

Severe Allergies in Children Part 2

[INTRODUCTION]

[0:00:06.7] ANNOUNCER: Next is Dr. Charlene Wrighton to discuss everything early education about your children or students in our new show, Ed. Talks with Dr. Char.

[EPISODE]

[0:00:21.0] CW: Hi. This is Dr. Char Wrighton from Zoo-phonics and Safari Learning Academy. We're going to do part 2 of severe allergies. It's also moderate to mild, but we're really focusing on the severe ones, because there's just so much to know about them. Allergies, we seem to have more and more in our world and scientists are certainly wondering why. They have some answers and they have a lot of – probably more questions than answers.

I am with Doreen Goolsbey and we talked last week about just everything. We covered so much territory that I want to do a recap, both of us, because I feel like – if you didn't hear last week's, you can certainly go on and look for it. Again, look for the allergy part 1. This is part 2. You can listen to it. We're going to do a quick recap just in case.

Doreen, let's just do a real brief introduction to you, your child, what you were going through, how old she was when you discovered she had food allergies, how severe they were. We'll start there.

[0:01:24.5] DG: Okay. My daughter, Sabrina, was diagnosed with 15 life-threatening food allergies at 16 months of age. It was pretty overwhelming for us. We didn't want to leave her with anyone. We didn't want to put her out there in the world. We were so afraid and I had a family member with cancer and we had to go to the hospital for chemotherapy and radiation. We didn't know what to do. We had just moved here. We found Safari and we just had to hand her off and say, "Please, just keep her safe and good luck." Teach everybody there the best we could and just hope that everything is going to be okay. Since then, we've come a long way.

[0:02:06.6] CW: Well first of all, I sincerely thank you for trusting us, because it actually really makes me tear up when I think about it, because I was a nervous mom. I'm accused of being a nervous grandparent also. Thank you for trusting us. You also taught us so much. That was our

first foray into running a preschool, and so not that we hadn't been around allergies, because children have allergies, but not this severe.

You taught us so much. You taught us how to read labels, what to watch for. We were growing as you were growing. I also thank our incredible staff, because we taught our staff what to watch out for and did everything possible. We put food in a bag with her name on it, her EpiPen was in there, her sterols were in, her Benadryl was in there. We had permission to call 911. All of us were trained on EpiPen first-aid CPR. She came to us as a toddler, so couldn't speak for herself.

She also sat at the table with the other kids who had allergies, so that she wasn't feeling alone or separated. She was a toddler. I mean, she wouldn't have known that in the first place, but we had to make sure that the whole child of Sabrina was being treated, not just the allergy. We wanted to love her and make her feel terrific. We're going to go into that more later, because that is really, really important.

Tell us how you – again, just a real-fast recap, you had mentioned last week that you even had to change your parrots' diets.

[0:03:36.5] DG: Oh, absolutely. We couldn't figure out why she was still having such rashes on her skin. We had eliminated so many things that we were consuming in the house, so many things that we allowed, even in the house. Why is she still covered in rashes? What are we doing wrong? Then somebody had mentioned to me about my parrot's food and I hadn't even thought about. Of course, my parrot has nuts in his food. Why wouldn't he? I took him to an evening that –

[0:04:00.7] CW: They fling their food. I mean, we have a mess, because I have two birds. They fling their foods, which meets us in the air and it's just everywhere. Okay.

[0:04:09.0] DG: We grind it into a powder. That powder gets on every single thing in your house. We had to wash the house completely down ceiling to floor, clean everything and we actually took our bird to an avian vet to have him waned off of his diet onto a diet that was safe for him. He was on ZuPreem diet, where he just had foods that were safe then for my daughter.

Then the same with the dogs. The dogs would have peanut butter snack cookie, or have egg in their food, or – we had to read the labels of the dog food and make sure that the dogs were only having things that she could also have in case they licked her, or in case they were in contact with her. It was a huge learning experience, things you wouldn't normally think of going into on dealing with food allergy.

[0:04:54.1] CW: You mentioned when we were talking about not necessarily in our radio show, but earlier when we were just having a chat is that you had to even watch food that was on grandpa's mustache.

[0:05:05.8] DG: Oh, my goodness. Yes. He felt so horrible about this, but we were just getting ready to go on a cruise. The whole family, we all went to breakfast and I'm like, "I want to stay in the room with the baby." "No, no. Come to breakfast. Let's all do breakfast together. We're going to take the cruise as a family."

He kissed on her before we went on the ship. Within minutes, she was hives because he had eaten eggs and eggs got in his mustache. Of course, that residue then gave her full-body hives. He just felt awful, but it was just that awareness. "Now I'm about to go on a ship in the ocean and I hope we're going to be okay." We still have to live our life. We still have to go places and do things, but we do have to have awareness as a group on just the littlest, silliest thing can cause a huge problem.

[0:05:50.8] CW: There's so much that we don't think about. You had taught us to read labels. Again, we're looking at basically 13, 14 years ago where labeling was much different than it is today. It has improved tremendously. Would you just touch on that please, just to refresh?

[0:06:07.3] DG: Yes. Now, the eight most common allergies are going to be listed under the label. It will say, "May contain peanut, tree nut, egg, fish, wheat, dairy." It will say those things right on the label underneath if it contains any of the eight most common, what they consider the eight most common. It needs to also say if it may contain something like – maybe it was on the same belt, or same factory line, or if it was processed in a facility. Something was processed in a facility that also processes nut products, my daughter still cannot consume it. Even though it doesn't contain nut products itself, she still can't have it because of the factory.

[0:06:47.3] CW: You had mentioned, because that nuts were the worse because they turn into a powder when processed. Then it flies into the air, then it sticks to the walls and then it hardens and getting cracks. Therefore, I mean, it's prevalent and just stays.

[0:07:01.1] DG: Yeah, we don't risk it. In fact, when she was in 5th grade, she had eaten a Pop-Tart that was processed in a facility that also processed things with nuts in it. She had a reaction from that Pop-Tart and we thought we were good. She was 5th grade, we had come a long way. We only had two situations where she actually had anaphylaxis and ended up in the ER and then pathing to save her life twice.

[0:07:27.1] CW: I mean, how fast is that?

[0:07:30.6] DG: Well, here's the odd thing; it can happen very, very quickly, like instantaneous, or it can take a while. For my daughter, the hard part for us was that both times she's had a reaction – I'll just talk about the last time with the Pop-Tart. She had a bite of the Pop-Tart and she said, "This tastes funny." Then she read the label and said that it was processed in a facility that also does nut products. She was concerned. She got me. She said, "Mom, this Pop-Tart doesn't taste right. My throat feels weird." I said, "Honey, does it feel weird because you read the label, or does it feel weird because it feels weird?"

[0:08:05.1] CW: Then you have to come and think of are we thinking about mind over matter –

[0:08:10.0] DG: Exactly. Because you never know how the body is going to respond to an allergy. I didn't expect it.

[0:08:17.5] CW: Also, timing is of the utmost importance, is that is if does happen fast, it can happen so quickly. The point on this one is that it can happen instantly. Therefore, that was why we wanted all our teachers trained on EpiPens, etc., first-aid, CPR, etc., because we didn't want anyone – I don't want someone to call me from another room saying – I have a situation here. They're going to do that anyway, but I want that teacher to be ready and ready to go and treating, rather than have to go through the whole chain of – it just takes too long. The other thing is you think everything's okay and it is not. That's something that one has to be really, really aware of.

[0:08:59.9] DG: It was a scary situation.

[0:09:02.6] CW: All right. Yeah. You had mentioned that it could take up to 45 minutes to an hour? Or maybe even longer?

[0:09:08.5] DG: It can take however long it takes for your body to process that food. It could happen instantly, or it could be longer for when your body is processing it.

[0:09:18.0] CW: It kind of go – start slowly and then it hits.

[0:09:20.2] DG: As your body is digesting that food, it can happen at any time. That's why –

[0:09:23.2] CW: The body is basically seeing it as an enemy and is reacting as – it goes into protection mode by doing whatever the body does to protect it.

[0:09:35.4] DG: When I took her to the ER, they put her on steroids for three days, just so in case anything was left in her system, it would combat it.

[0:09:42.5] CW: That's amazing. Now you had told me that Sabrina was put on a 504. I thought that would be interesting for our listeners to know the difference between a 504 and IEP. I dealt with IEPs all the time. That was an individual education plan. That could be physical education, but it also could be definitely all the academics. It could also be speech therapy.

It could be where I'm going to put the child that as far as in this room is there is any hearing issue, I want to make sure the child is close to me, or if the child has any attention deficit. It could be any of those. When we were looking over, we're doing some of the research it was like, "Boy, that's a little hard to define, but I think we have it nailed down. I think we can explain it to you."

[0:10:23.5] DG: My understanding of it is that a 504 is for a medical condition. If like for my daughter, she has a 504, because they need to make sure that if she has a reaction that they have her EpiPen in the classroom that they know where it is, that they know how to use it. A 504 would be for a medical issue, or an IEP would be for a developmental issue, like before she had an IEP for speech therapy. Now she has just the 504 for a medical problem.

[0:10:51.9] CW: Okay. 504s can have anything to do with concentration, language, speech, anything that would inhibit the child's academic progress, whereas an IEP is really pretty much straight education, because it's an educational plan. IEP, I can see a slight difference in this. It would be anything that would impede the child's success, whether it's a mobility issue, a hearing issue, a visual issue, etc. Okay, so hopefully that clears that up.

Also, I wanted to give you foodallergy.org is a really good place to look for information. There's something called FARE, which stands for food, allergy, research and education. Those are good resources for you if you want to learn a little bit more. While we're talking about really good resources, I want to re-mention Doreen's book. Doreen, and you wrote this quite a long time ago.

[0:11:47.8] DG: Yeah. 2009.

[0:11:48.9] CW: Yeah. 2009. Which is amazing, because we opened in 2007. You did this really, really fast. It's called *Where Could Your Allergy Be Hiding?* I love it. First of all, I think the book is amazing and as I said in part 1, I am really fussy when it comes to books and graphics and layout and artistry and content. I love the book. I think it's amazing. It's so clean. It's so easy. It's really great education for children of all ages. It's also playful, because you got a puppy dog holding his eyes and they're playing hide and go seek, because we're looking for allergens that are hiding.

It's actually going to help the child. You're helping Ryan, the little boy in the book, look for all the allergies. The child is actually helping Ryan, which means the child is learning at the same time. You can get this book where?

[0:12:40.6] DG: It's available on amazon.com and barnesandnoble.com.

[0:12:44.0] CW: Okay. I would highly recommend it, because it's – every classroom should have it. I would certainly. If you have a allergy in the home, every parent should have it, and grandparent. I find grandparents need to have as many books and things as parents do. I want to really look at as Sabrina has aged, when we saw her she was a toddler. We got to know her that year or those two years. Then she went on. All those years passed and then we reunited;

Doreen and I, because I was learning how to fence with my grandson and here is Sabrina learning how to fence. It was really fun to see and talk again.

A lot has happened. A ton of education has happened during that time. What advice would you give parents just starting out with this?

[0:13:38.7] DG: It's a balancing act. I think as a parent, you really have to make sure that they're educated enough to not take the treat off the table and try it, but also not scare them too much. It's hard to give exactly what to do. I would say just balance it out situationally. Explain that these treats look gorgeous sitting here on the table. If you eat one, that's dangerous to your body. That thing. Just making sure that the –

[0:14:04.4] CW: That has to be hard. I know what it's like if I see a chocolate chip cookie. I know. I also have a gluten issue and sensitivity, and so it's like, I know that cookie is going to cause my tummy to stress and I'll eat it anyway. I mean, I know that also makes me chubby. I'll eat it anyway. I know how hard it is. How do we teach our children, because they need to speak up for themselves and they need to be able to have that self-discipline that says, "This is going to cause either tremendous danger, or it's just going to cause havoc." It's that inner strength that you're really building.

[0:14:36.1] DG: It's definitely a hard thing to do. I feel as she gets older, it's much easier. I felt when she was younger and we would go to parties and there would be lavish tables with desserts, that was so much more challenging. I just wanted to keep her away from all of it. Now that she's older, she can pretty much do it on her own, but she had to learn that.

[0:14:54.2] CW: What was the age where she was able to say for herself, "I can't eat that. It's not good for me at all"?

[0:15:01.0] DG: I would say, where I felt trusting her was probably when she was in 4th grade, where she started to get to the point where I had confidence that she knew what she was doing. She probably had it down much before then, but I wasn't ready to let go yet.

[0:15:16.0] CW: Yes. We teach our preschoolers at Safari to be able to speak up when they're three and four-years-old, and so our kids are pretty verbal. They can say, "I can't eat that. I can't eat strawberries. I can't eat nuts. I can't whatever."

They also know why they're sitting at that table. On the other hand, we don't want to have them feel set apart, or not a part of the mainstream, or segregated. We don't want any of those feelings, because again, we teach the whole child. We don't just teach the allergy and we just don't teach the other children. We want to make sure that it's fully inclusive, then everyone feels good about themselves and good about the group.

Have the children been kind to Sabrina? Has she had to go through some issues with them as she's gotten older?

[0:15:55.2] DG: We've had a few speed bumps along the lines. Of course, there's going to be you know a kid here and there that, "Oh, I'm going to chase you with this peanut butter sandwich. That's going to be a funny thing." Luckily, I live in a small town and I'm able to reach out to parents when things like that happen and say, "Hey, just as an FYI, this happened today. Can you please talk to your child about XYZ?"

[0:16:14.0] CW: That's got to be so hard to be assertive like that. It has to be, but you have no choice. I mean, it's life-threatening, so you have no choice. It's got to be hard.

[0:16:21.6] DG: I think it's very few and far between. Most of the kids pretty much have her back, but now she's in high school, I worry about it a little bit more.

[0:16:28.7] CW: Do the cafeteria ladies know, or do you just always pack her lunch?

[0:16:31.7] DG: I always pack her lunch. There has been times where at her previous school, I was friends with every cafeteria lady. I went in there and read every label. All the time, they opened their doors to me. I would say, "Okay, on Friday on pizza day, you can eat the pizza. I've already talked to the lunch staff. You're good." It'd be like few and far between times that I would let her participate in getting lunch. Normally, I pack her lunch.

[0:16:55.8] CW: Yeah. They're probably so hard for her not to go to the machine.

[0:17:02.2] DG: Oh, the vending machine.

[0:17:02.4] CW: Yeah, the vending machine. It's got to be hard, because she's having to say no, but she also knows the consequences. I was always in Katie. Katie and I were always so appreciative of you teaching us so much, because I feel so confident now that and have for a long time that our kitchen staff are so well-versed in what to look for.

When we were talking earlier, it's just that concept of there are things that you have to actually interpret. It isn't just crystal clear. I remember seeing Katie go, "Come here. Read this with me. This is how I read it," especially on party day. We are really careful that we've always had the parents bring in treats for their own child and then we make sure that we have also treats.

Because first of all, we don't want to just junk the kids up on sugar and carbs and stuff like that. We make sure that there's tons of vegetables and fruits and we're really careful how we wash them and present them and all that kind of thing. Yeah, we want to make sure. When you have to leave something to interpretation it's like, well, we're just take the safety route and not even – it's not worth the risk. Not worth the risk.

We also had to make sure that parents who are always really helpful, who want to be helpful are not passing out things for allergy kits. We have a big sign up there that says these children have allergies, so that way we don't have any mistakes. Yeah, it's like anything else. I think that you can get so paranoid and so fearful and make your child so fearful. How did you keep her stable?

[0:18:32.2] DG: I don't necessarily think I always did. I think there were times where my fear made her too scared, but I feel like after lots of conversations and lots of dialogue between her and I, she knows that she has to stand up for herself and not be overly scared of going into situations. She would panic if she was in a room where everybody was eating doughnuts. Her egg allergy is much better now. It's not contact anymore. She would actually have to consume egg to have a problem.

We've had to have talks about you can be in a room with other people eating this and you will be okay. Those are big deal changes. Where before, it could kill you, and now you're okay. That's confusing to anyone.

[0:19:16.6] CW: Now does she carry her own EpiPen? Can she carry it in her backpack?

[0:19:18.8] DG: She does now. She carries all of her own medication.

[0:19:20.0] CW: Okay. She can carry. There's no rules against that in the school.

[0:19:23.9] DG: No. As long as long as it's the doctor's order, she's allowed. The doctor did give an order.

[0:19:29.5] CW: Because I was thinking of a high school campus is so huge, you do not want to have to run to the office to go get medication for somebody who is half a block away. I mean, school campuses are huge. Would you share the story about her summer camp? Well, won't mention where it is. Just tell about that experience, because that's –

[0:19:49.3] DG: Her summer camp, I took her to summer camp where she was going to be there a couple weeks with zero contact with me. No cellphone, no phone calls, no anything. She's just on this campus in a dorm with other children. They have their own cafeteria and their own food staff. I started talking to the director about here's her allergies, here's what we need to do, here's that. She just looked at me and said, “No, your daughter's here to have her own voice, to learn how to take care of herself. You can tell me and bring some food in for her and we can talk, but this is going to be about her learning to handle herself without you.”

[0:20:28.9] CW: That had to be so hard.

[0:20:30.4] DG: Of course, I stayed in a very expensive hotel down the road and just counted the minutes and spent way too much money.

[0:20:36.5] CW: Honestly, I would have been in the bushes. I would have had some kind of a telescope, or planting a bug somewhere. I would have had it done something.

[0:20:43.4] DG: I felt we both needed that. Sabrina, she did come back a very thin kid. I think, there was a language barrier between her and the kitchen staff. She did have some problems

on finding out what I could eat, when I could eat it. She was a little timid to ask those questions, but she made it through. She was fine.

She had to learn, "Okay, I'm going to run into these problems. Mom's not always going to be there. I'm going to be okay. I can find things that are safe for me to eat and be fine." She had to learn that and I had to learn to let go. I think it was a good experience.

[0:21:14.2] CW: With those things, it would be basically clean eating. It would just be a piece of meat, or a vegetable with nothing on it, or Apple or you know, that kind of stuff. She would pick and choose things that she knew she could –

[0:21:28.3] DG: That she knew she could eat. She was able to talk to people and not –

[0:21:31.5] CW: It's the mixes that would cause the problems and mostly, desserts and kind of stuff. Pancakes, obviously not. It would be more just stay clean eating with –

[0:21:40.1] DG: Well, even with the fruit. She told me, sometimes she would rinse her fruit just to make sure that there wasn't cross-contamination.

[0:21:45.0] CW: I rinse my fruit no matter what. That's me.

[0:21:47.5] DG: Exactly. Exactly.

[0:21:50.1] CW: Was she able to feel close to other kids? I mean, because I think that there's all the ages – Probably why I adore early education, because kids really don't notice a whole lot. They're just so accepting and either they don't get it, they don't notice it, or it's no big deal to them.

As they get older, they start seeing differences in others and then they start – kids aren't always nice. Did she go through that? I mean, for instance just going over and washing your apple can bring someone, an opportunity to mock you and they will tease you even. A lot of times, teasing is teasing, but it can also be mean.

[0:22:27.6] DG: Or you're the reason why we don't get to have candy in the class anymore. You're the reason why we don't get to have peanut butter cups. Yeah. She has run into those situations before. I just keep telling her, there's so many more worse things that can be going on. Just count your blessings. Do your best to keep yourself safe.

[0:22:47.0] CW: Did you find the teachers throughout the years, or was it just personalities, teachers that were less friendly over protecting your child, less willing to do so, or maybe even resentful?

[0:22:59.6] DG: Usually, I was lucky. Most of the time, I had teachers who were onboard, on-task, really focused. I've had other teachers who haven't known my daughter's name, even though they have the 504, even though they have the paperwork, even though they understand the allergy, they don't even know what her name is. They just have so much going on. I can't you know expect them to, but at the same time, I'm trusting them with her life.

[0:23:24.0] CW: Exactly. Do you go in the first day of school, or before the first day of school and say, "We need to talk. Here's the issues"?

[0:23:30.7] DG: At her old school, I did. I met all the teachers and everything before we had the 504 meeting, before school started. We would always have everything dialed away before she even walked in the doors. Now I have not.

[0:23:43.6] CW: Well, we also know that a 504 is directly related to teachers. Parents don't even need to be included on that, which I find baffling. A 504, teacher is the one that drives it and has to oversee it and make sure it happens. It's really puzzling to me that they wouldn't have any vested interest. I mean, we all know human nature. I'm thinking more of my teaching experience, I found that teachers didn't want to extend their sum. I'm not saying all. Of course, I love teachers, but I'm saying there are just teachers that would not go the second mile because it was just too much trouble and they didn't feel like they should have to. Did you run into that?

[0:24:19.3] DG: Just a few.

[0:24:20.2] CW: Just a few.

[0:24:21.1] DG: Just here and there. We've been really, really lucky with the teachers that we've had.

[0:24:23.7] CW: Do you think that's because you've invested so much time in the school by volunteering? I mean, your presence helped, right?

[0:24:29.5] DG: I think it helped, but I think the teachers in general – she was originally at Copperopolis Elementary and it was like a family there. I mean, every now and then we'd hit little speed bumps here and there, but usually we were really, really good. It's now that we're going into different schools, I don't know the teacher, I don't know the area, I don't know the people. It's all new. I have to network with those people and I have to make those connections.

[0:24:50.7] CW: She's still on the 504.

[0:24:52.2] DG: She is still in a 504. Yes.

[0:24:53.0] CW: Okay. That 504 is renewed every year?

[0:24:54.9] DG: Correct.

[0:24:55.4] CW: You have a meeting with principal, teachers. Who do you have the meeting with?

[0:24:59.6] DG: This year was with the principal and the county nurse of that school district. Before –

[0:25:04.4] CW: Are there teachers included in that?

[0:25:06.2] DG: There were not this year.

[0:25:07.5] CW: It's really interesting, because again IEPs, you don't do it without the teacher. You have to have the resource specialist. You have to have the receiving teacher. You have to

have the nurse, psychologist, you have a speech therapist, you have a crew there, a physical therapist if necessary.

[0:25:21.1] DG: In the past, it always had the teachers involved. I think, maybe because there's so many different classrooms and so many different teachers.

[0:25:26.8] CW: I also know that they're very understaffed. Very, very understaffed.

[0:25:31.1] DG: Yeah. Before it would be one teacher, that's who you have all day. Now she has seven or eight different teachers and she's going from class-to-class, so I think it's harder to coordinate that. I think it's just why they send the 504, then the principal sends it to each one of the teachers. It's different. As she grows, things are going to change. We have to roll with it.

[0:25:51.7] CW: Yeah. She does have to speak up. I'm all for children being independent. I feel that they need to. They need to be responsible for themselves. The world out there isn't going to be particularly warm and friendly. You do have to watch your back and you'd – I'm sorry to be so – it sounds like I'm so negative. I really don't live like that, but I trained my children like that. It's you are in charge of yourself. You're in charge of whether you get into that car or not. Every decision that you make has consequences.

As nervous as I was, the best thing I could do, or my husband and I could do is to teach them how to handle things and to be their own voice and to be strong and independent, because again, we can't be there. There's just no way. Summing it up, any – I know what I – Tell me about the sign that you have in your door, because this really – just listening to you, first of all, knowing you for so long, I really feel like you were our trainer in this area and then number two. I can't tell you how great that was though, because when the next round of parents walk through the door, we were prepared. It really, really did mean a lot to us. I have to say thank you for that.

You are a parent advocate and you turned us into child advocates, because we were aware and we were educated. We knew what to do. We could train our teachers. Our teachers then were educated. Tell me what you have on your front door.

[0:27:18.1] DG: I have a sign on my front door that ask people not to bring in peanuts, or any tree nut products into our home. When Sabrina was little, I had buttons that I would put on her

shirt that said, "I'm allergic to nuts. Please don't feed me anything that I didn't come with." I would have t-shirts made from her. CafePress is where I would order everything from. I have that big sign on my front door just as a reminder to family and friends, because sometimes you just forget. You don't come to the house, but on holidays or whatever, and you might forget that bringing nuts into Sabrina's safe zone is not okay.

I just make sure that that's on the doors and I just remind people, "If you're going to come over, please don't bring nuts into our home, or if you're going to eat something, wash your hands before you come over."

[0:28:01.0] CW: Yeah. Well, it's been an amazing journey and thank you so much for giving us so much time on this. Listeners, we hope this has been really helpful. As we always tell you, you can e-mail me at char@zoo-phonics.com, or char@safarilearning.com. I answer all things and I answer quickly. If you have any questions, you can also give us a call at 209-536-4926.

We'd love to hear your comments, or questions, anything that you can add to the dialogue. We're all in this together. I think one of the most important things is that we need to put other people first and we need to – sometimes, we need to put our beloved first and have to speak out and we have to learn to be assertive and still be kind, still be polite, but because we are advocates, because other people won't be at all times. Good learning thing. Thank you so much for sharing so much with us.

[0:28:56.8] DG: Thank you so much.

[END OF EPISODE]

[0:29:02.0] ANNOUNCER: That was Ed. Talks with Dr. Char. You've been listening on KAAD-LP Radio, live on 103.5 FM, or streaming online at kaad-lp.org. If you would like to have Dr. Char answer any of your questions, please e-mail your question to dr_char@zoophonics.com. Thanks for listening and stay tuned for what's next on KAAD-LP Radio.

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