

# Introduction to the Terrain Ten

**Nasha Winters, ND, FABNO**



## Introduction to the Terrain Ten

**Rebekah Kelley:** Welcome to the Humanized podcast, all about personalizing your health. I'm your host, Rebekah Kelley. We have a great guest today, Dr. Nasha Winters. Before I introduce Dr. Winters I want to remind everyone to subscribe to get all our variety of casts in audio, video and transcription, at [HumanizedHealth.com](http://HumanizedHealth.com). I'd also like to thank our lead sponsor, Village Green Apothecary, at [MyVillageGreen.com](http://MyVillageGreen.com).

So a little bit about Dr. Nasha Winters. She is a naturopathic doctor, fellow of the American Board of Naturopathic Oncology, acupuncturist, author, global health care authority on integrative cancer research. She's been on a personal journey with cancer for the last 27 years. At the age of 19, she was diagnosed with stage 4 ovarian cancer and given only a few months to live. Her quest to save her own life has transformed into a mission to support others on a similar journey. Wow, that says so much in such a short amount of time.

So the topic that we're covering today is her Introduction to the Terrain Ten. So welcome, Dr. Winters. It's so nice to have you here.

**Nasha Winters:** Thank you, Rebekeh. It's a joy to be with all of you. I love what you're creating here.

**Rebekah Kelley:** Thank you, thank you – so do I. So, can you please share your Terrain Ten?

**Nasha Winters:** Sure. Terrain Ten is nothing special, nothing really new. It's just the way I sort of think about it and approach it for my own health and that of the patients I've supported over the years, and now for the doctors that I trained in this methodology. And simply put, these are sort of the 10 drops in the bucket, if you will, that each of us are exposed to that either make us thrive or dive with our health, or our health expression. And so simply put, it revolves around these 10 sort of patterns, if you will.

So, epigenetics, being what was handed down to you from previous generations. Remember that epi, "above," genetics, "the gene," does not imply that it's something stagnant, it's actually quite dynamic and really takes its cue from us, from our environment. So epigenetics is one of the drops in the bucket.

Number two, metabolic. Simply put, this is what fuel source do we feed our body to help our engine keep on humming and driving us down the road. So that means that it could be sugar, fat, protein – it could be a lot of different things, but it could also be other information from food, water, air, thoughts, coming in to change our metabolic expression. But mostly we look at it as what we ingest day by day in our food.

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Number three, we look at our toxicants. Holy cow. It's no longer a matter of if you have toxicity, it's how bad is it. How much are you being exposed to, aware or unaware, and how does it interact with your own personal bucket, if you will.

And then number four, the microbiome. This has become a really hot topic in the last few years, despite the fact that Ayurvedic practitioners, Chinese medicine, naturopathic doctors, have really talked about "the tube" that has a body wrapped around it, for thousands of years. But this is how our body deals with other information coming in, and it's very important in the function of our immune system, which happens to be the next drop in the bucket.

We are really talking about immunity a lot these days, with this incredible pandemic that's kind of put us all on the same playing field. It really does come down to how our personal immune systems are responding or reacting to the environment around us. So we really work with that when we're assessing people's terrain.

And then five is inflammation. We kind of are known as the "inflammation nation" these days. Many of the chronic illnesses we're dealing with today that take our lives are around inflammatory processes. We used to die from infections 150 years ago. Today we die of inflammatory processes – cardiovascular disease, diabetes, obesity, Alzheimer's, cancer, to be exact.

And then we look at angiogenesis, which also is around circulation and oxygenation. So how well are we perfusing the tissues in our body and bringing fresh oxygen to the tissues, which also helps us take out the garbage, dump things into our lymphatics.

And then the last three are really our hormonal health. This is not just about what hormones we have in our body, but how our body reacts, kind of in the symphony of the hormonal milieu, as well as how we're being exposed to many things in our environment today that are known as endocrine or hormonal disruptors, and how that plays out in our body.

And then finally, sort of that circadian rhythm stress response, which, living on Western planets these days, we are always under stress – but how we respond to it is also key.

And the 10th drop in the bucket is often the most important, often the most difficult to address, is that mental, emotional health framework. Again, something that we are all aware of, but we don't tend to want to jump there first. We'd like to deal with the tangibles before we start to deal with the intangible.

So there you have it. Those are the 10 main drops in the bucket that affect the way we thrive or die with regards to our health.

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**Rebekah Kelley:** I love that. I love the way you look at it – all of it. As you went through it verbally, I thought through each one in my life, and I'm like, oh yeah, that's right, I'm working on that, I'm working on that. Wow. So, what inspired this... I mean, this is an amazing Terrain Ten ideology and methodology.

**Nasha Winters:** Thank you. Well, you kind of gave it away in the intro, which is my own health journey, which actually is now nearly 30 years – I need to update my bio – October of 2021 will be 30 years since I was diagnosed with terminal ovarian cancer, stage 4 ovarian cancer, and was not given any options because I was so far gone. I was so in stage. And so instead of deciding that I was going to fix it and combat it, I wanted to understand it. And that's what's led to nearly a 30-year journey of me getting curious and starting to explore my own terrain. And each time I learned about another drop in my own bucket, it seems like I was able to kick the can down the road a little bit further. And here we are nearly three decades later and over 10,000 patients later, that I've had the privilege of helping explore their own Terrain Ten drops in the bucket. So it kind of just came into what's going on in me and why, and what can I do about it?

**Rebekah Kelley:** And then you're helping all these other people because you've gone through this process yourself. Wow.

**Nasha Winters:** Yeah. Yeah.

**Rebekah Kelley:** That's amazing. So how can this now be applied? If someone's personalizing their health, their walk, what they need – how can this be applied?

**Nasha Winters:** I love this question because I think when my book, *The Metabolic Approach to Cancer*, came out, I think a lot of people didn't pick up the book because they saw the word cancer and they thought, "That's not me, I don't have to worry about that." But really the book was written to PREVENT folks getting cancer, or to help people who have cancer navigate it a bit differently. Or after they've completed treatment, prevent it from coming back again. So this really should be sort of the metabolic approach to everything, or the metabolic approach to health or life, etc. But ultimately it applies in all arenas.

I alluded to a moment ago, inflammation is what is the main way that takes our life these days on the planet. It's the same thing with metabolic diseases. A lot of times we think metabolic diseases, we think diabetes, we think obesity – but we also need to think about cardiovascular disease, cancer, Alzheimer's, ADD, ADHD, autism, any of those neurological functions, auto-immune issues – those are really the drivers that all have the same underpinning of a metabolic imbalance.

And so starting to look under the hood before you have a disease process so big and so loud to capture your attention, start to look before you have problems. I always

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use the analogy of look and deal with the little embers smoldering in your basement versus waiting until the whole house is engulfed in flames. And of course our medical system is very, very, very good at dealing with a house engulfed in flames. We're fantastic at emergency care. You know, I do not want to be treating someone who had just had a car accident. I, as a naturopathic oncologist, that is not a proper place for me to step in and support. But with regard to true prevention and helping people become aware of their blind spots and helping them create an internal soil and internal milieu that is not welcoming to disease processes or those sort of toxic drops in the bucket, that's where we shine in the integrative alternative functional medical model. And so that's where I want to teach people. And this applies across all of those disease processes we talked about.

**Rebekah Kelley:** As you talk, there's so much that relates – and I'm sure you hear a lot of people say this, right? This relates to my own family history in a lot of ways. My father passed away at 42 from cancer, my mom and my grandmother, and pretty much everyone on the female side has had a battle. And so it's something that I grew up really aware of and trying to pay attention to. But even though I know these things and I'm very proactive, and whenever I talk to my healthcare providers, I'll be like, what can I do for preventative care? They really don't have a lot to help me with. They'll say, well, we can check your DNA. You know, you can get this tested, right? But I want to be even sooner. I want those earlier flags, and I know some things, because I've been so diligent, and of course, you know, my mom actually became a raw food vegan as soon as my dad had issues. It's one of those things where you start looking at your diet, like you talk about your Terrain Ten, but there are so many other things that you've brought up and it's hard to really figure out how to be preventative.

So my question is, where do you start? I mean, obviously your book, right? But where do you start with finding these things that then can be applied to your healthcare so you can personalize your experience and your history and, you know, not wait until things are on fire.

**Nasha Winters:** I love that question. First of all, thank you for sharing your history. It's going to be very compelling for other people because sadly, you're not alone in that experience. And, and, you know, even the World Health Organization says that worldwide, our cancer rates are expected to double by 2030. And right now, one in two men, one in 2.4 women in the United States are expected to have cancer in their lifetime. So it is only a matter of time before we're facing it.

So as you stated, what can I do tonight? And so, so much of that is taking a personal inventory, looking at everything you put in, on and around your body. At the beginning of my book, I have a 10-part questionnaire that is basically addressing 10

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questions for each of those Terrain Ten patterns, and questions that you likely wouldn't be thinking about, or that you wouldn't typically see, kind of in the general public arena. It starts to help you understand where your blind spots are. I encourage people to look at that and then see what their priority is – because you could hit it all and you would likely need to, but you might want to start with the most obvious first, and then work your way down the path. That's really key. It will be different for everyone. You could even put 10 women with breast cancer, with the same type of breast cancer in the same demographic in the same room, and they'll all have different reasons of why they got there. They'll even have different molecular markers and different epigenetic underpinnings, and different labs and life experiences. Their biographies' impact on their biology is really critical. So I start to look at that. I want people to start to run basic tests every year. You want to run your vitamin D3. You want to run your insulin and your hemoglobin A1C. Those two things – if you address that aspect, your immune system and your metabolic health, you abort most of the chronic conditions we are faced with today.

A lot of people think they eat well and think they eat low carbohydrate, and yet they don't at all. And so those are some places. Using things like a macro nutrient counter, a free app online, the dminder app online to understand how much vitamin D you're actually getting exposed to, moving your body every day to some degree is key.

So these are just some of the examples that folks need to start to take a little personal responsibility and a little personal inventory, and start to audit everything around them. If you're still using glyphosate in your gardens, that's a problem. Right? And so these are the types of things that I want you and your listeners to be listening to. It's like, okay, what can I do about it now?

**Rebekah Kelley:** Wow. Thanks Dr. Winters.

**Nasha Winters:** You're welcome!

**Rebekah Kelley:** That's really valuable. Thank you so much. Dr. Nasha Winters can be found at [www.DrNasha.com](http://www.DrNasha.com) – that's D R N A S H A.com. And let me remind you to subscribe and get access to all Humanized videos, podcasts, and transcripts from all of our thought leaders on personalized health at [HumanizedHealth.com](http://HumanizedHealth.com). Thank you so much for being with us.

**Nasha Winters:** Thank you.