Okay, so you were diagnosed at 35. Right? How long ago? Was that?

Two years and a few months ago?

Oh, okay, cool. But all of your children are neuro diverse. Is your husband also neuro diverse?

No, he is the only neurotypical in the house, which is both amazing and frustrating at the
exact same time, you know?

Katy Weber 00:24
Yeah, I'm sure, but I feel like it's always good to have somebody

Shannon Stone 00:30
heard the squirrels and he's very good exact herding squirrels. Trust me. He has years of experience now.

Katy Weber 00:35
Awesome. Okay, so why don't we start out with you telling me about your diagnosis and kind of what led up to it? And what were the signs that finally made you feel like this was this was a thing and kind of how you went about it?

Shannon Stone 00:51
Okay. All of my life, I was kind of always told that I seemed like, you seem like you have ADD because of like, certain things that I would do. And you know, say, and I guess I kind of always had it in my head that it might be a possibility. But my parents were very much individuals who don't take mental health very seriously. The you know, if you go to a therapist, and there is definitely like, you know, something super wrong with you. And you know, you're super crazy or something, you know, that just very much how they felt. And so, we didn't do a lot of like, stuff like that. And so the thought of like, going and getting a diagnosis was really like appalling to them that we would do that. So there was nothing wrong with me, I was just more dramatic than the other kids, you know, and I mean, and so it was kind of always there. But I did really well in school. I didn't have the typical typical hyperactivity, everyone always associates with ADD, so they just, you know, I guess just never really thought about it. And I made it through nursing school find and all this stuff. And so I just did, I did excelled Well, in my nursing career, I did really well in that, and I loved it, and I was able to really focus. So I never really thought anything beyond Oh, I just have some add traits. You know, when I was a kid, well, then I got pregnant and had a baby. And it was like, my entire life just fell apart and went to hell. And I was like, what happened to this person that I always was, I was always able to get things done. And I, I maybe went right up to the deadline, but I got things done on time, you know, and I was able to do all this stuff. And then all of a sudden, like, my house was a wreck, and my car was falling apart. And I couldn't clean anything to save my life. And I was struggling to
care for her. And I was like, What in the world happened to me. So basically, that lasted for quite a number of years, just kind of, you know, muddling our way through, I can't tell you how many times I got her all the way to school. And you know, I was a single parent at the time, so I was gonna drop her off at daycare, and then you know, go to work. And we would get all the way there to the before school care program. And she wouldn't have any shoes on or she would be missing, like part of her outfit, you know, and I had to turn around and go all the way back home. And I was late to work constantly when I like, never been late in my life. And I was like, What is wrong with me. So many times, I would get home at the end of the day or get to work in the morning, I looked down and there was like, you know, her bag of meds just to take before school and I had never given to her and I was like, Oh my gosh, this is like something is wrong. But again, it was just like I was a single parent, I was in the throes of that and learn this. And I was like, Oh, it's just a lot of life changes. You know, that's really what it is. And it'll even out eventually. Well, then I met my husband and we got I got remarried. And I just noticed that it was worse and worse. And it was really impacting my relationship with him, I would have a really difficult time like focusing on a conversation with him having any kind of like, good, decent conversation, especially at night after all the kids went to bed and I would be laying down with him. And he'd be, you know, oh, I want to talk to you or Hey, let's have some sexy time. And I would be like my mind just could not focus and I was like constantly somewhere else. And he said it was like, you know, where are you? Why aren't you here with me, you know, like, what's going on? And it was making a really difficult situation when it didn't have to. And so I had been talking to a friend who had recently been diagnosed and I said, Well, how did you like figure out who had this what made you go and started talking to us? And I was like, okay, that's me. That's me. That's me. And it just really started checking. I checked all the boxes, and I was like, Oh, so I went online and I took like some adult add you know, quiz. And it basically was like a quiz. You want it to fail, but I passed with like overwhelming colors. I got like a 97% is the only test to ever wanted to get an F on and I didn't and I was like okay, this is Yeah, something is definitely wrong. So I made an appointment with my PCP, my primary care doctor and I went to see him and I had printed off the results and literally wrote down like pages of information. of what had been going on for years and how I felt and when it got worse and what was going on now. And as a nurse, I was like, over prepared for this whole thing, because I wanted to have all my evidence in all my differentials. So I thought it could be this, but it's not, you know, and I took it to him. And I walked in, and I was prepared to make like, this huge speech is why I have ADHD, and you need to, you know, treat me and he goes, What are you here for today? And I said, Well, I think I have ADHD. And he goes, Oh, okay. Well, my overwhelming practice, you know, shows that with adults, they are 99% of the time diagnosed themselves and their correct ego. So if you think you have it, you more than likely do, let's get you some testing. And I was like, What like it throughout my whole life plan? And I was like, Oh, okay. So he sent me to a neuro psychiatrist. And I
went there, and it was just a computer test, because obviously, I’m well beyond school age. So they didn’t need any like, you know, teachers assessments or anything. But I did this 30 minutes assessment on the computer. And it was the most boring thing I’ve ever done in my entire life. And I think it’s obviously designed that way. But oh, my God, it was the worst 30 minutes of my life. I do is just a bunch of like, repetitive do this or like, remember these words that it said, and by the time it got to the point where you had to, like, take the words out, I had no clue what any of them were because I was just like, I could not focus. And so I finished this whole thing. And the nurse comes in and says, okay, you’re done. Do you want to print out of the results? And I’m like, Sure, I’ll take one. And so I’m in bind, checking out and I’m looking at the results. And they have like little dots on like a graph that like, show you where you are, according to like the average of people. And I noticed that my one for attention. There was no dots on the graph. And I’m like, Well, how come this one wasn’t scored, you know, and I start looking at it. Here’s the graph and the.is like way over to the right. And even on the graph, I was like, beyond, you know, like, average, and I was like, oh, okay, this is not something I think is how it’s supposed to be right. This is obviously I probably tested way more for ADHD than I thought I would. So I made an appointment, then the next step was to see my PCP again, to go over the results. And then you know, discuss them. And he comes in for that next appointment. And he’s like, well, I’m sure you probably already figured this out. And he goes into seeing answer we knew He’s like, but you are overwhelmingly ADHD and attentive, he’s like, it’s not even like a question. He goes, You scored so high on that, he’s like that I’m really not sure how you’ve managed to succeed as well as you have, you know, with all these issues, and I was like, Oh, I don’t know if I should be proud of that, or like really upset that I’ve struggled much harder than I needed to, you know, so we discussed meds and I did decide to try some, he talked about middle ones that are shorter acting longer acting, we decided to go on a longer acting one, because at the time, I was still working as a nurse, and you’re not guaranteed breaks, even though you’re supposed to get them and I just was like, I don’t think I’ll be able to find the time to stop in the middle of the day. And remember to take a second dose. So we started a long acting one. And that definitely, immediately on my first dose within like an hour of taking it my brain for the first time that I can remember my entire life was like quiet. And like there was not stuff running around and it no thoughts no random song playing in the background. It was just like, Oh my God, is this what it’s supposed to be like, and it’s been that way ever since I now since being a few years into this and really coming to understand me better do a combination of meds and Herbes. But for the most part, on the days that I still work as a nurse, I use the medications, just because I have people’s lives in my hands. And I don’t want to make a mistake, you know, so. But yeah, that was kind of the process. And in the process of doing that, started realizing that my daughter also has a lot of these same symptoms and struggles and so we’re in the process of getting her formally diagnosed. But that’s been kind of crazy because it COVID so
Katy Weber  09:02

yeah, I have the same experience with my son. He's nine How old is your daughter? Um, she

Shannon Stone  09:06

will be nine in May. So she's eight. Yeah.

Katy Weber  09:09

So is she in third grade or fourth grade? Third grade? Yeah. So my son's in fourth grade. And it's the same sort of, you know, I talked to so many women who to sort of discovered their own ADHD after their child was diagnosed, I didn't have that experience. I like you was diagnosed and now I'm looking at both of my children under this microscope. And you know, and and I have been extremely grateful that I'm able to help my son to the degree I am with his remote learning. He's in like a hybrid model now, but again, I'm like, God, like I was just talking to him the other night about whether or not he we were going to get him diagnosed, because he asked me he's sort of like, do you think I have it and what does that mean? And, and I'm like, what, I don't even want to think about it right now. Like I'm like, for now. We're helping you everything's okay. Once we're back into school again, like full time That I think we're going to look into it.

Shannon Stone  10:02

go from there. Yeah, exactly. Yeah. That's kind of how I am with her right now. It's not a rush, you know?

Katy Weber  10:07

Right. Exactly. Yeah. Because I think so much of the treatment is based on just lifestyle changes and having that awareness of what you actually need in terms of extra help and structure. And so I feel like a lot of his treatment has been just my help. And I love that you had a such a supportive doctor, I also had a very similar experience in, you know, showing up with all of this paperwork. I'm not even a medical professional, at least you had that as well going for you. Like, I just was like, I had all this paperwork, and I over studied, and I wanted to make sure because if I was so afraid, that if I didn't get the diagnosis, then what right and so right, yeah, so, of course, I show up without this paperwork of mine, she was like, Yeah, don't worry, it's like, you don't have anything to worry about. It's so clear. But it
drives me crazy. When I hear stories of women who have gone to their doctors who are just so dismissive. And like, they're just like, No, no, no, it's it's depression, anxiety, or no, you're just a mom of young kids, you know, like all of these ways in which doctors immediately dismiss it, either because they're not struggling enough. Or like you said, like, your doctor was surprised that you were able to be successful in school or successful nurse, you know, and all of these ways in which our own self awareness and our own self diagnosis is, is like, rejected in the doctor's office. And I'm what, like, I feel like you probably were much more well equipped, given your background, but I'm like, What would you? What advice? Would you give somebody who experiences that? Because I'm always like, I never know what to say, like, I'm so in shock. Other than get a second opinion, obviously, you know, it just surprises me that there is so because by the time we get to the doctor, we've done so much research, we know in our bones that this is what it is. And then to get that rejection must be so devastating.

Shannon Stone 12:00

Yeah. friends come to me and ask me that a lot. Because they're like, well, you're a nurse. So you felt more comfortable standing up to the doctor, you know, how would I do that? And I said, Well, the first thing you have to remember is the doctor actually works for you, you are paying him or her the you know, to take care of you. And if they are not meeting your needs, you have every right to fire them and find somebody else who will meet that they are providing a service just like anybody else, their service just happens to be medically related. And yeah, they went to school for, you know, eight years or whatever. But that doesn't mean that they know you better than you know you. And so yes, they have an opinion, yes, they have this knowledge, but you've done your research, you know, you you know what's going on, and you have every right to stand up to them and say, Hey, I don't agree with this, I want a second opinion, or I want you to look into it better, or I want this test run on me because this is what I feel. And this is what I want. And if they don't want to do that, that's their right to say no, but then you have the right to go find somebody else that, you know, push an advocate for yourself. It's difficult to truly is I've had several doctors, more pediatricians on my, you know, my daughter, kind of like talk down to me and act like, you know, they know more than me, and I was just like, No, you know, you know more about certain medical things than me that is true, but you do not know my daughter better than me, you know, and I am going to advocate for this. And I am going to push, you know, and you know, either do what I asked, or I will go find someone else because I don't, you know, I don't need to sit here and pay you money for something that you're not providing.
Katy Weber 13:32
I felt that very much with my kids to a pediatrician, which was like getting to that realization when they were babies that I you know, that they knew they had a general sense of Pediatrics, but I knew my child so much better than this person and that I was my job to kind of advocate and interpret that. And yeah, so that’s a great point. And I really related to what you were talking about, like once you do have kids, you know just sucking at your job, and also feeling like you’re sucking at parenting and it’s like how did this you know, it’s like you can’t win? It’s like, if I could just do one of them. Good. Right? Exactly. I know. Like whenever, like I’m sucking at both so yeah, and why we tend to kind of fall apart when a baby’s thrown into the mix like that.

Shannon Stone 14:21
I do think a lot of it does have to do with hormones. I’ve been reading a lot up and researching for my own you know business about ADHD and hormones and how they interact with each other and there is overwhelming support that estrogen and the production there have and how your body uses it actually does cause you to worsen in ADHD symptoms and women over men because men who also have estrogen don’t have it at higher level high levels like we do is women and so because of that, it does really cause more issues with our symptoms and our ADHD as we get older, whereas men have the opposite experience as they get older. And their testosterone levels drop their ADHD symptoms go the opposite way and get better. Whereas ours tend to get worse because their estrogen levels increase as we get older to help with menopause and get us through that. Period. And

Katy Weber 15:14
that is super fascinating. I’d always you know, I’ve have heard about estrogen levels affecting women and even just the monthly cycle and how symptoms can change on a month to month basis with menstruation. But like, I’d never thought about the male side of it, that their symptoms would, why their symptoms are so much stronger in childhood. And that they they almost do sort of lend. I don’t even want to say this because it’s too controversial. But like, you know, that that myth that you outgrow ADHD just feels so wrong from a female perspective. But I can I will see why they felt that way with some men, when men were the only people who were being researched research.

Shannon Stone 15:58
Exactly. Since the majority of research was based on males only then that would explain
why oh, you can outgrow it. But women have the opposite experience more so than men because of our hormones changing in a different way than theirs do as they age. Well, now

Katy Weber 16:13
I'm curious too, because I remember listening to a Bill Bryson book. Do you know Bill Bryson? He does those like history of everything books. Yeah, he's super fascinating. I think it was at home. I can't remember it was either the body or at home. But he was talking about medication and how, you know, almost all medication is only tested on men because of the hormonal fears in you know, they don't like to test on women. And I'm curious, do you know anything about is that true? And is that? Does that extend to ADHD medication? I'm sure it must. Right.

Shannon Stone 16:46
I know for ADHD medication, in particular, and I'm not sure about other medications, though, I would err on the side of agreeing with him. Was that yes, most ad ag ag ADHD medications were only tested on males, because they again, felt it was only a male disorder. So they didn't test the effects of the medications on women, like they would for maybe other medications, because they didn't really feel it, it affected us. So I guess we didn't need testing. Included in the trials. So in that case, yes. And that's why I think there is still that stigma of like prescribing, you know, stimulants or other things to women, because they just don't have the data to say, yes, this is definitely gonna work or, you know, have that information that they need, you know, so

Katy Weber 17:34
we are the test subjects right now.

Shannon Stone 17:38
Basically, yeah, we’re just all the guinea pigs.

Katy Weber 17:42
So let's talk about your schooling because you I'm fascinated to think about how being a nurse with undiagnosed ADHD for so long and looking back, how, what were some of the things that you look back and think like, of course, that was obviously ADHD. I know, you
said that. You had been told throughout your life that maybe this was something you had
lightheartedly. But I mean, what were there some struggles that were unique to nursing
because it’s so stressful, and so high, such high demand, and I look at all those nurses who
are outside the hospitals chain smoking, and I’m like, Yeah, I get it, girl I understand. You
know, I think about,

**Shannon Stone** 18:23
we're all a bunch of like, secret closet, alcoholics and teams.

**Katy Weber** 18:28
Because it’s so stressful. But so it’s fascinating to me, whenever I meet anybody with
ADHD in the medical field, yeah,

**Shannon Stone** 18:35
no, definitely. The hardest part of nursing school for me was the fact that nursing is very
holistic, meaning that we learn about all the body systems, and we don’t really specialize
like doctors do. Doctors go to medical school for four years, which is kind of like that
broad scope. But then they go to residency for four to eight years, where they really just
tamp down and specialize in one thing, nurses don’t get that we do four years of school.
And we get that very broad, you know, we learned about all the body systems and all the
different, you know, everything, all the different types of nursing you can go into there isn’t
really a lot of, you know, specific training. And so because of that, there was some things I
found out very quickly that I’m like, Oh, I don’t like this type of nursing, and I don’t ever
want to do it. And so it made it really hard to be able to, like, pass those classes, because
it was just like, I don’t like this part of nursing, and I don’t want to even you know, get into it
ever. And so you still have to pass that class though to you know, get your nursing degree.
And so I always joke that psych nursing about, you know, took me out of nursing
altogether, because that was our second clinical that I ever did was in the psych nursing
and they walked us into this psych ward and I you know, as a basically I was like a 1920
year old kid, I went straight from high school, nursing school, I’d never been in a psych
ward. I’d never knew anybody that had, you know, mental health issues. I’d never been
around any of that. And so they walk us onto this lock. Down unit and they lock all the
doors behind this and they’re like, Okay, good luck. And there’s people screaming, and
there’s all this stuff going on. And the nurses are behind glass and locked in this, you know,
like nurse’s station, and I was like, Oh my god, what did I get into? Do I really want to be a
nurse, this is terrifying. You know, and I don’t know, if they purposely did that right at the
beginning of nursing school to kind of weed out those of us who definitely were not cut out to be a nurse. But it was just very, like an intense clinical, you know, that I went from, I'd never even been in a hospital outside of, you know, as a patient to now here I am supposed to be in charge of, you know, taking care of patients, and they have us in this lockdown unit. And if something goes wrong, there's nowhere to go, you know. And it was just, it was very frightening and scary to me, it's something I'd never had experience with. And I just found very quickly that psych nursing was not something that I was interested in doing long term. And so it made it really hard to, you know, take the tests and do the studying for it, because it just didn't interest me like other parts of nursing did. So that was the hardest part of nursing school was just trying to muddle through and get good grades. So you could continue in nursing school, when doing stuff that just really wasn't very interesting at all, you know, to me as an ADHD person, not realizing at the time, that's what it was, I just was like, Is everybody else not bored to death with this subject, you know, and everybody else seemed to be fine. So that's when I thought, Okay, well, maybe it's just a me thing. And you know, apparently, it was just a me thing. But I didn't realize why at the time, it was, you know, anything. So that was the most difficult part that I experienced. And I much preferred the hands on stuff. I've always been a very visual and like, tactile learner. And so doing the clinicals in the labs were something that was way more interesting to me than sitting in hours of lectures learning about, you know, intestines and bodies and how they work. That was interesting. And yeah, I was like, that's great. But let's go, like, take care of people. You know, that's what I really wanted to do. And so it just was a little, you know, difficult some weeks and months, as we got through some of that stuff.

Katy Weber 22:09

And then how did you discover herbs and you’re an herbology?

Shannon Stone 22:14

Well, like I said, My parents were a little distrusting of medical professionals growing up. And so we didn't actually see doctors very often, if we were sick, we were, you know, at the herbalists office, or we were at the naturopaths office, or my mom was, you know, picking some Herbes and she was, you know, giving them to us, or we were going to the chiropractor for different things, you know, and we just never I'm not saying we never saw doctors, but for the most part, it was, you know, very natural minded herbal stuff that we always did. So I kind of grew up with that being like the case. And so going into medicine kind of changed that a little bit. And the fact that I don't, I mean, I never really
know what, yeah, what is going into medicine.

Well, that was a whole nother subject as I grew up in a family that really didn’t think that women should be working at all. And if you did work, the only acceptable professions were teacher, or, like, Secretary, you know, nothing that was going to put you in a position where you were like, over other people, it was never a chance of you being like, in a leadership position, or taking over a company, you know, and your main job was to stay home, get married, you know, have a bunch of babies and stay home and homeschool, and raise the kids and take care of the house, that was the main job, they pushed all of us to, you know, get into and so me just relieving all of that and saying, well, I want to go be a nurse, which was something that you are in charge of other people and you are taking control of things was just like, foreign to them. And I, I think their minds were just kind of like, because why did it why you want to do this, you know, that they, you know, they came around to it, and they, you know, seem to be okay, especially because I don’t know if I kind of just paved the way being the oldest or if my sister was more rebellious than we realized. But she, she went into medical as well. And she went to become a respiratory therapist. And we were only two years apart. It was shortly after I left that she was leaving to to you know, go do the same thing. So I'm pretty sure we kind of blew the the lids on everything there. Were. So it was Yeah, but as I got through school, and I did you know, the nursing stuff, I just found that Herbes really do complement very well. The, you know, modern medicine side of things. There's a lot of our medications that we prescribe to people that were actually made because of Herbes. They found different compounds and stuff in them and different active constituents that really were useful. And they were able to synthesize those and make medicine one of the most common ones that Everybody knows now as aspirin, aspirin was actually compounded and made from one of the active constituents in meadowsweet, which is salicylic acid, they discovered that and they were able to synthesize it, pull it out and turn it into aspirin, which everybody knows, and uses, you know, all the time now. So a lot of our medications that we use in modern medicine actually came from the Herbes, because they would see, well, you know, the Native Americans used it for this, and how come it's working for that, you know, and they started really doing a lot of research and found a lot of our modern meds. So to me, it was just kind of a natural transition to transition from, you know, modern medicine to Herbes and kind of combine the two of them together and do a, you know, a whole business surrounding that, and helping people kind of use the Herbes to complement whatever medications they're on or to help with whatever disease process they're going through that could use some more relief that they're not getting from just the modern.
Katy Weber  25:58
And what are some of the Herbes that you sort of intuitively, were drawn to that now you realize, help with ADHD?

Shannon Stone  26:07
Well, one that most people don’t associate with this, which is why I thought at first, I was crazy. But you know, ADHD individuals do tend to be more intuitive, or maybe just we listen to it more than other individuals. But our intuition is really strong about a lot of things. And I just intuitively knew that taking Hawthorne would just help with my ADHD symptoms, and it definitely has. And I’ve gotten told by several people, many people actually that well, that’s not what that herb is for. And they are correct in the fact that it’s typically known as the cardiac curve. It’s like the gold standard cardiac curve, Hall soreness. But I ironically, in helping with the cardiac issues, and basil dilates, and it causes the fact that it now allows more blood flow to your brain at the same time. So I’ve noticed that when I take it, it increases my focus. And I’m not sure if it’s just because of the increased blood flow, or if there’s something else that it also does that it just hasn’t been studied for. But I take that one on a regular basis. And that really helps mine, I give it to my children. And I’ve noticed it really helps theirs as well. So that was one of those things that was very like, to me intuitive that I was like, you know, I should take this and that’ll help. And you know, it does, but it’s not exactly what it’s usually used for. There’s a few others that I like as well, Valerian really works well for that. And this one, I don’t recommend all the time for individuals who are looking to because of how it works, and the fact that it is something you just got to be cautious with. But ashwagandha is definitely something to that helps improve focus. But as it’s an adaptogen, we had to be very careful in how we use it, because it adapts to what your body needs the most. So, if your body needs, like lots of recipes, you know, ADHD years, we tend to have insomnia issues as well. So if you take this, it may help with your focus, but it may also decide that what your body really needs is rest and it can just make you very sleepy. And to our cause you just fall asleep randomly. And I mean, you could be driving down the road and you know, that’s just so it’s very unsafe, it’s not something I recommend taking on your own without like the, you know, having someone who has some knowledge of Herbes like herbalist like myself or somebody kind of, you know, managing that for you and seeing how it works and adjusting the doses needed so that you’re not, you know, putting yourself in potentially unsafe situation. But those are the ones that I use the most for myself and whatnot. And I find that they work, you know, great for that. Intuitively, even if some of them like I said aren’t typically used for that, because that’s definitely not the first case like I said for Hawthorne, most people don’t think of it as a ADHD herb, you know, at all.
Katy Weber  29:07

That is super fascinating. I love that. So when you say it's really helpful, it increases your focus, what is what else is doing for you? Or what do you have you noticed with your kids too,

Shannon Stone  29:17

I've noticed that it really calms my brain just very much like my stimulant meds do. Like I said that first day I took my stimulant and I felt like within an hour like my brain was just quiet. I very much feel that same way with Hawthorne. It just very much makes me feel like my brain is quiet. Which if you have the same hyperactive brain, you know is a very like weird thing to experience when you're not used to that. So which is nice that way with hilarion I've noticed that kind of helps with my anxiety I have. I didn't realize I had anxiety until I got my ADHD under control. And then all of a sudden I was like, Oh, I guess I had way more anxiety than I realized when it was suddenly gone, you know. And so the Valarie and really helps with that part of it, where I get anxious about starting a task or completing a task or, you know, if I finish this task, then you know, what do I have to do next. And you know, like that whole process that our brains go through every time we're trying to figure out how to do something or what to do next, I've noticed that really helps with that part. So kind of combining them together works well for kind of most of the symptoms that I experience, personally. So

Katy Weber  30:29

now, it's fascinating to me, too. I mean, when you Google supplementation and ADHD, it's just, it's the Wild West. I mean, there's so much out there and when I thought about this when you were talking about ashwagandha, because, you know, so many of us have different reactions to so many different natural supplements like think about like pot for instance, there's half the ADHD population swears by it and says it's the greatest thing ever. Yeah, I personally get paranoid and I get nauseated and I it's, it drives me crazy. Like I there's no possible way I can take it. And then I think about like melatonin, it's a magnesium. These are things that are recommended. I have they keep me up all night, I've had the exact opposite experience. Just recently, I started taking B six, I've had some great experiences with B six, in terms of just my like emotional regulation. And again, that same kind of calm, that calming feeling you talked about which I did get with vyvanse as well. That was sort of the biggest thing I noticed, which was that Yeah, just like my brain felt calm. But I also didn't notice any difference in keeping to task or some of those things that I struggle with it. I still felt very distractible, even when my brain was called. But definitely felt like more like chill. Like, I remember saying to my husband, when I started
taking vyvanse I was like, I feel kind of like how I imagined people on pot, like who'd like pot must feel like and but then would be six I remember when I first started taking it the bottle, you know, the recommendation was to take it first thing in the morning because it can be disruptive to sleep. And one day typical ADHD I have my pills in the like morning in the evening slots of the pill things. And I accidentally took it at 6pm and was like, Oh, great. This will be a fun night. And I ended up having the best sleep I had had in ages. And I was like, Huh, interesting. And so I’ve started taking B six after dinner and I sleep like fantastically, I can’t remember the last time I’ve had this great sleep. So I’m like, you just it’s the what like you just never know like, what am I like? What do you do? Is it just trial by error? Is it just like? Or do you really like working with a professional is really going to help with that feeling of just throwing darts at the wall.

Shannon Stone  32:43
I totally get that feeling that you were talking about. That is definitely how it seems to go with a lot of things. But I do recommend working with a professional because we have a lot of experience and knowledge of the Herbes and how they work. And that definitely helps in our choosing of which verbs we use for individuals. And like me personally, when you come to me and you say, Hey, I really want to get this ADHD under control. I don’t just say, oh, okay, here’s some verbs for ADHD. I say, Okay, here’s my form, fill this out. And 15 pages later, you have filled out your entire health history, your surgical history, other problems that are bothering you. And then we sit down and we have a really long discussion about Okay, now what’s really bothering you? How is this affecting you? How does this work? What’s going on over here? And you sit there and you tell me your entire story about what’s really going on what’s really bothering you. And from that I extract, okay, well, she is distractible, and she is you know, having some focus issues. But what I’m also gathering is that she’s not sleeping well at night, which is probably not helping her focus. So she needs some help with insomnia, even if you never mentioned Hey, I have insomnia, or you know, you’re sitting and you’re telling me, you know, I feel really fatigued all the time, and I just don’t have any energy, well, you’re not gonna be able to focus Well, if your body is sitting there telling you you need to sleep or you need to rest. And so what we do then is I sit there and take all these concerns of, you know, things that maybe you weren’t even thinking were part of the problem. And I come up with a, you know, bunch of different Herbes, and then I narrowed down to which Herbes will work specifically for that problem. And with Herbes more is not necessarily better, so we don’t need to necessarily take 10 or 15 Herbes What you need is two or three Herbes that are specific for what you’re going through. And that can help us specifically for that body function and get that together. So then we would choose you know, just randomly off the top of my head like you know, hops for you to help you get some sleep at night but also help with the focus and it’s a tonic for your nervous system as well. So you want the tonics to be the biggest
part of the blend to help your body get the rest that it needs and heal itself and focus on you know, feeling better. And then I’d be like, okay, and you said Valerian works for you. So we are let’s try some more Valerian, this time, and You know that we would say, Oh, well, she needs really hope with focus. And you know, Hawthorne has worked for a lot of my clients, I’m gonna throw some Hawthorne in there as well. So then we'll do that. And then I’ve noticed she keeps he said to me, you know, Hey, I just find that I don’t eat that much because I get so hyper focused sometimes or I get distracted, I forget to eat. So then we'll throw in some wild oats as well, which is a nutritive and will help your body get the nutrients that it needs, which will also help with focus. If you’re getting enough, so then we would make this blend, and we would decide how is best to dose it for you, we would do it in fusion, which is basically like a tea or a decoction, which is also like a tea. But instead of pouring the boiling water over the herb, you boil the herb in the water, because they’re like us for fruits and seeds, things that are harder to just pour boiling water, we need to boil them to extract the nutrients and the active constituents. So we would do that or we would go with like a tincture. Like if you work outside the home and you’re like, I got to take this three times a day, well, I’m at work, I don’t want to have to boil water and dump it over my Herbes last night. And I get that because I work as a nurse, trust me, I understand that it’s like, impossible to get away to go boil some water sometimes. So then we would decide that, hey, you know what, I think a tincture format is easier for you. Because you just have to pour out, you know, two to four milliliters, you slam it back and off you go, you know, so it’s easy to do. And so you can carry in your pocket at work, you know, or your purse or you know, whatever you have. And so we would decide which way was best. And then we give it 30 days, we do 30 days where you take it, you know regularly as the dosing instructions, go and follow it. And then after 30 days, or right around 30 days, we meet back and we do a follow up appointment, and I discussed and you tell me, Hey, I felt great for the first week. And then the second week and third week, I felt like this and then the fourth week, I was feeling better again, and we go over how it made you feel. And then we tweak some of the Herbes like maybe now you’re getting too much sleep it Okay, so there’s too much malaria, we’ll back off on the glare and some and see if that helps. And we’ll add some more of the hops because your focus was a little better, but not much. So we just we tweak things, and then we give it another 30 days. Herbes are wonderful, but they do take time to build up in your system, and you do need to give them that time to work, you can’t take it for two days and say I don’t feel any different and then quit. It’s definitely, you know, one of those things where I didn’t feel any, you know, thing right away, and you know how our ADHD brains are, we’re like, oh, we didn’t get immediate satisfaction. So I’m done with it, you know, and unfortunately with Herbes, you do have to give them a chance to kind of build up and give your body some time to especially if you’ve gone years and years and years without, you know, any kind of treatment for this or anything at all, your body is tired, exhausted, it’s stressed, and it needs time to recover from that. And so we usually, depending on what we’re treating
anywhere from six months to a year is what we're usually work together and, you know, tweak things, if we need to, once we find that like perfect blend for you, then we just do you know, refills as needed. And you know, off you are on your own, and we, you know, are done with the whole I'm up in your business all the time part of it, but I'm always available, obviously for like help or assistance or if you have any questions or anything like that, but I just find that personally with Herbes, especially it's best to work with someone who knows what they're doing with them, it can help you tweak them. So that again, you're not like you said, just throwing things at the wall and hoping something sticks in this case, you would have a much better plan right out of the gate of more things sticking than just a couple here and there.

**Katy Weber**  38:26

Well, and not only that, but just asking the right questions. I think that's something that's very difficult for us with a sense of, you know, with an attentiveness and like you said the impulsivity of wanting things to work immediately. I relate to that so much when it comes to medication, but just like that, not knowing really what you're leaving looking for. I think that's something you know, when I first started this podcast, I was asking every guest like, are you on meds? What do you mean, when they're working? Like what is? This? I sometimes I feel like managing symptoms is a full time job because there's so many factors. And there's so many questions. And I don't know, today, I felt focus, but yesterday I didn't. So does that mean it's worth you know, like, it's just, it's exhausting thinking about that. And so sometimes, we don't really pay attention to what is or isn't working like, have you been in a better mood the last two weeks? I don't know, maybe you should ask my husband like, you know, like, like, those sorts of questions. I think it's so important to have somebody holding your hand and and, and it's just making you stop and sort of pay attention because I think that's so difficult for us. And then you go to the doctor and they're like, are these meds working? And you're like, I don't know. I yes, no, I don't know. Yeah. So yeah, I think that's such an important part of of having somebody coaching you along on this journey in anything you know, not only with your health, but also just your business and just life and your relationships and all this stuff. I think that that's something that I've learned so much of my since my diagnosis is that importance of asking for help in all areas of life and that there's no shame in that.

**Shannon Stone**  39:56

there's not It feels like it just because of how we're raised alone. As women in this society, you know that we're supposed to be the be all end all of you know our families. And when we're not, then well, something's wrong with you, and you're a bad mom, and there's that or a bad wife. And there's that shame that comes with it. And there shouldn't be. There's
nothing wrong with asking and needing assistance. Everybody needs that.

**Katy Weber** 40:16

Well. And I think also, not only is that there, the pressure on us as women, but I think also like, we generally are bright people. And so I think we tend to feel like, I am smart, why does this elude me, you know, and because it’s, so I think there’s the added element of being women and feeling like, we have to have it all and have it all together. But then also, like, we are puzzle solvers. And it just like really bothers us when we can't figure out and from

**Shannon Stone** 40:43

that problem solving thing, we’re really good at solving everyone else’s problems, always I can find a solution for anybody's problem right now, if you hand it to me, but so how come I can’t find a solution for my problem? What’s wrong with me that I can't figure it out for me, but I can figure it out for you know, Joe Blow across the street, you know, and I think that too, there’s a lot of that, like, self imposed shame as to Well, I can do this for everybody else, or I’m really great at this for everybody else, how come I’m not really great at this, me. And, you know, there doesn’t need to be that either. But a lot of that is also, you know, stuff that we get in our childhoods, too, you know, we get that from, you know, the schools or even our families like, well, how come you can’t do X, Y, and Z, you know, in there, if you have multiple kids, and then sometimes there’s a comparison thing, what your sister's doing X, Y and Z, how come you’re not, you know, and I think we get that in our internal monologue and we start telling that to ourselves, too. And we're, we really need to be more positive and understanding and give ourselves more grace that, you know, it's okay to struggle, it's okay to need help. It's okay to not know the problems, or the answers to the problems that you have. And we need to work more on you know, self love with ourselves and positive self talk that we always tell our kids to do, and we teach them, but we need to be you know, doing that better with ourselves as well.

**Katy Weber** 42:00

Preach. Yes,

**Shannon Stone** 42:02

I am preaching to the choir because I totally need to do that. But I don't wait. yet.
Katy Weber  42:07

know. Right. But yeah, so now your business is called the Nomad apothecary. But that's not just a name. You are literally nomads. Tell me the story behind selling your house and really kind of take it on the road with your kids and your dogs and your parrot. Yes. It's It's such a I mean, it fills me with so much wanderlust. I think it makes perfect sense. Because I think minimalism is something that we crave and really benefits us. I love traveling. And there's so many days where I turned to my husband, I'm like, Can we please just chuck it all and and move to a trailer? So the fact that you actually did that? I love it. So yeah, tell me that story.

Shannon Stone  42:50

Oh, so this was back in 2019. It was almost a year after my husband and I had gotten married. And we just got married in December of 2018. And come like that January, February, there was a lot of talk at his job of layoffs coming up and things like that. And this was kind of a common thing in his job. They were well known in the area that we live of about every five years having like a massive layoff because they would finish like a big project. And then they would lay off all the people they didn't need anymore since that project was completed. And then like two years down the road, they'd be like, Oh, well, we're starting a new project. And they'd rehire a bunch of people. Right. So they were it was kind of a cycle thing that they had going on. And so it was reaching the end of a major project. And so we knew that coming up, it was going to be that and he's like, I just don't know how many more times I can sit here and wonder if I'm going to be cut from my job, and we're going to lose the insurance or we're going to lose the stability, you know, and I totally understand that it's very stressful not knowing, you know, every, as soon as a big project ends, you're gonna have a job anymore, you know. And so we kind of just got talking about, well, if we could do anything else, besides sit here and work for this corporation, who obviously doesn't care about us and doesn't care if they mess up your whole life by you know, laying you off suddenly, you know, and they always seem to do it right at Christmas time, too, and never feel to be like end of November, beginning of December. They lay everybody off. And so you know, like, we just didn't want the holidays to be ruined and all this stuff. And so we got to what we do and I said well, I used to do travel nursing This is before I got married, ever had kids that it was just me and my dog and I absolutely loved it. It was so much fun. I got to go to different hospitals all the time, different places. And it was just enjoyable because it really helped with that whole ADHD, you know, impulsivity thing where you get to war with the jobs then you just quit and go find a new one. But I didn't have to worry about that. I still had the same employer in the same job and when I got tired of being at one hospital, my time the up and up go somewhere new. So I constantly had that new Learning thing going on and everything,
and I loved it. And I said, You know, I said, since I had a kid and I was, you know, suddenly a single parent when I wasn't expecting to be I said, I had to give up that travel nursing in that lifestyle lesson that you kind of miss it. I said it would be, you know, interesting to go back into that. And he was like, Yeah, yeah, but how are we going to do that? We have four kids now. And, you know, we have the two dogs. So we have a house here. And like I eat, it would just logistics seems unrealistic. But I guess we kind of sparked a fire in each other. Because before we knew what we happen to be, you know, the kid put the kids to bed one night, and I said to him, I said, I have something I want to talk to you about. He's like, Yeah, I got something, too. And we literally said the same thing. At the same time, I think we should sell our house and move into a camper. Because then we would be able to do the travel nursing and you know, not have to worry about having so much like overhead and stuff. And my husband's like, no way. You've been a mess. Yeah, I said I didn't think it I didn't know it was a thing. Because when I was a travel nurse, I was single, I didn't think about needing a camper or anything, because I just stayed in hotels or Airbnb and stuff, you know. And I said, so I didn't really think about it, I said, but that just makes perfect sense is that I found some YouTube videos. He's like me too. And so we just kind of talked about it. And it was hilarious. We just got really, we're on the same page. And so we decided that was February of 2019. And we said, You know what, let's just go ahead and try this, even if nothing else happens, even if we never actually do the travel nursing, but we just sell the house and we downsize and we get rid of some of our bills. Even if you know, the layoff hits us at the end of this year, like we were, you know, worrying about we will be okay, because we'll have minimized so much stuff that will be good. So we went ahead, and we decided that in February, we got a hold of my realtor that it sold me the house and let them know we wanted to sell it and they came back. And so we did this stuff. By the end of March, we put it on up for sale on the market. And within 30 days, we had an offer on the house. And then we ended up closing like at the end of May. So we decided in February, we want to do this. And by the three months later, we were like sold the house and we're signing papers. Yep. And so at that point, we didn't really have a choice, we had no return, you know. So when we found out that we were definitely you know, selling the house, we went we bought the camper, and we started moving stuff over slowly. And two weeks week, something like that, before the house closed, we officially moved into the camper, and started living in there and just immediately kind of fell in love with it. It was just so nice. We had so much more time with our kids. And even though we had less stuff, we found that we were spending more time together as a family because we were you know, we didn't have you know, a TV really anymore. And so the kids in us were glued to it at night, we were playing board games together, we were spending time together. And so we said even if we don't travel with this, it's great, because now we have more time with our kids. And that's truly, you know, something that we really wanted and we're hoping for. And then September end of August rolled around, and they started the first wave of layoffs, and he got hit with them. And so he gets that whole pink slip and you
have to leave and we were like, Oh great. Now, what do we do? You know, and thankfully, because we get downsized, we were like well, we’re gonna be okay. And right around that same time, the job that I was working at decided that they weren’t hiring any more people, even though we desperately needed some more. So I was going to have to start working like 100 hours a week. And I was like, I don’t want to work 100 hours a week for several reasons, the main one being that that is really not conducive with my ADHD, you know, to be working 100 hours a week, and then I’m not going to see my kids or my husband and that you know, something I really want it to be able to do. So I called up my old recruiter, and I was like, Hey, what do you think about me getting back into travel nursing, but this time it would be for GI instead of med surge? And she was like, Well, I don’t know, let me look into it and see, you know, what kind of contracts are out there. And so she found one that was not too far away in Virginia. And it was, you know, starting with next few weeks. And she said we can kind of rush the process along and get you in there if that’s what you want. And I said, Well, let me just discuss it with my husband, you know, so I came to him and I said, Look, I said I don’t want to have to work this much. I don’t want to have to miss out on the kids. I have this opportunity to go back and travel nursing. And we could do it. And he was like, Well, you know what you just never know until you try. So let’s just take the leap. And so that’s kind of what we did is we just decided I just accepted the contract and I signed it. So it was like no backing out at this point. And we just went for it. We traded his truck in and got a bigger truck that could pull our camper better and further and safer and all that stuff and We downsized even more of our stuff so that it was a little bit lighter, and we weren’t gonna have to worry because we were trying to drive it into the mountains of Virginia. And we went, and we absolutely fell in love with this lifestyle, our kids absolutely love it, it is totally helped all of our ADHD, spending so much time outside in nature and just closer together as a family has definitely been a huge blessing. My one super anxious dog has actually gotten better, and, you know, done a lot better being in this kind of lifestyle more than I thought she would be. And then last year, when COVID hit, and it was just everybody was losing their jobs left and right. And it was crazy time at the beginning. Even though I did get I lost the contract, I was in the middle of a contract when they cancel it because COVID hit and our unit wasn’t having any patients and so they closed down. And instead of just letting me float somewhere else in the hospital, they just cancelled it all together, we were actually okay, because we lived in this small little, you know, thing, we had our own power source and we had our own water source, we were able to, like survive. And when I got a new contract, we just were able to pack up and drive over there and do that. And it’s just it was actually, I was very grateful at that point for being a nomad. Because we were able to, you know, not have to worry so much as everybody else did about losing the roof over our heads or our kids not been able to eat, you know, so it was a blessing that we were able to, you know, have this lifestyle. And then Mae rolled around, which is my daughter’s birthday, and she had been begging for about six months for a parrot. And she is definitely one of those ADHD that can hyper
focus on whatever and she like gave us this whole presentation on why she needed to pare it, how she could take care of it and what parents did and all this stuff, cuz she'd been watching all these YouTube videos and researching online about parents. And I looked at my husband and I said, Well, you know, we really can't not get her a parrot now. Like she put all this effort into, you know, telling us why she needs and could use a parrot. So for her birthday last year, we found a parrot and we bought it. And here we are now with two dogs and a parrot and a gaggle of kids and our little RV. And it's been great. And so yeah, the name for my business kind of came from that. I liked the name apothecary because it's the very old fashioned term for like a pharmacist to compounded their medicines. And that's very much what I do. And then the Nomad just kind of, you know, fit in there, because that's very much what my lifestyle is. And what I offer is the ability to be the herbalist for anybody, no matter where they live, I don't have to necessarily be, you know, in the same city as you, you can find me online and we can do everything virtually. And so no matter where I am, you can still get my services. So it just kind of really worked out. And that is it. That's just being a nomad has been so much fun. We do so much hiking and camping and everything. That's just amazing. And

Katy Weber 53:09

I feel like so many life stressors would be gone. And so many sources of my own anxiety would be solved if I could, if we could live that lifestyle sounds great. Yes,

Shannon Stone 53:20

definitely. And with the stimulus, the first stimulus that we got, we actually used it to purchase a generator so that you know if anything happened, campgrounds are notorious for losing power, because they get like a horde of people that come in on like the weekends, and they all hook up at once. And they turn on the power that it you know, kills the grid for a little bit. And it can be a few minutes or it could be a couple of hours. And so just having that peace of mind that we had a generator so we could always have power is just been, you know, immensely helpful as well. So

Katy Weber 53:51

awesome. All right. Well, I look forward to see more of your herbal videos online and check it out or from your website. I'll have that all Oh, yeah. So how can people reach you? I guess we can. I will have it in the show notes your website. But what are you saved here? Right?
Yes. Well, Facebook, I have a Facebook group that’s called the Nomad apothecary with Shannon and master herbalist. So you can come there and join that group or you can find me on my Facebook page, which is facebook.com slash health by nomads and where you can find me on my Instagram page, which is also at health by nomads and on my website, which is the Nomad apothecary.weebly.com and that has all the information on booking like appointments or consults and things that I offer as well as some pre made herbal preparations that I offer on there as well. I think YouTube I also have a YouTube it’s the Nomad apothecary on there as well and that’s where a lot of my herbal blog videos go as well. So