obviously have been talking about hemp and CBD specifically, but I'm hoping that we're going to see an expansion of MDMA led therapy, ketamine, you know, psilocybin, some of these other, you know, whether it's pharmaceutical or plant medicines, because again, that's another entire subset of mental health therapy, that appears to be incredibly effective, as you said, with the work that you got to put in with it. But it's also illegal in this country. So the irony that you serve as a policeman or a firefighter, or, you know, in military uniform, and then you have to go to Mexico, Colombia to get therapy for the thing that you did for your country. I think, you know, I think we're moving there. But it's another irony, so it kind of ties in,

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you can look at certain states, and it's going to happen that way, Colorado is moving forward with psychedelics. And, yeah, it's really interesting to see to see that psychedelics will go faster federally than cannabis is my prediction. I don't know, I don't know if that's a sci fi. That's how it should be. But I'm just seeing that's moving much faster. I think people care deeply about our veterans and government employees and our military, I think the government cares deeply about that. I do think that there's more stigma around cannabis than psychedelics, because it's new. If we let it simmer too long, we'll start some more on drug stigma with psychedelics, but for now, if we can, if you can push that through, we can we can get that. But I think there's also like a negative stigma, like we started this conversation with today, with mental illness, like you're weak, it's ugly, we don't want to talk about it. We don't know how to fix it. And there's a stigma, there's definitely a stigma around that. And so if you can reposition it as something that we have tools for, and it's fixable, and it's you can work on this stuff. And it's not something to be afraid of that police have mental illness. And you know, and have them accept it and not tough guy their way through this. Yeah, I think I think there's solutions here. But it's tough. It's a tough road when they're stigmas. Yeah, well, I think the other thing is just seeing it as a natural reaction to the horrible shit that you say, you know, we think of this, you know,

what's wrong with me is that you just saw a car burned up with two adults and two children in it, people aren't supposed to see that. So what's going on is, you know, do you have a strong foundation where you are fortunate enough to have an upbringing A, or have you got a foundation upbringing, be where you are Kind of, you know, shaken, as you mature into an adult. And now you put this uniform on, and your foundation isn't as stable. So that's why you look to your left, and this person is doing okay, and this person is in tears are rocking in the corner. These are natural reactions, depending on your resilience, and this, again, ties into all these tools, whether it's EMDR, whether it's CBD, whether it's psychedelics, or, you know, just clean eating in general, that you can absolutely do the work, get over anatomy in a positive way, some of the mental hurdles that you have, and actually, you know, be be better be an even better version of yourself, because you've navigated that trauma. It probably starts with people like you and what you're doing and bringing, bringing things to light, just talking about trauma, and talking about mental disorders and mental illness. Because people can't fix it. They don't admit there's a problem. If the fire department doesn't admit that this is an epidemic, you have nothing to solve, you have nothing to solve for. So it's first just bringing awareness to the fact that there's a problem that exists and there's solutions out there. Absolutely. Well, I want to go to some closing questions. Just before I do. So that we stay on the topic was Charlotte, you talked about being in DC and wanting help as far as moving an initiative forward. And in our discussion, you said that usually it's only 60 emails or texts that can actually push an issue to the top of the pile. So if you want to expand on that, and how people listening can actually help because this is going to benefit my community in so many different ways. And I want to make sure that we as a profession or professions, plural, can roll up our sleeves and go okay, this is something I can actually physically do to move towards these holistic, you know, health plant medicines that are truly going to make a difference in my life and my career. Yep. Yeah. So I've heard repeatedly in Washington DC, that if a senator or a House member hears



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Something 60 times six, zero, that is a top of the pile issue, they will work on that as a very, very important issue 60. So the whole state of Texas, if that if one senator in Texas, here's some an email or a phone call 60 times from 60 constituents that has now come gone to the top of their pile. That's it. So I don't know, that was outrageous. To me, that was surprising. And I keep hearing it, I know that I know this to be true. And then I went and implemented this and found 60 people to reach out. And sure enough, it's true. And and that's sad. I don't know if it's intimidation that constituents don't know enough about a topic to call their representative. Or if they don't have time and can't be ours to deal with it. Or they don't care, they assume someone else will deal with it. I don't know what I don't know the reason. But I know how easy people can make it to click this button, send a pre written letter. But the most effective thing isn't to do those take action links and send a fake, you know, I could write a letter for everyone to send it, it's uh, you know, it's not as effective is them calling and telling their story. And you don't need to be informed, trust me, sadly to say our legislators are less informed than you would think about these topics. And they are hardworking, they're thoughtful, they have to deal with many, many different issues. And you'd be surprised how educated the average constituent is. But they really just want to hear our stories. So you call up here, you look for your person who's your representative, you look for your two senators, and you ask them to pass CBD reform is what I'm asking for. We're doing this more, because I've seen how ineffective that is how people aren't willing to do that work until there's a threat or a fear that this is going away that their trusted thing that's working for them is going away, then they'll act right now there's access we've it's legal in 50 states, we're halfway there in Washington. And and so people don't feel like there's a worry or concern or they need to act and the lobbyists

will do it. But we could do a lot faster if people would reach out. Absolutely. Yeah. So So you talked about that standard letter, obviously wants someone to write their own, where can they find that so at least they understand what they're asking for and the information behind it. And then then reworded themselves. So the best thing to do is to go to the website, its coalition for access.org. Coalition for access.org is the nonprofit. And you can you can use that language you can go to you can just google how to find my representative and how to find my Senator in Washington.



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You each state has two senators and each district, your zip code your address has you have your one US congressman, and to send them a letter and ask them to co sponsor hr 1629, is what we're trying to do. And if we could just have people reach out and do that.



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It doesn't need to be you don't have to be a lobbyists. You don't have to be a CBD expert, you are just saying in the shortest amount of words possible. Please support this legislation, this would solve our regulatory problems. Beautiful, well, I'll put the link to that on this webpage as well. So for people listening, if you go to James geering.com, come to this this podcast episode, you better find it right there. And all you got to do is click on it then Awesome. Thank you. Thanks for so much for giving us a voice I have been we're not the loud, squeaky wheel. And we haven't been doing a lot of media. Because I'm just working. We're just working on pushing this. And then you realize, like, people still don't know what the this is and what this isn't. And it's very important, like first to educate it. But it's hard. It's hard to do both, I could spend my 90% of my time as a nonprofit fundraising. Or I could spend 100% of my time just just working on the bill. And so it's hard to do both. And that the speed that we're trying to get this done, I can't do both. So I'm just working, I'm just head down 200 miles an hour, laying the tracks as the train goes, as Jared Stanley always says, and we're just trying to get this done. So we're not loud and squeaky and asking for anything. I'm asking for money. I'm not asking for much. But first, I think that people should know that this exists that their solutions for their problems. And and there's good people working on this. Absolutely. I think that's the problem as well as you find yourself in a bit of an echo chambers. You look around and go, Oh, everyone gets it. And then you step outside and you're like, Ah, no, yeah. So that's the truth. It's people like you that provide these platforms and spend your time giving us some light and shedding some some light on the information on this. I really appreciate what you're doing. I really, really appreciate that your mind is a vault of information because you get to have so many different people, experts in their field on this on your show. And that's an interesting job, but it's really appreciated. Beautiful. Yeah, so it's interesting because you have all these people and it's a Venn diagram and then you realize where everything



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intersects is a real real truth. I mean, everyone has their truths within themselves. But, you know, CBD has definitely been one of them, whether it's Eric Garner Goodman Foundation, talking about the cannabinoid system and how you know, movement can also improve that, or whether it's like I said, Gregory Smith or Bonnie Goldstein talking about, you know what they've

done, you know, an adjunct to your work to Charlotte's Genesis. So I want to get to a few closing questions. The first one, I love to ask, is there a book? Or are there books that you love to recommend? It can be related to our discussion today? Or completely unrelated? Well, I'm writing mine right now. So maybe I'll come back on. Oh, definitely. I'll give you that title. Soon enough, please. Yeah, no, absolutely. open invitation. All right. What about a movie and or documentary? Oh, that's a good one. Well, I watch a lot of documentaries now. Do you mean on this topic, any topic? If it's on this topic, you should watch the weed series of documentaries. Like I say they're gonna do a bunch more. I'm gonna be in my walker, a little old lady filming weed nine. If they keep doing another one that is more about the Coalition for access now, was a Dateline documentary with Harry Smith. And that's called Growing hope. And you can find that online. And they did a it's like a short Docu series, little six minute segments. They followed some of the coalition moms in Virginia, and they followed them passing their state law, and those people came and worked in Washington DC and helped me on the federal law and it's just a cool way to see how the process work. See what they're up against. And it's it was tear, it's a tear jerker. That one, so, so that was a really cool that was a really cool documentary, but that's around this topic. But I yeah, I watched every documentary. I'm like a docu nerd. So I just watched that Falcon volcanologist one. Have you seen that? No, I haven't. You know, that was good. fire of love. I think it's called about this couple. And they they are volcanologist and they traveled of volcanoes. It's a love story. It was really good. I think it was a front runner in the document of the year last year. Okay. After watch that I did watch the one on the explosion in New Zealand. It was one of the islands right off the coast. And I was extremely sad. Yeah, that yeah, that and then the there was an earthquake one, right? The earthquake tsunami anyway, we can think about documentaries.



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To many like things that have actually happened in real life. And truth is certainly stranger than fiction. 100%. Obviously, I just watched an incredible one and three, three part series on the Boston bombings. It really very, very good documentary. That's on my list. I keep seeing it. Yeah, TV, pop up with the watch. Definitely. All right. Well, the next question, is there a person that you recommend that come on this podcast as a guest to speak to the first responders, military and associated professionals of the world? Oh, that's a great, yeah. So my husband is working heavily with the fire department in this trying to work in this arena. So you can have him on. We're working with many different fire departments, and we're working with wounded warriors and trying to get them involved in Washington to help move the needle. So I worked with Jose in DC, he's a friend and he runs the Wounded Warriors project and I just think that from a veteran standpoint, he's really standing up for that organization. So I think if you could, you know, somehow get some people from Wounded Warriors involved. That would be I think that would like pull this full circle. Beautiful. Thank you. All right within the fray last question for you make sure people know where to find you. What do you do to decompress? What do I do I ride dirt bikes? I I rock climb. You know, I think and I think that you see that a lot you know, with people who who work in that difficult kind of a job for me that these days, it's it's not fire diving, I work in Washington DC, just its own set of you know, difficulties mentally, it's frustrating. But I ride Europe I have we have seven motorcycles and, and so we like to ride off road, I jump horses a rock climb. And so I do some, I really need the my decompression time to be kind of hardcore, physically. So I can so I can get back in the mix of it. But my time in DC is pretty like we'll do eight to 10 miles a day of walking, just to just go into meetings like I'll fly in and just just to just to just shake hundreds of hands to my toenails are falling off. And so my decompression time is at the end of the day in Washington, I'll go run after doing eight miles on the hill. I'll go run the mall. I'll go run all the monuments and so I'll go to the Vietnam

monument in the world war two monument at night. I don't know if you've ever done that. I highly recommend it. It's very safe because it's protected by the police. And it's just cool to see it at night so I'll go run you know at



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night after work just to decompress. Brilliant Yeah. And I've been there in a day, I've never been at night, so but my son, my son hasn't been to DC for a while. So I think he went when he was very, very young. So it's something I want to do. Obviously, there's a lot of other military members that come on here. And, you know, I want to keep him embedded, and he's actually in the JROTC program too. So, like, even more invested now, there's something about the how the artists set those those monuments up that are very different at night and how they lit them at night. That's just like, you'll just sit there and tears. I mean, I don't know how you could see that. At night, when there's no one there, you know, you might be the only person there and just the way that artists had the lights. I can't explain. I just have to have that experience. I have my first time seeing them was that night. So I can only attest to that. But that's it was really moving. Beautiful. I'll make sure it's on the list again. Thank you. All right. Well, then just to make sure. So the Coalition for access.org is the website for the coalition. Were there any other places online or on social media? People can find you? Yeah, we're on Twitter. And I'll always whenever our co sponsor jumps on to the bill to co sponsor and support our work, we thank them and we would really appreciate people just just finding us on Twitter and just to help move the needle, get this over the finish line, that would be really helpful. We're on Facebook and Twitter. You will page I want to say thank you so much. We've been all over the place you know, we explored some areas that obviously you know, a pulling up some emotions, but it's such a powerful kind of chronological journey from you as a first responder early in life to the amazing things that Charlotte has done. And like I said, everyone in in this home that I'm sitting in now has benefited from that story as well but to hear where she was the nine years of thriving that she had and then you know the legacy she's left behind. I want to thank you so so much for being so generous with your time today. You're welcome. Yeah, thank you very much for having me and supporting this support just just supporting this and taking it yourself and I really appreciate the that what you do.