

# CosmicCardio2

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## SUMMARY KEYWORDS

inflammation, work, body, immune system, pattern, cardiovascular disease, heart, personality, cholesterol, mind, feeling, talking, plaque, eat, carol, good, liver, arteries, put, emotion

## SPEAKERS

Carol Ritberger, Mary Louder

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**M** Mary Louder 00:02

Hi, welcome listeners to the Since You Put It That Way podcast, I'm Dr. Mary Louder, your host, and we are co-hosted by and with Dr. Carol Ritberger, who has her doctorate in theology, esoteric philosophy, and hermetic sciences. She also is an author and innovative leader in the fields of personality, behavioral psychology, and behavioral medicine. That's key because today we're gonna be talking about inflammatory aspects of cardiovascular disease. We're looking at this from the cosmic or holistic health and wellness. And we're gonna delve into personalities around cardiovascular disease. So her work that she's done for decades is going to be very important. We're glad you're here, sit back, listen, and enjoy. Hi, Carol, how are you?

**C** Carol Ritberger 00:49

I'm good. Thanks for having me back.

**M** Mary Louder 00:51

Yes, literally, we can say it's been a minute. And it really has been.

**C** Carol Ritberger 00:59

Sometimes when we're in conversations, it's like an eternity. It's so cool, fabulous.

**M** Mary Louder 01:05

Exactly. And so we're continuing on this journey of cardiovascular disease. And, you know, we've got our own curiosity piqued quite significantly. And we're going to take a foray now into concepts of inflammation, because we did a long discussion on cholesterol, and we decided,

yes. That's the answer. So if you want the question of what the answer is, then go back and listen. So, but cholesterol, the answer's yes. So now as we look at inflammation moving forward, we've got different types of inflammation, we've got inflammation within the arteries. And remember, cardiovascular disease is always in the arteries, not in the veins. And if you want to know why, I'm going to refer you back to the very first podcasts on cholesterol. So you've got it within the arteries, the lining, we use the term lumen, that's just a fancy word for lining. The endothelium, actually, we're finding is an endocrine organ that has responses to messages given to it. And that's where that low density lipoprotein likes to gather. And it finds its way in and through the cells and through pockets and micro tears, and then if everything's good, it goes away. Otherwise, it stays and gathers more, and recruits more friends. Therefore, plaque builds up. So that's one end of the continuum.

M

Mary Louder 02:32

And then you also in addition to that inflammation, you have whole-body inflammation. That's the stuff where the liver, the gut, the spleen, pituitary, pineal--Carol will bring in the other glands--But that's where all that action is taking place. And we've got that concept of what we're learning about overall, called the microbiome. The microbiome is the bacteria that we carry around, that bacteria we carry around that helps us digest. But that bacteria that we carry around which we call the good guys, or the probiotics within our system, literally has its own DNA, it literally is this massive thing, and it has more cells than our whole body together, has more cells than what our entire body has. Yes, I said that twice, because I wanted you to hear that again. And so when that interacts with our body, through the messengers of our genes, our genome, our metabolism, or our metabolome, our cardiovascular syndrome, all these things begin to take place in a more global, dare I say cosmic, fashion. So here's where the liver is a key player and we had some discussion, previously, you and I did, Carol, about the liver. And then the small intestine is the new frontier in cholesterol management.

M

Mary Louder 03:56

So what we're finding is not only does the liver make cholesterol, but the small intestine has a role in absorbing cholesterol from foods we eat. And it can be good cholesterol from good healthy foods. But some people absorbed so much cholesterol, their cholesterol goes up. So a statin drug would not even be the right drug for them if we were prescribing something because it doesn't block the absorption, a different class of medication blocks the absorption, and yet they're working on. I've got a study here, you know, I'm always going to be driven by the research here, Dr. William Insull, who he wrote an article on the pathology of atherosclerosis, which is the plaque, plaque development and plaque response to medical treatment. And what he puts down is that our plaques develop over a course of 50 years, five-zero. 50 years, beginning in early teenage years. And it has a combination of lipid retention, what we're carrying and bringing in, the oxidation, or what's happening to that lipid or cholesterol, and then components of chronic inflammation. And this also then goes to susceptible sites within the walls of the major arteries. The fatty streaks which we talked about just a minute ago, which is the LDL cells, low density lipoproteins going in turning into fibrous plaques, and under further attack, or further pressure from the oxidation or inflammation become vulnerable plaques. If they break off, they become a thrombosis, and cause ischemic or they, they block the arteries and cause a heart attack or stroke, or these plaques calcify, and

over time, they cause the arteries' diameter to shrink, or that gets stenotic, and we have ischemia or lack of blood flow. So that tends to be the two places how this goes. So the question I have for you, Carol, cosmically, why are we so inflamed?

**C** Carol Ritberger 06:13

Well, very simply, we're not being who we really are. We're living more of our conditioning. We're living more of what's expected, we're, and this isn't a judgement, when I say this, even to my clients, is that we're living what other people expect us to be. We're doing what the demands are asking us to be. And when I say we're not really living who we are, that isn't as big as it sounds in magnitude, it's just that we're not taking the time, even on a daily basis, to do the things that connects us with us. And those are the things that gets us out of that stress, gets us out of the metaphor of things eating at us, around turning against ourselves, and, and having higher expectations. Those are the things that we're conditioned to basically drive our day, and how we perceive ourselves. And really just kind of like a spoonful of sugar, just a little bit of time with yourself, doing something, or doing nothing, is a great healer of the inflammation. Because what the mind is doing is constantly saying to the brain, we have a problem, we have a problem, we have a problem. The mind doesn't know whether the problem is physical or psychological or emotional or stress, whatever it is, but it's a constant drip of that, we have a problem, we have a problem.

**C** Carol Ritberger 07:35

The brain's job is to see that the human body survives. The mind's job is to see that we psychologically survive. So if the mind is constantly fixated on our health, or well being, the talks to the brain, the brain turns to the immune system and says, mind says we've got a problem. I don't know where it is, I don't know what it is, I don't know how bad it is. So immune system, this is your job, go out there and find it. When you identify it, create inflammation as a part of the healing. It's like, it's not working, isolate it, and then go somewhere else. One of the things that I found is very interesting is the immune system has memory. And a lot of the facets that we have an inflammation is that memory pattern. It remembers, of course, our DNA. So if we have propensity to something that's gonna be the first place the immune system is going to go, if it's thyroid disease within our family dynamics, it's gonna go to the thyroid. It's gonna look at the thyroid, say, "Hey, are you okay?" Thyroid goes, "Eh, I'm a little low today," boom, it'll start trying to protect it. But it doesn't get the memo to turn off. The second thing is, is that the immune system remembers the chemistry--chemical--chemistry changes associated with trauma.

**C** Carol Ritberger 08:59

And so if we carry that trauma in our gut, or we--around, we talked about in the other podcasts about integrity. If we don't hold ourselves in the highest integrity, then what is the immune system gonna do? It's gonna go to the liver, if we let things eat at us, where it's gonna go? The stomach, if we allow emotions to feed on that it's gonna go small intestines, if we feed on ourselves, because we somehow it didn't, it's going to be in the spleen. So this immune system is running around always trying to figure out what's going on, and the mind's just giving this

constant fixation. Fix me, fix me, fix me, fix me, the immune system is doing that. What do we have? We have chronic inflammation. I know that's a simple way to say it. But we're inflamed because psychologically, externally, we're being bombarded.

M Mary Louder 09:55

It almost, it's funny how you put it, it almost feels like the immune system is wanting to be relatively entitled.

C Carol Ritberger 10:04

It is.

M Mary Louder 10:04

Yeah. I mean that just, that--that's just what dropped in when you were talking about this, like, well, I'm entitled, I'm the immune system. I have the memory. But at the same time, the need for the immune system is quiet. The need for the immune system is balance.

C Carol Ritberger 10:26

Absolutely. And the the need of the immune system is to literally be transported via blood, hormones that are in that blood, to be transported to the area that it needs to look at.

M Mary Louder 10:41

Yeah.

C Carol Ritberger 10:42

And it quietly does its job, when it gets confused, are those patterns, those traumas, those emotional reactions? And again, the immune system doesn't know what the trauma was, but it knows that if you get frustrated, so for example, if you get frustrated with not feeling heard, or being misunderstood, then that's going to go in. And when that pattern comes up, you say something and everybody looks at you like you didn't even say anything or you feel misunderstood, and then you have to defend yourself. What is that gonna do? Metaphorically, that's going to ask that immune system. Okay, you're here, stay on task. Be sure this isn't going to become a problem.

M Mary Louder 11:27

Yeah, you're overreacting, essentially.



Carol Ritberger 11:30

That's exactly right. And that's what your immune system is doing. That is the source of chronic inflammation. Inflammation is very healthy.



Mary Louder 11:38

Yes. I agree. Because you need inflammation to heal.



Carol Ritberger 11:43

Chronic inflammation destroys.



Mary Louder 11:44

Yeah, right. Yeah. Well, interesting, because you need the concept of, of the inflammation, the concept of the immune system wanting quiet. And, you know, we spend a lot of time I'm just thinking of how much money we spend trying to rejuvenate our body. When I submit, we might be able to, from an inflammatory state, find something that doesn't cost much money to not inflame, for example, going outside, buying a nice anti gravity chair, those ones that recline anywhere from 40, 50, 60, 80, 100, whatever you want to spend, but that's not a lot of money over time. And then sitting under a tree. Getting in con--



Carol Ritberger 12:33

Creativity.



Mary Louder 12:33

Yeah.



Carol Ritberger 12:34

Or creativity.



Mary Louder 12:35

Yeah, connection with nature. Allowing the i-- literally, the ions of the trees, the ions of the, of the ferns, the ions of the pines, the ions of, you know, all that's around you just getting on your skin, and even doing a visualization of seeing that assist the immune system to be calm.

C Carol Ritberger 13:01

Absolutely. It's nourishing, it's giving us the things that are important to our well being: the vitamin D, very important to our well being. Very important for thyroid health, very important for immune system health, liver health, it's just--it's an important quality about how we're designed and we get that through our skin. We can take supplements, but we basically get it through our skin.

M Mary Louder 13:32

Yes. And vitamin D, by the way, is actually a hormone. Because--

C Carol Ritberger 13:36

Sorry, thank you.

M Mary Louder 13:37

Yeah, that's okay. No, I'm not trying to correct you. I'm trying to--

C Carol Ritberger 13:39

No, I know that.

M Mary Louder 13:41

By the way, Carol.

C Carol Ritberger 13:43

Yeah. No, no, no, no, no, no, sorry. I put it--I put it into my--the hormone thing--yeah. Got it.

M Mary Louder 13:49

So, yeah, no, it's--so, because a hormone is a fat-soluble molecule that takes a message from point A to point B. And so somehow, they--the hormone line must have been closed the day they named this thing because it clearly is a fat-soluble molecule that takes a message from A to B. And so it is, and so, and I think that is very, you know, very important for us to know and if you don't get enough sun exposure, well, what do we do we put sunscreen on, you know, yes, okay, I'm a doctor, yes, I'm supposed to, you know, follow guidelines. Note to self, while others listen, I'm not a big fan of sunscreen because it blocks the vitamin D absorption. And so, and it's often filled with toxins and not natural things which are absorbed into the skin and, and,

and, skin cancers are on the rise even when people use protection. So not a fan. I would rather let the body, you know, not have overexposure and I'd rather balance the inflammation, oxidation reduction, and really balance out the body's process overall, to stay as healthy as possible. And you know, we mentioned before about the body's inherent capacity to heal. And as an osteopath, we learned the concept of homeostasis. I'm not sure they teach that allopathically, which is the MD school, the osteopathic school that was the whole concept of it was that the body has the inherent capacity to heal, the structure and function are inherently related, and they work together to create harmony and homeostasis.

**C** Carol Ritberger 15:28

Absolutely. And always, always, every cell is programmed with that. Every essence of our brain is programmed with that. You know, when we look at the inflammation, we look at the psychological part, we look at the quality of the food, what do we eat? I mean, we, our body knows. If--so, if we crave something, that isn't our body talking, that's our mind going, Oh, you need this. If we were to take and sit, we've heard this before, food is the best medicine. If we were to sit and take something that we knew--a candy bar, and--I had a client that with--loved Bordeaux, she had type two diabetes, and the very first thing she said to me before we even got started, she says, Do not tell me. It's like, okay. Do not tell me to stop eating my candy. And it's like, all righty. So then I said to her, well then, okay, so how about if we negotiate this, and how about if we stop eating a box of Bordeaux candies every day? And she goes, Oh, okay. Well, how did you know that? And I said, Well, what if you had a bite? What if you had a bite? So I think again, if we ask our body do you need that Bordeaux candy, the body is not going to--the body isn't going to go Oh, yeah, absolutely. I have to. It's gonna say no, a bite would do. Or you know what? I'm don't really need it. And it will tell us.

**M** Mary Louder 16:59

Yeah. If we're willing to listen.

**C** Carol Ritberger 17:03

If we're willing to listen, or we know how to listen. Stop and think about that, Mary, we're not really--I think it's changing, which is exciting, but we're not really told how to eat. We have the food groups, which I think was a great way for us to start looking at it, from that food pyramid. But our body knows what it needs. It knows what it wants--it doesn't, it doesn't want anything, it knows what it needs, the mind wants it. So I think when we look at information, food, psychological, creativity, I think that it's again, that whole cosmic global perspective.

**M** Mary Louder 17:38

Yeah. And bringing in the concept of the heart being sad, components of that feeling isolated, components of that feeling frustrated, you know, we would turn to a food that might be less healthy for comfort. Sat--something that's satisfying, something that has higher fat content, salt content, things like that. It certainly we know, if we look at you know, and I'm going to be doing a podcast regarding nutrigenomics and heart and cardiovascular but looking at what we

know for sure, the partially hydrogenated oils that are just basically, that's a skeleton, that's a solid structured skeleton that doesn't bend, and it can't bend and get through the membranes that the, by the way, that cholesterol makes, and it creates a lot of inflammation, just by the virtue of being in the body.

M

Mary Louder 18:34

And so we know we're insane with sugar. And it's interesting studies, I've been looking at research on food addiction. And, and, there are clearly some people when I look at their genome, I can tell that they're addicted to food. And it's usually flour and sugar. And if you take flour in its more pure form, it's a grain of, if we're talking wheat, it's a, you know, a kernel of wheat. If you take sugar, it could be a beet, it could be cane, it could be, you know, something else like that. But if you process it, you're intensifying that product, intensifying that component of the wheat into a flour, or that cane into a sugar, or that beet into a sugar. And what the body sees that as, that sees it as a drug. And it hits the receptors like a drug. So flour and sugar literally become like crack to the body. And some people have that wiring that--and I would, I'm finding that those are the folks that are saying things like well don't make me give up this. Don't you dare. You know, and don't you think--and I'm not going to be able to, I'm not gonna be able to do that. And I've literally had people quit doing the work because it's like, well, everything else has worked but we haven't given up flour or sugar. And your cholesterol is still high, your blood pressure is still high, you're still on three medications, we have to kind of make an adjustment, we have to do something, why don't we try that? They go, I can't. And that's, you know.

M

Mary Louder 20:18

And so then you know, my approach, if we look at that, from a cardiovascular standpoint, if it's affecting the inflammation, whether cholesterol is high, and they have changes in their arteries, or their blood pressure's high, and they're under stress, like, what beha--how is that behavior serving them? What has it done to support them thus far? What are they dealing with, that they needed that behavior to keep them connected, because that's the string between where they're dissociated from themselves, and yet connected, because that's the addiction that's holding them on the planet. And that's the addiction that's keeping them. And so I've begun to look at addiction on these concepts differently, as a behavior that's helped keep someone present on the planet, until they figure out how they can reconnect with themselves. And really what we're talking about is reconnecting to their heart. We're talking about reconnecting to their soul, and their heart coming together to lead them. So they're in that full integrity again.

C

Carol Ritberger 21:25

Exactly, exactly. A couple of things, is that, you know, the first thing I think is important is for us to recognize that we are emotional eaters. That doesn't mean that we have to be that. But if we acknowledge that we eat because we are emotionally soothing, then what the mind does is Okay, well, you've got it. And then the mind stops fixating, creating the chemistry changes that causes the cravings that go along with it. It's just, the mind is--it just moves on. So we, if we



acknowledge that, yes, as humans, we are emotional eaters, but we change the perception of that emotional eating as more of a self-nourishment, versus trying to avoid or to make things better, that addictive quality about it, then it changes the nature.

C

Carol Ritberger 22:20

And the other thing that I have found in the work as a medical intuitive is that food is so charged with guilt. So if we work to remove guilt from the food that we eat, so it's like, okay, the mind says, wow, you know, you really need to have a, you know, a soda and the body's like, Eh, I don't think so. And we the mind keeps at us, and at us, and at us, and at us, and we go and it's like, all the way over to the refrigerator, you know, I shouldn't have that soda, it's not gonna be good for me, it's not good for this. We're self talking that guilt constantly, we drink it, what does that do? That puts us at odds with ourselves in another metaphor of it. And our immune system is like, Okay, well, I'm gonna take care of it, you have that soda? So I'll go to your gut, and I'll, I'll do this. And I'll try to manage it and everything. And what do we do? We have that pattern that goes along with that guilt.

C

Carol Ritberger 23:10

Something else that I think that she said that was really important, was the fact of feeding the heart. And if we were to look at creativity, imagination, play, even self talk from a form of nourishment and food, we would not need a lot of the things that we're doing, we would not need to eat a lot of the things that we have. I do know from the work that I've worked with, and you, as well, in your work, I'm sure have found that there's just certain genetic predispositions to alcoholism or sugar or differences. And that can show up as a thyroid propensity or a diabetes propensity or whatever it may be. But there are genetic parts of it and I think that it's important that those are addressed. It's like, okay, you--this is part of who you are. And now you know this, now, let's make a choice. So, if it's part of your predisposition, and your mind is not going to let you off of it, then what can we do? What can we substitute? And again, I think the key of this is, it involves the person. They make the choice. So now they're not feeling guilty because my doctor told me this and I'm not doing it, so I'm not going to talk to my doctor anymore, because then I'm going to feel bad and maybe that doctor is going to scold me and-- in my world as an intuitive, inflammation is a reflection of the story "not good enough."

M

Mary Louder 24:49

Okay.

C

Carol Ritberger 24:53

It's that simple. Whether we want to say, not good enough, not pretty enough, not skinny enough, not smart and what--it doesn't make any difference. It's just not good enough. And what that does is it creates the body's immune system to always be on alert. It's always like, a thought comes in, it's like, oh, wow, look at that picture of that model, because she's so thin, she looks so good in that, I'm not good enough, boom. So the immune system comes in and starts attacking, instead of helping.

M Mary Louder 25:27  
Well, I can see that because what the immune system brings with it is more.

C Carol Ritberger 25:32  
Exactly.

M Mary Louder 25:33  
It brings more macrophages, more cytokines, more natural killer cells, more eosinophils, more basophils, it brings more to the party.

C Carol Ritberger 25:49  
And it knows in its dynamics, its creation, its anatomy, its DNA, it knows what it needs to do, how to do it, when to do it, and how much to do. And it is very quiet.

M Mary Louder 26:07  
So if we look at this, you know, and yeah, maybe we should recall this, rename this episode the rabbit hole, at this moment--I'm loving the rabbit hole!

C Carol Ritberger 26:19  
The Alice in Wonderland effect? Should we do that one too? But that would not be very politically--

M Mary Louder 26:25  
I think we're gonna rabbit hole this one, because thinking about this the genomics, the things that are passed down familial, if you look at familial cardiovascular disease, you're, we're explaining it right here cosmically. We are exonerating it holistically, that the patterns are passed down from father and mother to child, and then it's on the the genomic pattern, the genetics, the genomics, genomics is a study of the genes and what they do inside the body. So it's the influence of the environment on those genes that, that determine how the biochemistry functions.

C Carol Ritberger 27:05  
And when we're in the womb, we are--because we don't have our own kind of foundational work of how to live, we're kind of we're at this, how to survive on this earth. Our mother, or

work or how to, I'm gonna kind of woowoo at this--how to survive on this earth. Our mother, or our bodies are constantly responding to our mother's foods, desires, or cravings, or needs, or her fears or her insecurities. And we are chemically imprinting that into our body, but our body doesn't know that it isn't in alignment with us, it just, it's the gift of Mother, I have so many people say, oh my god, my mother just gifted me with all this. Yeah, she helped you survive.

M

Mary Louder 27:46

Yes, she did. So then, you know, and that's where then we've got some of the tools for healing of this. And so that would be like with my, the program that I developed, the Self-Care and Connection, this is not to promote the program is to discuss what it is. But we'll take the promotion, if needed. And so, but the Self Care and Connection is where you're literally connecting and are reconnecting back to who you are at the heart level. And you take that trauma, we identify it, and we hold the heart and the solar plexus. And when you do that, it's like, it is flipping the switch, energetically in the body. And we present with the statement of even though I feel, dot-dot-dot, I deeply and completely love and accept myself, I choose to connect and reconnect with myself. And you take a breath in and out. And you repeat that three times. And each time you repeat it, you breathe in once, then you breathe in twice and you breathe in three times. That takes you to 90 seconds. What that does is that presents to the nervous system, an umbrella statement of oh, I have to reconnect. Oh, I have to take that statement and reconnect even though I'm feeling this, I'm going to bring that connection in. And then, underneath that, there's literally things that come to people's mind. Well, yeah, my mom always said, you know, look out, don't get fat. I was always fat. Or, you know, you know, maybe a mom taking diet pills while they were pregnant because they didn't want to get, you know, didn't want to gain too much weight, which were, those were prescribed in the 60s, the doctors did that, you know, and so that patterning we can present back to the nervous system to then literally heal because the nervous system is designed to heal. And we can present that in it's such a statement that the the way we present it, it just heals because it knows how to heal. And so I think those patterns we can undo.

C

Carol Ritberger 29:49

Absolutely, we can, and I think that the, again, the focus that we're facing now with well-being is that we actually have the power within us to influence our well being. We have the power to be able to flip the switch of how we think or to reframe the emotions or to approach the traumas from an acknowledgement of them, versus trying to talk them out and allowing the body to do it. Right, I think we're seeing a huge shift in the approach from even medicine to self-help, or self-help to medicine, to self-healing. And I think that this is going to be the one thing that we're going to find, overall, that is going to be one of the greatest kind of magic keys that is going to turn how our immune system remembers what it's designed to do, versus always feeling like it's chasing something, because mentally that's where we are.

M

Mary Louder 30:56

Yeah. Yeah. Well, for me, this is making a whole lot of sense. Who knew we'd be learning so much together today, Carol?

**C** Carol Ritberger 31:11

We do, we do. Absolutely. It--that's what teamwork is all about.

**M** Mary Louder 31:16

Exactly, exactly. So looking at personality, you've done a lot of work in personality, you--you specialize in personality and the analysis of personalities, and you've used colors. And so one of the things that comes out continually in the standard, traditional medical literature is, cardiovascular disease is going to the Type A folks, the drivers, but hypertensives, you know, and they're just, they're not going to give up. And then you hear stories of a broken heart where something happened, that was so tragic, that person is heartbroken, they die. You hear that. So we clearly know what that means. And then we hear where someone literally worked themselves to death and their heart gave out. So we've got these concepts. So let's look at that--and that was a lot in that that little bit there. But let's start with the personality and the colors, as you analyze things, and what have you, what has your work revealed, in terms of cardiovascular disease, and the colors that--and how you categorize things?

**C** Carol Ritberger 32:24

So my work basically, is Jungian approach to it. And Jung's approach was is that their behavior and patterns in our physiology and neurology that are set and Jung's work was that it has to do with how we gather information and make decisions. And really, this three and a half pound blob we call the brain, that's its job. Its job is to take in information, and then to use it as a stimuli to take it in, start to categorize, if we can say it that way, into little files that it can relate to, and then use that information to be able to make decisions. So the neurological component that's hardwired of us, and part of my 25 years of research with it has shown, is that we come in hardwired to gather information and make decisions a specific way. And there are basically four approaches. And when we go in, and I cut my teeth on the Myers-Briggs, and I love the instrument, and I love the work that--that was taken from Jungians' work to bring it forward. And it basically started explaining why we have predictable behavior, why we interact the way we do, why we have the expectations we do.

**C** Carol Ritberger 33:44

But I found in the work with it is that because it uses letters to help someone understand who they are, like an INFJ, ESTP, after 30 days, I was doing a lot of corporate work, nobody could remember who they were. So then I started following the psychology of color, typical of our personality, started doing overlays, psychology of color, how does it affect the metabolism and the chemistry of the body? Connected with LÃ¼scher's work. So ultimately, long story is that I found that if I took those four patterns of neurology, and I put a color to it, and then I took my work as a woowoo medical intuitive working with chakras, and took my research where we actually would take and map in the brain if a word were to say, do you control your environment, a certain part of the brain would light up. So we found that words would actually tell the brain where to work, how to gather, how to make decisions.



C

Carol Ritberger 34:47

So what I did is I started recognizing very early on that if we're hardwired to make decisions--for example, we are an emotion decision maker--I didn't say emotional decision maker--but a emotion decision maker that says that our decisions need to feel right. And we change that, we change that pattern to what we've been told is right, and it doesn't feel right, it's going to create stress and chemistry, very predictable chemistry pattern in the body, it's going to affect certain organs and glands predictably. And so the thing with a decision maker that makes things based on logic, meaning that it has a logical approach to it, this is--this is what it is, this is where it goes, this is how it works. This is the decision. What I realized is, is that in the world that we've been conditioned, is that we place a lot of value on point A to point B and not a lot on the heart. So the emotion decision maker is constantly in a place--well, so for example, somebody may say, well, I need to just wait. And I need to need to see how this feels. Well, a logical decision maker will say, Well, what is feeling have to do with it? I mean, here's the information. Here's the facts. Here's the outcome. This is what the goal is, this is the decision. And if pressured enough, then that emotion decision maker basically acquiesces to that. But that chemistry change is--changes still happen, the immune system is still involved in it, because it's at odds with us both chemically and hormonally.

C

Carol Ritberger 36:29

And I'm going to separate those two being from our gut, and from the actual pituitary gland. And there's patterns. So what I've found is, is that the four colors, red, orange, yellow, green, and that's basically red, first chakra, orange, second chakra, third chakra is yellow, green is the heart, is that we are hardwired in one of those colors. So if I may, and I'm going to, I am a yellow, you're a yellow, what we do is we have a concept. That concept drives what we gather. We gather both in the right hemisphere, because we have a picture of what that concept is. Once we get a clear picture, we go over into the left frontal lobe and we say does this make sense? If it makes sense, it matches the picture, we go back to the logic, ducks start to get in a row.

M

Mary Louder 37:26

And the ducks are yellow--I'm saying the ducks are yellow, by the way,

C

Carol Ritberger 37:29

They are yellow, by the way, pun, pun, pun. That's good, thank you. And then what we do is just to be sure, because we don't want to make a mistake, it's like we put our toe into that right temporal limbic emotional part of the brain, stick our toe in there. If no trauma from the past, no criticism comes up, the word stupid doesn't come up, it pulls our toe out, we go back in and we make a decision. So.

M

Mary Louder 37:59

Yeah. That sounds like me. Totally.

**C** Carol Ritberger 38:02

So, and the red personality is all left hemisphere. If it makes sense, and it's logical, you do it. So everything is point A to point B. So as we've looked at, excuse me for the long way of getting there, but as we've looked at the connection with cardiac disease and the need to control and everything in the type A, we are all Type A's, just differently. You and I as yellows, we have unrealistic expectations. We are constantly--those expectations are constantly driving us. That drive is constantly asking us to do more than maybe it's humanly possible in a 24-hour period of time. What is that doing? We can't quite get there. It eats at us. It now affects our gut. Now we feel like we haven't lived up to our potential. Now we start getting resentful toward ourselves and we get angry with ourselves. And we can start to see the pattern of inflammation. And if we look at cardiac disease as--a cardiovascular disease as a inflammation, inflammatory reaction, we can see it that way. The green personality is visual. They aren't auditory. Yammer, Yammer, Yammer, talk at them, talk at them, talk fast. They have to be able to take the words and create a picture in that right hemisphere. If you're yakking at them so fast that they don't have time to do that, they're not getting a picture. They don't know how to relate. And then you're expecting them to make a decision on something that's not clear or they can't relate to it emotionally, then to make a decision based on it feeling right. So what does that do? That creates a different type of response in the vascular system.

**M** Mary Louder 39:43

Of overwhelm. That feels like overwhelm.

**C** Carol Ritberger 39:46

It is. Now we have the kidneys. Now we have the liver. Now we have the amygdala now we have fight-flight-freeze. Now we have the adrenals. And now we have the kidneys and again, it goes in, but the most important part is, is that all of that is focused in the heart. Because they make decision based on the heart. There's another personality, the orange, that things need to make sense. And they need to feel right. Well, let's look at that from the brain. Let's look at that from the heart. Well, yes, all the information can make sense, but if it doesn't feel right there, like a teeter totter, you're going from left frontal lobe to right temporal lobe bouncing back and forth. What do we have sitting in the center, pituitary gland, depression, overwhelm--a different kind of overwhelm.

**M** Mary Louder 40:35

Yeah, that would almost be an overwhelm from a piece that's missing.

**C** Carol Ritberger 40:41

All the time. All the time. And so again, when we go back and we look at inflammation is "not enough" for that, the orange it's "there's always a piece missing." The yellow is "we can't find enough." The green is "I'm feeling pressured into doing something that I don't know what to

do," and the red says, "Well just do it, dang it. You don't need to think about it. You don't need to feel about it. Just get it done. Cross--dot the i's, cross the t, call it done, move on." So when we look at personality in the roles is that--it's important for us to recognize we're all Type A's, to recognize what that looks like to us, how that feels to us, how it creates stress, how that stress creates inflammation, how it changes the chemistry, and where does it show up? So for example, with yellows, all of our cardiovascular disease starts in our stomach.

M

Mary Louder 41:36

Oh, okay. Well, because--is that because of the gut feeling? And, and we're driven strongly by intuition, yellows often are. And also, because the gut is really, could be what's eating you. It could be what's not sitting right with you. And it could be something that you're just not digesting.

C

Carol Ritberger 42:01

Absolutely. We don't have enough information. Can't digest if, we don't have enough information. And we go in and we look at that, in that, you know, part where we put our toe in the water, that is intuition. You know, we say that's emotion because that is tied to the emotional limbic part of the brain. But intuition is the heart.

M

Mary Louder 42:23

Yes, it is.

C

Carol Ritberger 42:24

Intuition is the heart. It's the empathic part. So when we go in, and we touch the emotion, and we can't get any answer, or any direction, we accept that instead of going to intuition. So again, I don't want to make it complex, because it's quite simple. From the standpoint of you understand how you gather information, make decision, you understand, anytime you step out of that neurological patterning, and there's stress present, you're going to still be that neurological response in your body physiological response. But now you're confused. Now you can't figure it out.

M

Mary Louder 43:00

Yeah. Wow. I'm, you know, you had me at we're all Type A's.

C

Carol Ritberger 43:09

We are. And again, it's just--it's just understanding the Type A part of it. I mean, in my work, I've also--with the predictability of personality in the mapping, very simple. So yellows, our gut talks to us. If that gut hunch says don't do it, it's just basically saying we don't have enough

information. It's not saying it's bad, we just don't have enough information. So the Greens' weak site, that's, for the yellow, that's our weak site. That's the liver, the gallbladder, the spleen, the stomach, the esophagus, kidneys, adrenals. That's part of every one of them. And then also the pancreas. So the way the Greens' body talks to them, is their shoulders. When the green feels stress, those shoulders start coming up to their ears, and it's like, their soul and their heart is saying, Whoa, too much. Don't carry any more. Don't carry the weight of the world on your shoulders. Just take a deep breath. Give yourself the time that you need. And if you keep pulling it up, what are you doing, you're pulling up your diaphragm, you're not getting a bridge--breath, you're changing your blood flow, predictable.

M

Mary Louder 44:18

Okay.

C

Carol Ritberger 44:21

So for the orange, all of their issue is in small intestine. That's their weak site. Things bother them, things are--that, that guilt, that worry, that dread, that despair. All those strong human emotions keep them bound. And what do they do? They don't want to say something wrong. They don't want to speak out of align--out of timing with someone else. And so what do they do? They don't speak. They're not--they're not sacrificing themselves. It's just that the pattern is is that they're waiting for the right time to be heard, and if the pattern is they're not being heard, or what they're sharing is not of value--because they're very collaborative. They're very team-oriented. They're very companion-oriented. And if they're not appreciated, type A. The red personality carries their stress, their weak site is in their lower back. Resentment, Type A resentment. Nobody's listening to them, nobody's doing what they need to do. They know what they need to do. They're telling everybody what to do. And nobody's doing it. And so they carry it. So we actually have, in my work with personality, the body actually talks to us, to tell us when we're entering into that stress zone, it tells us how deep we're into the stress zone. That's telling us how much activity in the immune system. That tells us how much the mind is working. And like you said, Stop, close your eyes, that takes away all the outer world inhibitors. Take a deep breath in your body goes, okay. Now, what do we do? And it goes back into healing. Breathe, breath is really important.

M

Mary Louder 46:10

It is.

C

Carol Ritberger 46:11

Breath is an important part of managing inflammation.

M

Mary Louder 46:14

Yes. And breath is where the life is. For sure.



C Carol Ritberger 46:21

It's our life force.

C Carol Ritberger 46:22

It's that connection between the body, the mind, the soul, the heart, the universe, the cosmic part of how we exist in everything, every tree, I mean, we're just, we're just a walking expression of energetic connection.

M Mary Louder 46:22

Yes.

M Mary Louder 46:39

Yes. Yes. Well, you know, this is really a good place to pause and, and consider and, and, you know, add this component. And I know I'm after we've got this recorded and produced, I'm gonna go back and re-listen to this concept relative to the heart, and cardiovascular disease, because I literally was sitting there thinking about, Oh, well, we could research this, we could research that, we could look at people's stress patterns, we could then, you know, correlate that with their diagnosis, with, you know, what their genome said we could really do a complete--it would be a matrix, is what it would be. And that would just be apt--

C Carol Ritberger 47:24

We could do, also--what we can also do is if we look at the heart, we look at the atriums and the ventricles. As I shared the right atr--right atrium is fear. Well, what happens with fear is aggression. And aggression is an inflammation. If we look at the lower right ventricle, which is anger, hostility, look at the emote, look at that in the stomach. If we go in and we look at the upper left atrium, which is betrayal, the very thing is we're constantly trying to find who we are, how we belong, and we're constantly dealing with abandonment. If we go in and look at the lower left ventricle, we have sadness, and what is the emotion that's with sadness? It's despair. We don't know what to do. We don't know where to go. We don't know how to fix ourselves.

M Mary Louder 48:14

Well, and it's interesting because the emotional work that Brene Brown has done with her book Atlas of the Heart. I don't know if your familiar with that.

C Carol Ritberger 48:21

Yes--

res.

**M** Mary Louder 48:22  
Oh, I you know, even just mentioning it--

**C** Carol Ritberger 48:24  
Exquisite.

**M** Mary Louder 48:25  
Yeah. Not that--

**C** Carol Ritberger 48:26  
Exquisite, that's a word. It's an exquisite work of understanding humanity in general.

**M** Mary Louder 48:35  
Yes. 87 emotions, right? And I can tell you, when I've worked with folks, when we've looked at sadness, and grief, there's one of the word--agony--that is just something that goes beyond sadness. And it's just, you know, something that when I use that word, and deepening of the grief, it just opens up this whole concept to folks that it's much deeper than just being sad. And--

**C** Carol Ritberger 49:16  
The agony is regret. And, you know, if we were to all just kind of sit with ourselves and be very honest with ourselves, and we were to put on one side of the ledger regret and the other side we can do agony, regret's going, regrets going to basically, win.

**M** Mary Louder 49:41  
Regret's going to win, you said?

**C** Carol Ritberger 49:42  
It, it will. Agony leads to regret. Regret is what robs us of life. It's the part that the--mental part that we never do enough, we're not good enough. We're not smart enough. We're not lovable, all the different things that it goes down to that regret, and we--when we live with regret, we suck the life right out of us.

M Mary Louder 50:04

And that's the anguish. And she equates anguish with your legs being cut out from underneath you.

C Carol Ritberger 50:10

Absolutely. Yeah. Absolutely. And then we can even take that metaphor, and we can say, okay, so the legs being cut out from under you. Well, now we have vascular disease in the legs, we have that life force not getting where it needs to, feeling like we're uprooted all the time. I mean, we could, and this is the explicitness of the soul. In this cosmic perspective, yes, is we say things, our soul says things, like somebody, it's up, I have a pain in my neck. It's talking to us all the time.

M Mary Louder 50:42

Right.

M Mary Louder 50:42

Right. And our heart is talking to us all the time.

C Carol Ritberger 50:42

Our job is to listen to it.

C Carol Ritberger 50:49

All the time.

M Mary Louder 50:49

Matters of the heart. You know, we talked about in one of the first podcasts we recorded together about the heart having its own neurology, and it has its own endocrinology. And so that means it has its own immunology.

C Carol Ritberger 51:07

Absolutely.

M Mary Louder 51:07

Therefore, it has its own technically, brain, if I can use that, a brain center, I'm gonna use that. And--

C Carol Ritberger 51:12

It does.

M Mary Louder 51:13

Yeah. And so I maintain that we actually really live from our heart. And that's where the seed of everything is.

C Carol Ritberger 51:24

We actually are energetically and even anatomically connected, and the heart and the brain, they are not, they may be located in separate parts of the body, but the brain is as pure as the heart. The unruly child is the mind and the conditioning and the beliefs that it forms and the thought patterns and everything. But the good news is, is that the mind can't do two things at one time. So if it's leading you astray, to where you're turning against yourself, which then is inflammation, then you just say stop, and it will.

M Mary Louder 52:06

Seriously, that simple?

C Carol Ritberger 52:08

It will. And then, and then it's waiting, it's waiting, it's like, Okay, I've stopped, what are we gonna do now? And if we don't let the heart come in, and lead it to the next process, then it just puts that replay button and goes back and replays and replays or replays. And that's that replay, replay, replay that causes the Type A qualities to become a propensity for heart disease. And when I say that, that's genetic, we both know that, that there's--it's in the loop. But that button does not need to be turned on, and it can be turned off. If we were to, in the work that you're doing and work that Louise Hay did, and other great, beautiful people that are on this earth now that--souls that are stepping forward with great courage to do this work. It says, let's look at it beyond the body.

M Mary Louder 53:06

Yes. Yeah. And honestly, that's where my work is taking me. It's totally out--I'm out of the clinic. So I guess I can say out of the clinic, out of the body.

**C** Carol Ritberger 53:18

Absolutely. Out of that clinical body, you have all that, all that information. That's a great value.

**M** Mary Louder 53:25

Yes.

**C** Carol Ritberger 53:26

So. Yeah, and I, and I do, I do know that heart disease can be healed. But I do know that we must believe that we can be ourselves and do it.

**M** Mary Louder 53:39

I agree. On that note, that is going to wrap this up on this episode. So heart disease is there, the body has the ability to heal, working with the soul, working with the cosmic aspect, working with personality, has full capacity for self healing, self-fulfillment, being good enough, being smart enough, being accepted enough, being loved enough, all those things that we need, and we can live fully from the heart on all of this. So Carol, thank you for being here. Thank you for your wisdom. Thank you for your insight, your years--decades of work and personality that you know, folks take take it, take home, the take home here is, we're all Type A's. We've evolved. Cosmic. There you go. And since you put it that way, let us throw all those things out there as we wrap up today. And stay tuned, we're going to have more episodes on cardiovascular health. Thank you for listening. We appreciate all of the feedback and input that that you listeners give us and we are here for you. And so, until next time, take good care and bye from both Carol and I. Bye!