

Cosmic Podcast 1

📅 Wed, Apr 05, 2023 9:30AM ⏱ 46:56

SUMMARY KEYWORDS

healing, medical intuitive, absolutely, personality, people, carol, color, doctor, trauma, energy, intuitive, emotions, connecting, medicine, neurology, patterns, addiction, intuition, symptom, aura

SPEAKERS

Carol Ritberger, Mary Louder

M Mary Louder 00:01

Hello and welcome to all of you fellow health and wellness wayfinders. I'm Dr. Mary Louder, and you're listening to the Since You Put It That Way podcast. Today I'm introducing a new set of topics with my co host, Dr. Carol Ritberger. Carol and I have co-created Cosmic Health and Wellness. And we will be having discussions on health and wellness from a fully and truly integrative, esoteric and energetic manner, we might be able to even say that this is out of this world. So let me introduce you to Carol. Carol is a radio host and author and an innovative leader in the fields of personality, behavioral psychology, and behavioral medicine. With more than 28 years of experience as an internationally renowned medical intuitive, Carol's experiences in helping people understand how personality, emotional, psychological and spiritual energy can lie at the root cause of illness.

M Mary Louder 01:05

Carol holds a doctorate in theology and a doctorate in esoteric philosophy, and hermetic science, drawing on her education and personality typology, psychoneuroimmunology, spirituality, metaphysics, and esoteric healing, Carol weaves these perspectives together with biology, physiology, psychology and psychospirituality. As a result, she's able to uncover the hidden contributors behind illness in a credible and understandable way. Carol is also the author of a numerous--of numerous books, Your Personality, The Color of Your Personality, Your Health and Personality, Love: What's Personality Got To Do With It?, and Managing People: What's Personality Got To Do With It? Her books can be found at local booksellers, hayhouse.com, and amazon.com. So welcome, Carol Ritberger as my co-host to this series of Cosmic Health and Wellness.

C Carol Ritberger 02:13

Well, thank you, and thank you for having me.

M Mary Louder 02:15
Yeah, it's--

C Carol Ritberger 02:15
It's just fun working with you.

M Mary Louder 02:17
Yes. Yes, it really is. And we've worked together now for I would say about a year, maybe a year and a half off and on.

C Carol Ritberger 02:25
Yep. Been about that long.

M Mary Louder 02:27
And it's just been absolutely delightful. And then we kind of concocted this whole idea of Cosmic Health and Wellness. And, and I wasn't sure if the where the fun and the information and the--how that was all going to fly. But we probably will lead with the fun is what I'm thinking.

C Carol Ritberger 02:45
Absolutely. And then spirit will just take us wherever we are supposed to go.

M Mary Louder 02:49
That's right. That's right.

C Carol Ritberger 02:52
Our job is to trust, right?

M Mary Louder 02:53
Exactly. Trust me, I'm a doctor. And so are you. So there you go. Well, good. Let's start with a definition of what medical intuition is. I'm going to read a definition. And then you can embellish it because I think we need to add a little bit to it. But what I got is medical intuition is

a system of expanded perception, gained through the human sense of intuition, which is deep listening, or deep seeing. And it focuses on visually--visualization skills, intuitive and innovative scanning to obtain information from the physical body and its energy systems. Not use to diagnose, but rather to support where the--we can see and gather information on a patient, client or person.

C Carol Ritberger 03:46

Absolutely, and that's a great, basic, foundational description of it. Each one of us is of course, a little bit different because of our neurology and how we approach things as medical intuitives, but the real purpose of a medical intuitive is, like the definition said, is we use our intuition to be able to connect with the invisible part of the body, and that energy body, human energy system, and that system is rich with information. And that information goes beyond the physical body, it'll go into the emotional patterns, the--maybe an emotion of preference that each one of us has, an emotion of preference. It also looks at a lot of our thought patterns. It reads a lot through energy, not so much that visualization part, but through energy to let us know how those thought patterns limit the flow of energy. And one of the things I've found all the years that I've done this is that the exquisite--exquisiteness of that energy system is that it pinpoints exactly where the origin site is, the primary symptom site, the secondary symptom site, so to work with a medical intuition, whichever way that they approach it, in their own connection with their intuition and their neurology, they can just get a bigger picture. And when we have that bigger picture, then we can look at healing from a variety of perspectives other than just focusing on the physical body.

M Mary Louder 05:18

That's, I think that's really good, because what happens in medicine, by and large is, it's all physical symptoms, and we've got this whole push of the mind body medicine and mind-body connection. But we were never disconnected except we thought we were. So it's an illusion that we're disconnected. We actually are not.

C Carol Ritberger 05:38

That's correct. And, you know, Mary you know this as a doctor. Medicine is trained to read symptoms. And so usually, you know, it's always dangerous, to just kind of stereotype. But usually, people will seek out a doctor by the time that it's gotten to secondary symptom sites. So when they go to the doctor and the doctor, ask them what's going on, they're gonna tell him the secondary, and then they have to go back and "Oh, this is kind of where it started. This is--" So that doctor is always taking these symptoms like puzzle pieces, trying to take and connect them. And when the puzzle starts to form, the doctor goes, with all their great training and understanding goes, "Oh, well, we probably are dealing with this."

M Mary Louder 06:23

Right. Right.

C

Carol Ritberger 06:26

So, and the thing that I've found all the years that I've been doing this and working with doctors, is, you know, by the Hippocratic Oath, they'd can't talk about being intuitive, but they are. Doctors are very intuitive. And, you know, it may be that symptoms line up and it's this, but something inside their gut says, "Well, maybe it's something else." And what do they do? They run test. And that's, that's how we come around. As a medical intuitive, what we do is we run tests, but it's more like we're throwing energy at that person's energy field, and seeing how it comes back to us. Does it come back strong? Does it come back diminished? Does it come back in a place where there's weakness? But so that's, that's just the difference. We just go from the inside and medicine goes from the outside. We both get the same place, inside goes outside, outside goes inside. It's just a different approach.

M

Mary Louder 07:21

Yeah. It's interesting, because you know, in medicine, we hear a lot, "Well, we have science, we have protocols, we have science. So, we must, you know, if you're 51, and your cholesterol is mildly elevated, and your blood pressure is mildly elevated, we must do this medication." And we find now that that's really driven by I call it healthcare and not medicine. Healthcare being the business part--insurances, which really lock decision-making down on physicians. And I would say more often than not, physicians are more frustrated now than they've ever been in their careers, because they're not allowed to explore, they're not allowed to figure out what's going on with the patient, because they have to turn around and justify, they have to turn around and get a prior authorization. And I'll tell you what, that becomes a stick in the spokes as it were.

C

Carol Ritberger 08:15

It does!

M

Mary Louder 08:16

And, you know, and it's not helping people, and people by and large, know that they've got something cooking. Patients do. They're like, Something's just not right.

C

Carol Ritberger 08:28

Well, that's, that's what takes them to doctors. And, and, you know, the thing that I've found working with doctors, because I'm not anti-medicine, I'm not anti-doctor at all, with the work that I do, is that you're right, doctors are more frustrated than ever, because the most--as the ones that I work with keep saying to me, the one thing that's the most frustrating with them is that they don't have the time to really talk to someone. They don't have the time because it's like in the system, it's like, okay, well, you've got five minutes here, and then you've got to go over here and you've got eight rooms going. And, and so they're constantly bouncing. And, and again, they're very trained, they're very skilled from that formal part of it. But they just want to

talk to us, and they want us to talk to them. You know, so many times I, you know, I have one doctor that I work with also. And he says, "You know, Carol, if someone comes in with their list of questions on a piece of paper, I'm probably, I just want to turn around and walk out of the room." And I said to him, I said, "Well, why is that?" and he goes, because on the list, we can't get that human heart connection. I can't really feel what they're feeling. I can't really, I'm reading, "Okay, well, this is topic number one is I'm really feeling sluggish." Okay, and then topic number two is "and then my gut is off." Well, where's the connection there and doctors notice. So you're absolutely right. And with the health care and not medicine, you're absolutely right. It's a health care industry as a whole? It's just reached a place where it doesn't let a doctor be a doctor.

M Mary Louder 10:07

Right? I think by and large, every physician's a healer, I do I speak about physician--

C Carol Ritberger 10:11

Absolutely.

M Mary Louder 10:12

And, and I know when I was in training, I always got in trouble for chatting too much. I got in trouble in first grade for chatting too much. I mean, let's just start way back there. But in residency, they'd be like, "What are you doing? Why are you sitting down next to the patient? Why are you--" I said, "Well, because I'm asking them questions, and they're telling me stuff." And then I would come out, and then there would be what we call the pimping questions, meaning we're going to ask you, you know, residents, what about this, this and this and this? And I would go well, I think it's this. They go, how'd you come up with that? Well, I just asked them, and they told me.

C Carol Ritberger 10:49

Exactly. Hello!

M Mary Louder 10:53

You know, and so and then you chat too much. I'm like, well, didn't I come up with the answer? You know, didn't I find the diagnoses? Or, you know, why there was a subtlety to something that we were not quite seeing or, and, and, you know, and I just, I just, I'll just never forget that. It's just like, very good physician, but chats too much. And I'm like, it's my bread and butter, so I'm gonna figure out what's wrong with folks.

C Carol Ritberger 11:17

Well, fortunately, with a lot of the new pre-med approaches and everything that, you know, the young doctors in the pre-med are really learning that, you know, bedside manner really does have a lot of value, conversation has a lot of value. And I think that, you know, the good news is that's gonna be great for the patient. And it's gonna be the other good news is it's going to say to healthcare, you know what, we need to relook at this. We need to change.

M Mary Louder 11:42

Yeah, yeah, I think we definitely need a disruption to our system there for sure.

C Carol Ritberger 11:47

Exactly.

M Mary Louder 11:48

Yeah. Well, let's get a little background about you where you know where you came from? How did you get started as a medical, medical intuitive? And when did you first think, Hey, this is a thing for me.

C Carol Ritberger 12:03

Wow. All righty. Okay, so let's see. So I became a medical intuitive by dying. I actually, I actually died in 1981. And, and, you know, I talk to people, I'm going to kind of add some levity to this is that, you know, people will say, Well, I want to be a medical intuitive, do I need to die to do this? It's like, oh, no, please don't I just, I just had somewhere in my agreement, that fine print. But I was really, my background was in personality, behavioral psychology. And I was very, very research oriented, very grounded, and looking more at the workings of the brain, how to gather information, make decisions. And so there wasn't a lot of what I call that expanded perception. And then when I died, and I came back, and my sight had been altered. So probably what I need to briefly do is that when I was in that process of being on the other side, because I literally was, I remember that the soul itself does not become ill. It's always perfect. And that one of the things that was shared with me is that I was going to go back because my job was to look at how we diagnose and treat illness. And I didn't even know what that meant. They didn't say, Okay, you're going to wake up in the--when you go back and be a medical intuitive.

C Carol Ritberger 13:34

But I could see the human aura, I didn't even know what it was, I didn't even know how to spell it. And so I had to really start from scratch and start talking to people. And really just started putting the pieces together. And recognizing that this aura that I see around anything that has atoms and molecules in motion animals, plants, humans, that there's a story in that energy. And it was more the story in the energy than it was a fascination with seeing the aura, to really find out what was going on. So I just started taking all this color that I saw, I brought a bought a

box of 120 crayons and colors and drew a silhouette. So I could--fortunately I didn't walk around and would go in the grocery stores and say, Oh, by the way, could I color your aura? But it did, I started working with people and I started finding that diabetes had a color pattern. Specific types of cancer had a color pattern, the energy would be, flow differently. And I started creating a binder of all these beautiful illnesses that people brought to me so I could start to see patterns. And then I started connecting it to the human body, endocrine system first, organs and glands, skeletal, all the different systems that we have in the body. And I started connecting, if I see, for example, like diabetes, it will show up, we think it'd be the pancreas. Well, it also shows up in the thyroid. So I started just connecting the dots and things like that.

C Carol Ritberger 15:16

So that's, that was the path. And I just truly was resistance to it because I didn't know what I was supposed to do with it. I'm not a doctor. And I certainly can't diagnose. And I certainly don't want to say something that's going to create alarm in people. So I learned a lot of ethics along with it. A lot of respect and integrity with it. And then wonderful Carolyn Myss and Norman Shealy came along, and Carolyn called herself a medical intuitive. And I watched, listened to one of her interviews with Louise and I thought, well, dang, that's who I am. And so that's, I do-- I do that! So that's how that's how it started. But it's all just curiosity, connecting dots, and putting it into the human body for what the energy tells us. So that's kind of the way that it goes.

M Mary Louder 16:13

Okay, that's fantastic. That's amazing. I didn't know that you could see all those color patterns. I did not understand that. So

C Carol Ritberger 16:21

I'm really a lot of fun to take somewhere. It's like, oh, my gosh, that woman is squeezing that tomato over there. And it's not the tomatoes energy. It's the, her energy's like, Are you ripe, are you ripe? Anyway. So there's a lot of humor to it also.

M Mary Louder 16:37

We can dress you up, I'm not sure we can take you out, then is the sounds of that one.

C Carol Ritberger 16:41

That's where that's where the integrity part comes in. Like you don't walk up and say, Oh, by the way, we've got a little bit of dark color in your aura over here. You just--you just don't do that.

M Mary Louder 16:51

Mary Louder 16:51

Right, right. Yeah, certainly. You turn that off. Yeah. Now, you mentioned Louise Hay. I think you said Louise.

C Carol Ritberger 16:58

Yeah.

M Mary Louder 16:59

So she was the founder of Hay House Publishing, right?

C Carol Ritberger 17:04

Correct. And Hay House, she's--I was one of the first eight authors that I was very blessed to be with. She has Hay House, a publishing company. And so, and she herself very intuitive. And she had heard about me, and was interested and sent Reid Tracy, the CEO. He wasn't CEO at the time to come and meet me. And we had lunch. And he said, Louise wants to publish your book. And I said, "I don't have one." He goes, "Well, I think you'd better get started writing." So, then I had the pleasure to meet her, and she was fascinated. And she before we met, she asked me if I'd bring my crayons and my silhouette and color her. And it was just delightful. So that's how she found--she found me. I'm one of these blessed authors that she came after me and said, let's write a book.

M Mary Louder 17:58

Yeah. Oh, that's fascinating. Yeah. She's left such an amazing legacy, hasn't she?

C Carol Ritberger 18:04

She has, she really has taken the self-help approach, and invited a lot of different very both skilled academically and intuitive people together, to give them a forum to be able to share their message and to share what they do. And it's just amazing the legacy that she's left and what Hay House even does till today. In today's world.

M Mary Louder 18:36

Yeah. So with what you do as a medical intuitive, what do you see your--the goal of your work, kind of globally, and then also for the individual?

C Carol Ritberger 18:46

Well, the real part of my work that seems, that I want to be the foundation is I want to be a part

of the preventative process. I want to be able to, with my personality work, share with someone how they're neurologically hardwired from birth to gather information, make decisions, and to help them understand that when we make decisions out of that inherent neurology, we're going to get stress. And when we get stressed, it's going to show up in specific places. When things eat at us in the metaphor, it's going to show up in the digestive system. And so I started putting all this together, but it's really preventative. It says, Okay, let's take and in fact, it's a lot like you're program, Mary. In the fact that it's really kind of a, it's a preventative approach that says, "Hey, let's look at who you are, in that foundational part, and let's learn to work within that." And when we work within that, then we don't have to be in this mental angst and fear about when the next shoe's gonna drop.

M

Mary Louder 19:59

Foreboding joy is what that is.

C

Carol Ritberger 20:01

Absolutely. So that's really the purpose of it. You know, and again, it's a medical intuitive I read on all levels, I happen to connect with someone's soul--that's that perfect part of us. And then that leads me. Where a physician comes from the outer, the body, and works toward the soul, which they do--sometimes they don't get there; sometimes I don't get to the body. But it's really a preventative process. That's what I really hope my work to be.

M

Mary Louder 20:33

Yeah, yeah, that's good. So and then the individual gains what from these sessions? Do you feel that it's a--puts them at ease, it gives them insight, it's like the "aha" moments or connecting the dots? What do you see with that?

C

Carol Ritberger 20:50

Well, from my perspective, it gives them a whole picture, a complete picture. And the wonderful thing about healing is, is that yes, you can heal on a physical level through medicine, food, movement, water, whatever it may be. But you can also heal on an emotional level. So if we have trauma or generational issues, ancestral things that we're carrying, if you have insight into that, that's another tool in your toolbox for healing. If you understand the mental patterns, so for example, if you make decisions based on that part being--being the guide, where it needs to feel right, and you're making them logically, there's going to be an outcome of that. And so by giving someone a whole picture, what I've learned over all these years is, is that the individual can choose where they want to heal. Where can they focus on? Where do they believe they have the greatest power? Where can they feel with absolute certainty, if they do this, it's going to help? And a lot of times we find--and as a doctor, you understand this--we're dealing with the physical, but it keeps coming back and it keeps coming back, kind of a reoccurrence. So if someone says, Okay, well, this is maybe an emotional pattern, or trauma, or

driven by guilt. And it's like, okay, well, what do I need to change there? So the beauty of the, beauty of the perfection of who we are, is we can heal wherever we believe we can heal. And if we start there, then everything responds favorably.

M

Mary Louder 22:28

Yes. I think that's an interesting point about healing wherever we are. So as an osteopath, we learned that the body has the intuitive healing capacity, that's one of our tenets, right? And I, I, I took that tenet to heart at the very beginning. And now when I look at that, and look at trauma work that I do, and bring the emotions into chronic illness, I've learned that because with trauma or anything that's overwhelming, we tend to separate or dissociate, because that's the safest thing to do. We dissociate enough, then we're off into an addiction, because that's a habit that keeps us tethered. But then we've got this tether back to ourselves, that allows us to stay on planet earth. Because if that tether was cut, and we're so dissociated, we're gone. Right? On so many different levels, whether it's a a psychic level, an emotional, mental health level, or even leaving the planet, right? So I look at that, it caused me even look at addiction differently. It's like, well, thank God that kept you here. You know, and now let's look at some of those patterns around that and continue to bring more connections, self care and connection, where you connect or reconnect with yourself. And I think it's the safest place to be is connected. Then we present to the nervous system, the autonomic nervous system, the key components of healing, and then it just heals because it has the inherent capacity.

C

Carol Ritberger 24:01

Absolutely.

M

Mary Louder 24:02

So we're not responsible, I've changed a big thought here. I'm not responsible for my healing to the extent that if I know how to present certain things to the nervous system, it does its job. Like, you cut your finger, and I'm like, Well, I'm sorry, I can't come out till Tuesday, cuz I'm sitting around waiting for the edges to come together. I mean, we just don't do that. I mean, we might give it a wash, maybe a little ointment and a band-aid to bring the edges together. But the body knows how to inherently do that.

C

Carol Ritberger 24:33

Absolutely. And it's always healing. The body is always healing. And it isn't when you're asleep. And it isn't when you're just awake. It's just, it's designed energetically and in the perfection of its physical design to always be healing.

M

Mary Louder 24:49

Yeah, yeah. And so we know we get those then we're able to get that connection back through, you know, to continue to decrease that dissociation till you're associated back, till you're reconnected.

reconnected.

C Carol Ritberger 25:02

Well, and the thing, yeah, and the thing with addiction is that, like you said, it does, strangely to say this is, it does serve us well, because it keeps us grounded. But it also limits, we know that. But from the standpoint of the mind, the mind's job, the brain's job is to keep the body alive. Yeah, the mind's job is to keep the mind and the heart and the soul alive. And when you talked about disassociation and trauma is that what'll happen is the mind takes that trauma and puts it in its own compartment. And because of the emotional charge with the trauma, and the chemistry changes that happen in the body, when that trauma is triggered, the mind then starts to protect that at the expense of healing. It's like this is more important. This is what's going to make you survive. And it doesn't really even want to let go a little bit. So you're absolutely so accurate from the standpoint, we just have to take a strand of it and say, okay, of the addiction, let's work on that strand. And then that strand gets removed, and now that compartments shrinks, and the mind is less inclined to keep clinging on to it. And pretty soon, it's interesting, because doing addiction work, is that people, it's almost like they wake up one day, and recognize that they no longer have the addiction, not for that day, but maybe three weeks back or six months back, that they've been, inching away from all the emotions in that meantime, like you said, the body is always healing. Every time we take--every time we're even willing to open up that compartment, the body goes, Okay, let's do it.

M Mary Louder 26:52

Right. Yeah. It's just absolutely what it's designed to do.

C Carol Ritberger 26:56

Exactly. Yes. We're just perfect. Absolutely perfect imperfection.

M Mary Louder 27:02

Exactly. Exactly. And so it's been fun, because as I've introduced that concept to folks, their healing has gone much quicker.

C Carol Ritberger 27:11

It is.

M Mary Louder 27:12

Yeah. And it's just like, and I don't know if I would say they get out of their own way, but they just have an awareness of it and they're not opposed. And also the pressure's off for them to fix themselves, which by and large, we can't.

C

Carol Ritberger 27:27

Oh, golly. Absolutely. In fact, the one of the things that is the most difficult in the healing process is the mind's need to fix. Whenever it fixes, it fixates on fixing, therefore it fixates more on the fixing. And it's it's like a dog chasing its tail. And, and like you say, when you give somebody, the difference is, is that, and this is one of the things I'm very excited about with working with you, and even medicine--is that medicine is changing from the process and people's mind, you come to me, I'm going to fix you. What medicine is doing is saying, You come to me, I'm going to offer you these things. But you've got to take the pill, you've got to take the medication, you've got to be willing to engage in it. Same thing at a psychological part. Self-healing, the person takes responsibility for themselves, and they jump in wherever they can, doing whatever they can feeling good about what they do, and we heal.

M

Mary Louder 28:26

Right. Exactly. Exactly. So you know, you mentioned the colors. And you mentioned the neurology. You put those together for personalities, because the personalities you give colors to, right, isn't that part of the work?

C

Carol Ritberger 28:42

It does.

M

Mary Louder 28:42

Yeah. So can you explain how you and how you develop the what you developed for personality colors, because that's one of your signature programs, signature teachings that you bring and signature giftings that you bring to the world. So can you share a little bit about that, that program?

C

Carol Ritberger 29:03

I can. I started out working with assessments when I first got interested in personality, in assessments that basically used words or letters, which are great, but people can't remember them. And I was always fascinated by Max LÃ¼scher's work on color and his study of the psychology of color and how it affects the physical body. And for example, a real vital red energizes, a brown red diminishes. So I went in and I said, "Okay, there's got to be something that's going to be simple enough that people can remember who they are." And what I'm talking about, gathering information, making decisions--that they can remember 30 days after they take the assessment. So in comes color. And then I found that that was just an easy way for even people to talk about color for example, in my family, my father was very controlling in my world was a red, very controlling personality. My mother was a very green, very spiritual, right-brain personality, very open. I have a red sister, I have a green brother. And my personality is a yellow, which means that I'm all over the place, neurologically, I have to literally

jump around from one hemisphere to the other, the frontal lobes, the temporal lobes and all over everywhere. And when I started doing the personality work, I started realizing why we don't feel like we belong or fit. So I just took all of this and said, "Okay, let's come up with an easy model color." Four colors, all it explains is neurology, coping colors are part of it if the person wants to know, but what it does, it's a common ground of communication without struggle and tension.

M Mary Louder 30:52

Okay, cool. Now, you've sent me the information on this, I have yet to do this. So I will report back. And whatever my color is, thanks you now, for whatever I am, I don't know. Yeah.

C Carol Ritberger 31:05

Well, one of the things I'm gonna say something funny, people say to me, So Carol, how do you know my color? Well, your neurology, your personality color, is a predominant color in your field. And so when I walk up to somebody, you know, I can start because of my background, I can start talking in their language, because the thing with communication is, it's not their job to meet us and our communication style. It's ours to meet them. So then their aura goes, Okay, well, they're this color personality. It's like, okay, well, let's talk about this. And there's a common bond, a common connection that takes place. And then what I did is I started taking all this information on the aura and started doing neurology and looking at patterns and how does that affect the aura and the organs and glands, and I just overlay overlay overlay. That's my personality. My personality is you just do overlays.

M Mary Louder 31:58

Okay, gotcha. It sounds kind of similar, actually, to me, but we'll--

C Carol Ritberger 32:04

It does!

M Mary Louder 32:07

Stay tuned, but I'm, I think I'm leaning--

C Carol Ritberger 32:08

That one of the reasons that we just are kind of like, we get together and talk about chatting. Oh, my goodness. Hello.

M Mary Louder 32:15

M Mary Louder 32:15

I know. So sounds like I'm leaning yellow. But I'll stay tuned, stay tuned, stay tuned.

M Mary Louder 32:22

That's great. Well, a little bit, you know about one of the things in, as this is our inaugural podcast on Cosmic Health and Wellness, a little bit about my medical intuitive background. I did--my--I had formal training. I mean, I always was intuitive. And it typically got me in trouble. How so because my mouth got me in trouble. I would say what I thought. It wasn't despairingly--it wasn't disparagingly rather, it wasn't harmful or hurtful. I just said what I saw. And it was always a different perspective. And I was like, Oh, what are you going to come up with now? You know, and so I had a, that was very, that took me a long time to really feel comfortable with, honestly. And then when, you know, and I had some structured religion in my life that I think, you know, I'm glad I had it, but it also somewhat derailed me from my intuition a bit.

M Mary Louder 33:24

And then, you know, about probably five, six years ago, we were living just outside of Boulder, Colorado. And of course, Boulder is just a lovely place right up against the flatiron mountains. There is a place I found called Psychic Horizon Center. And I went in and had a reading, because they would do those on like Wednesday nights. And so I went after work and just sat and they, I'm like, well they just kind of read my mail. And I thought, this is fascinating. And I said, Well, can I learn to do that? And they said, absolutely. So I did a year, year-and-a-half-long course, and you know, got certified or certifiable, however we want to say it, and, you know, and became, you know, into the clairvoyant world. And I found that, as you said, I did it all the time in medicine anyway. And I just didn't know that that's what I was doing. You know, because it was always deeply listening. And I have above my office here, a sign that says, "listen to the patient, they will tell you what's wrong with them." And that came from Sir William Osler, who was one of the fathers of modern medicine. He was a British physician and surgeon. And that has never failed me. And then the other thing was, when in doubt, go back and reexamine the patient. What are you missing? What are you not finding, seeing, hearing? And those two things then have led me in, you know, 30 years of my career, having super high accuracy. I'm often the physician people come to because Dr. Louder will figure it out, you know, she's kind of like, let's get Mikey, she'll you know, she'll do it, you know, he'll like it, let's get Mary, she'll figure it out. And, but that's actually true. So it's the deep listening.

M Mary Louder 35:16

And I found that the subtleties of the diagnosis are following my gut feeling. And then bringing in the emotional component, because what I've come to realize that the emotions are as much of a symptom and a vital sign. And that the language around emotions is so important. And BrenÅ© Brown has done beautiful work on this and her research on the University of Houston, that by and large, we know three emotions. And she, in her book Atlas of the Heart, talks about 87 different emotions. And I find the more I can have a rich language around emotion, the more I can tie it in to physical symptoms. And the more I can find it in the body in different areas: in the heart center, the solar plexus, which are all different chakras and energy areas. I can look at people's auras, I can look at their energy fields, I can see where there's like gaps, or I can

see where there's blanks or things just missing. And it looks to me just kind of like this disconnect, it kind of just goes fuzzy. And then I can see where they're disconnected from themselves. And I can see if they're really disconnected or kind of disconnected, or if they're trying to just get in focus, or if there's like, literally, they're beside themselves. And then I just begin to reintegrate that and figure the safest place for them to be is back together. Because that's where the healing occurs.

M

Mary Louder 36:59

And so then I just kind of work with them to get them there, whether it's during the visit, that, you know, that could be longer, because I always take longer visits now, or if that's over a process of time, because sometimes you go through layers, like the layers of an onion, or you dig back to a particular traumatic event that seemed to trigger so many other things with it. And then I see the symptom kind of tagged on or as we call it, in some of the tech world, bolted on. It's like, oh, that's where that stuff comes in. Right. And so it's a combination of seeing, seeing them, seeing different things bolted, seeing, maybe a word, maybe hearing a thought. And it's not like, it's not really weird, because I'm just sitting there asking them questions. And, and I found that that has how, you know how my intuition has really manifested and grown.

M

Mary Louder 38:04

And then when people come, especially with second opinions, you know, what's really going on? We can't really find the clarity in this situation. And I would say, that's one thing that I would, you know, probably I would use the word excel in, the clarity. What has to come first, what do we have to do? What, what how is the body organized? What is the body wanting to do? What are--you know, and then of course, their choices, too. What do you want to do? How do you want to approach this? But, you know, I've found where then just like a key phrase, or a key emotion just opens them up, and it's just like the floodgates, you know, in a good way.

C

Carol Ritberger 38:44

Absolutely.

M

Mary Louder 38:45

Yeah. And so, you know, I--and what I did now, at the end of 2022, is I left the clinic permanently to do online work, so I can do this work, because this is my life's work. Period. You know, and, you know, everything I've done up to now is exactly that, everything I've done up to now. And then I want to put this in place so folks can really have an opportunity to work together in a deeper level of communication and connection.

C

Carol Ritberger 39:19

Well, and that's really the self healing model right there, is the fact that you create that connection, and it has a, an integrity about it, that is such that it's hard to put in--an integrity about it where it isn't where someone's coming in and saying fix me, or you don't feel the

about it where it isn't where someone's coming in and saying fix me, or you don't feel the responsibility as a doctor being held accountable if they don't do what they want--that they need to do and, and it just it just opens up. It's um, it's a heart connection, is the easiest way to say it. It's a heart connection and the heart is, speaks truth and it opens that vulnerability up without feeling afraid that it's going to be used against us and, and that's, that's an integral part of healing. And it's an integral part, it's a definite part that's needed from the standpoint that if we're really going to let go of this compartment that this mind started and most of the things that we have in common, the compartments, like you said, Mary are very, they started a long time ago. And the mind is really lazy. It--I mean, it's, it's has a job, but it's lazy. So if we experienced at that time, and that trauma, we experienced fear, then anytime we experience fear to that degree, it's like, the mind goes out and goes, Okay, well, you go in this compartment, oh, well, you go in this compartment, oh, you don't fit in this compartment.

C

Carol Ritberger 40:47

And what it does is it takes and it builds, like the--you said, the onion, it builds layer, and layer, and layer, and layer. And we're so used to dealing with the outer layers, that in the work that you do, and that an intuitive does, and that you do is that we go in we say okay, so we can do this, it has great value to do all these layers. But if we could just go to the center and engage that person to talk from their heart, they're going to tell us. And more importantly, by saying it, they're going to tell themselves. And they can hear it themselves, and it's gonna be like, Oh! Okay. And, and now it's like this epiphany, these, like, in my world, it's like all the angels start to sing in the room and all these different things. And, and they go like, and there's this switch that flips in the physical body, in the nervous system, that instantly changes how we breathe, our heart rate, the flow of the different, you know, different hormones that we have. And everything goes into a state of balance.

M

Mary Louder 41:52

Yes, it does. Exactly. Exactly. Yeah, it's just wonderful.

C

Carol Ritberger 41:57

It is. And the real wonderful part for I know, for me, and I know, with working with you is, is that we get to witness this. We not only get to have the privilege of being a part of the journey, but we have the privilege of being able to witness those "aha's" within them. And--and to celebrate with them. Those moments, yes.

M

Mary Louder 42:24

But for--it's an absolute privilege, to have a front row seat on someone's life like that, it's just and I, I hold it as sacred. I remember when we learned about the doctor-patient relationship, the first quarter of her semester of medical school, I'm like, sacred. Stamp it with a capital S. Absolutely, with truth, with transparency. And, you know, I treat that visit as something of--with utmost care. Absolutely.

C Carol Ritberger 42:54

Yeah, absolutely. And, you know, and we're, you know, sadly to say, but in our human conditioning, we, we remember that until we're about three and four years old. And then we forget, and we forget that there's this connection that's deeper than anything we can ever put into words. And so, but it is, it's a privilege to be able to do that and to, you know, then to be able to experience their excitement and those wins that they get along the way. And, and that is that is self healing. That really is the whole model for self-healing.

M Mary Louder 43:31

Yes. Which, you know, secret, all healing is self-healing.

C Carol Ritberger 43:39

If you go to someone else, they're gonna try to fix you, doesn't work.

M Mary Louder 43:42

Yeah, exactly. The other direction. Keep your hand on your wallet. That's the thing, I said to someone, I said, you know, it's kind of a, I mean, a bit of a catch-22, the business model. I mean, they get well really quickly. And no, I mean, but the ethics of that is right. And it's, it's absolutely the thing to do.

C Carol Ritberger 44:06

Like that reminds me of a story when I was in college, and I was in my first week in psych--my basic psychology, training, the professor was talking everything and I just kind of, like you, I raised my hand. And I said, so what you're saying is that people go into the field of psychology, because if they, they think that if they help someone else, they'll help themselves. He looked at me and he cocked his head. He goes, I'm not sure you've got this concept down right, Carol. And then I said to him, and then the second thing is, is that our job as psychologist is to help them get better. So does that take years, so we have the income, or does it happen in a month, and we don't have the income, and the business model, are we always going to be looking for new clients? And he looked at me goes you know, Carol, I'm not sure this is your field.

M Mary Louder 45:02

I would come from the other side, I would say, I think you nailed it, and this is your field. And yeah, you're a disrupter. Thank you. Next question.

C Carol Ritberger 45:14

Yeah. So I decided that I--because I was going to do marriage and family therapy, and I decided

that it's, I probably don't want to do--so I went into organizational behavioral psychology because it was easier. In the business world everything's dysfunctional and everybody's arm's length. And we can do it.

M Mary Louder 45:30

Right. That's exactly right. And then if it's their organization that exactly your organization on that. Yeah, for sure. All right, well, what we're gonna do, we're gonna wind up this first episode. And we're gonna come back and we're gonna dig into a little more things. So this is welcoming both of us here as co-creators of Cosmic Health and Wellness. Stay tuned, guys for the next podcast coming up. Make sure you check out the website. Carol's--what's your website that people can go to?

C Carol Ritberger 46:07

www.ritberger.com. May I end with one thing, also Mary that I have to say and I would like everyone to hear is that when you are your authentic self, being your authentic self, you have the humor and you have the laughter and there's a element of joyfulness even when we're trying to solve a problem. And that is something that I've always enjoyed with you and I want to share with others is if you don't laugh, you're too serious.

M Mary Louder 46:40

Yes. I think that's true. Yes, nothing is quite that painful.

C Carol Ritberger 46:44

Thank you for letting me say that.

M Mary Louder 46:46

Yes, absolutely. Absolutely. Well, stay tuned guys. We'll be back with our next episode. Thanks for listening.