Summit Introduction and Guest Background

Welcome everyone to the Gut Health and Longevity Summit. I am so glad you're here, and I want you to sit with something for a second. Everything we have been talking about this week your gut, your inflammation, your metabolism, all of it eventually shows up in your brain.

And today we're going to go right into that conversation. For most families. Alzheimer's diagnosis feels like a door closing. You're told manage it. Plan for it. Accept it.

And my guest doesn't accept that he's treats Alzheimer's as a condition with causes you find and address. Not a sentence you have to serve. So I know you're going to want to listen up to this talk.

My next guest is a Harvard and MIT trained physician who runs two clinics built entirely around one idea. Alzheimer's has root causes, and if you find them, you can change the trajectory of the disease.

Doctor Hellman holds two degrees in biochemistry, a bachelor's from Harvard, magna cum laude, and a master's from Cambridge. His medical degree from Harvard Medical School at MIT, and he is a double board certified Emergency and Life Summit as an physician.

He serves as a chief medical officer of those two Alzheimer's reversal clinics, brainpower Clinics, and Alzheimer's Treatment Centers of America. And as a former medical director of the Hippocrates Health Institute, and for years, his focus has been on finding the hidden drivers behind a cognitive decline that conventional neurology rarely tests for.

So this is going to be really eye opening. I know me and doctor Josh are on the same page about this, but here's his personal why. This is not something that's abstract to him.

He dedicates this research and his career really to his grandmother, who lived with Alzheimer's. He's also the host of the podcast Alzheimer's Breakthrough with doctor Josh Helman.

And he also writes on Substack and has a forthcoming book on brain longevity. So, Doctor Helmut, welcome, doctor Josh, welcome. I have a feeling this conversation is going to change how a lot of people in this audience think about their own brain or their parents brain.

Doctor Manisha, thank you so much for that warm introduction and it's really great to be here. All right. Great. So let's dive in. Let's start with the way most people have been taught to think about Alzheimer's, that it's one disease with one cause and no real answer.

You treat it completely differently. Walk us through what's actually happening in the brain and why you approach it as a systems problem rather than a single disease.

That's exactly right. I wish it was simple. I wish it was one thing. But in analyzing hundreds of different patients with Alzheimer's, there are normally between 30 and 200 root causes.

And those root causes have different importance in different people. So for that reason, it's unlikely we're going to find one drug or one therapy or one lifestyle approach that's going to fix 100 different things.

So out of necessity, I've had to approach it by taking a step back and looking at each of these different categories. And when I say categories, looking for things like toxins, inflammation, microbes and energy, or mitochondria.

But within each one category, there are so many subcategories. I have two degrees in biochemistry. You know,

I'm just I, I literally I started learning biochemistry when I was a teenager when when my grandmother Eileen had Alzheimer's.

And to me, it's amazing that I basically I'm using something I learned as a teenager. I'm using it today still with my patients. Yeah, absolutely. You just made me think of two things.

One, I have a chemistry degree, so I totally get that. You know, when we think about what we learned in school and we're like, we'll never use it and how important it is today.

But another thing is, I think of a patient that came to me and she was really scared because she's like, oh, my doctor wants to diagnose me with Alzheimer's.

And I'm like, I really don't think you have Alzheimer's. And she was like, what do you mean? And I'm like, well, I've seen you.

Alzheimer's as a Systems Problem

You've attended my retreats with me. You know, I really think something else is going on underneath. Let's take a look. And those factors, exactly what you're talking about, like the metabolic demands, the mitochondrial dysfunction, the toxin overload, the nutritional deficiencies.

And for her, a big one was a she had a parasite which can mimic symptoms of brain fog and all this stuff. So that's where I think, you know, this is a very real and practical conversation because there's so much more to it.

So now you've spent a decade chasing drivers. Most neurologists never test for mold exposure, chronic Lyme environmental toxins. What led you there and what did you actually find when you went looking?

Yeah. So what's fascinating is the way I found this was there was a physician in Tampa, Florida, a dozen years ago looking for another physician to help him with his practice.

His name is Doctor Rick, and he's an anesthesiologist who had actually been reversing Alzheimer's, M. S., Parkinson's, Lyme and mold disease in his clinic with some of the sickest of the sick patients running it like an ICU intensive care unit where there were patients seizing, etc.

and he was struggling to find another doctor who understood what he was doing. Looking at the basic biochemistry, I certainly had a leg up with the two degrees in biochemistry, and to be honest, I was a little bit skeptical because these were techniques that, although they may be more common in functional or integrative approaches, were not part of my training in traditional medicine, in emergency medicine, but I was able to go back and actually look at what he was testing and the the IVs he was doing to remove toxins, etc.

and it made perfect sense. And what I love is when we would check on a weekly or monthly basis for the toxins and sing them go down, they would actually go down.

So I have to credit doctor with learning. He like myself, would study late at night going through journal articles. Just saying, look, there's got to be a way to fix all the time.

There's got there has to be a way to fix Parkinson's. It's not good enough just to say there's nothing else we can do. And again, I feel like I'm, you know, standing on the shoulder of a giant there who was able single handedly to figure this out.

And then, fortunately, he taught me this information. So. And then and now that his clinic is no longer there. But I've come down to South Florida and set up my own clinics to continue this, these techniques, which unfortunately, it I'm about to publish my book, but they're not published anywhere.

You can't find them on ChatGPT, etc. and they're certainly not the the traditional neurologist. There's no they're

not looking for this. It's and it's and it's not just these things, it's also genetics etc..

So yes. So when you were in this setting and you were observing this and learning from this, like we already said, like mold was something that a neurologist doesn't test for chronic Lyme environmental toxins.

Can we go into a little bit more detail about like what kind of mold? So if patients and viewers are listening to this, they're going, Okay, I never thought about this.

What should I be looking as an individual? Like, how can we empower them to be looking at these things? So then they can go to their doctor and have the conversation right?

And unfortunately, it's not just one type of mold. The probably the most devastating mold toxin I saw or see is seen from black mold. But it's not just stacking batteries mold.

You can. There's tons of bad other toxins like from aspergillosis, etc. you've got okra toxin. There's so many different types. The problem and the challenge is you can go to your own doctor, you can go to your neurologist, but it's going to be as if you're talking a different language.

This is not something that is sure in basic in medical school you learn. You actually learn about mold a little bit, but then it's not put into clinical practice.

I would say in military medicine in the mold is a biological weapon. So it's well studied by the military's. But it that information hasn't filtered down into basic clinical practice.

So again you can go ask your your primary doctor. You can ask your neurologist. But in all likelihood they'll look at you like you're crazy.

Toxins, Mold, and Treatment Order

Yeah. So from a biochemical standpoint, from a cellular standpoint, what do all these different toxins do, whether it's mold or Lyme, the organism Lyme or the environmental toxin, what do they all do on a biochemical level that is affecting the brain, the neurons, to basically influence the development of Alzheimer's?

Right. So literally, we could spend hours on all the different things because we're not just talking about mold in terms of toxins. We're also talking about things like heavy metals, plastics, pesticides, forever chemicals.

And each one of those may do something completely different. I'll give you an example. The black mold seen the toxin can actually inhibit a very important enzyme in the brain called G, a D, which converts glutamate to Gaba.

Glutamate is an excitatory neurotransmitter. Gaba is a calming neurotransmitter. When that the black mold toxin gets into the brain and it is a fatty toxin.

So it can you can breathe it in, you can go in through the skin. It can also go in through the eyes because it and straight back into the brain that way.

But once you have high levels of that toxin in the brain, you you normally will get much more excitatory and not enough calming neurotransmitters. Typically, the patients will be wired and tired and anxious and they won't know why.

And just just to add another level of complexity here, when you're dealing with mold, on the one hand you have the mold toxins, but you have to treat that differently than the live mold or the mold spores.

And to jump to the conclusion, the way you start is you have to get rid of the toxins first. You have to lower the toxin load first, because if you don't, the danger is if you start killing Lyme, spider, Keats or other infections that wrap themselves in this sticky biological biofilm to protect those bugs from your body's immune system.

If you don't lower the toxin level first, when you kill parasites and other bugs when they die, it's like a bomb going off when basically parasites in these other bugs will store within themselves their parasites.

They will store heavy metals and other bugs within inside of them selves. And those all can be released all at once. And I this I only had to have this happen to me once, where I had a patient where I basically caused them to become paralyzed.

They needed a wheelchair because I was too aggressive killing parasites. The mold toxins came out, the heavy metals came out, and fortunately I was able to get them back and functional again.

But I learned from that. You have to bring down the toxin load first, because guess what? When when patients get worse, they blame you and I. I went into this whole field to help people, not to hurt them.

I think you just brought up something very important. And I've also seen this as a physician, because I've had a lot of patients come to me and in a sense, like they were working with a health coach or a non MD professional who put them on a parasite cleanse.

Or maybe they went and just saw social media and went on a parasite cleanse. And now they have there's they're actually worse than where they started.

And I think the explanation you just gave is really important for people to understand. Right. Because you can't put a cleanse on something without understanding the underlying, like what's actually going to come out with the cleanse, right?

So if we're trying to lower the toxin burden before we're making these like, other organisms and stuff kind of come out, it's very complex. It is not as easy as just ordering on Amazon your cleanse.

And because I have I've seen it like I've had patients come to me where they've got their covered in rashes and all this stuff, and I'm like, oh boy, did you do a parasite cleanse?

And they're like, yeah, why? And I'm like, those are really strong cleanses. You like the body is not prepared for them, especially for somebody body who is so toxic, burdened and depleted at the same time.

It is a very slow and steady process. So I'm glad you brought that up because I think as physicians we see it more often than not. So it's it's it's really about getting in front of the right practitioner who actually understands not just the key words of root cause, but the physiology and what's actually happening in the body on that cellular level.

Right. Exactly right. You have to you have to put it together in the right order. Examples of commonly used medications or supplements that also kill parasites or bacteria that people aren't aware of.

One is ivermectin. People will say, oh, I'm just going to take high dose ivermectin. If you happen to have parasites, that can actually make you worse.

The same thing with methylene blue. Methylene blue is also an antibiotic. So so yeah so so again make sure you're going to someone who who understands how to fit all this together.

Yeah. And I'm not seeing too many people on ivermectin lately. But in during the pandemic and a few years after, I saw a lot of people just preventive preventive, Lee trying to take it because they were going to visit their grandmother and they, you know, they were just trying to protect themselves.

And their high sensitivity C reactive protein inflammatory markers shot up the roof. And I'm like, gosh, what are they doing? And sometimes patients won't tell you exactly what they're doing unless you're like really probing. Right.

So that is one thing that I've definitely seen. So all week long we've been talking about the gut. So let's connect

this for our audience. How does the gut fit into this.

Is there a real relationship between the microbiome and cognitive decline. Or is that a stretch? No. There is a real relationship that challenges. It's complicated.

So it's not just the vagus nerve that communicates from the gut to the brain. It's not just the fact that you've got these zany in which when it gets damaged, you get leaky gut.

Or in the case of the blood brain barrier zero one or similar compounds. And it's it's not just the the food that you eat. You know, this is a plant based summit.

And I think one of the amazing things about plants is the fiber in the plans get to justify in the gut by the microbiome into into the short chain fatty acids.

And I think one of the most important ones is appropriate and also acetate, because those can then go up to the brain and improve brain function as a fuel, as a ketogenic fuel. So there there's a very close relationship between the gut and the brain.

I'll give you yet another one. We talked about mold in many of my patients with Alzheimer's. They have black mold embedded in their gut, preventing them absorbing anything, whether it's food or medications or supplements.

And it's very hard to fix someone's brain if I can't get nutrition, etc. in through the gut. Often what I'm forced to do is, is just do daily IV's, which is certainly not ideal.

Yeah. And how about the gut microbiome role with amyloid and neuroinflammation. Is there any connection there that you've seen in the literature to show us that in the literature there there are some studies.

Gut-Brain Connection and Amyloid

It's not I wouldn't I can't point to one study that's that's definitive. All I can tell you is that what I like doing is I like doing personalized medicine, where, for example, if one of my patients has a mutation, for example, a, b, c, b one, which is a gene, it's a protein that help normally helps in the brain get rid of amyloid from cells.

So people with this mutation are not able to remove amyloid. And amyloid will accumulate in the brain. It turns out the way to fix this is two different probiotics either lactobacillus REM gnosis, or there's another Lactobacillus species that will fix fix this.

So what I love is personalized medicine, where I can figure out which specific genes are not working, and then I can fix that through the right probiotic as an example.

So that's interesting that you say that because when we do do microbiome testing, we can see very often than not whether or not individuals have their lactobacillus species.

And even just having the conversation with people on their diet and what they're eating, I mean, eating probiotic rich food is not common necessarily, like in the diet.

It is not a, you know, unless you consider sauerkraut, which I you know, I consider that German. I don't really consider that American. It's it's not really part of our everyday.

And ideally I like individuals to have at least three servings, one with each meal, a probiotic rich food as a starting point. And that's not the sugary yogurt we're talking about, right.

So and many people are like, oh, I don't really like the taste of yogurt. I don't like the texture of it, you know? So it's a very interesting conversation to have with people, because I think we need to start thinking of food in a different way, in a different light.

Not that you go to the grocery store, you go to the restaurant, and that's actually food. This is really affecting so much of our health. You mentioned something about amyloid.

Now, before we move away from this, I kind of want to hear for people who are listening, maybe they don't know what some of the drivers to make amyloid in their brain are.

We know there's a gene that could affect you from not breaking it down. But what is something that people are doing that drives amyloid? And what is the connection between amyloid and Alzheimer's?

Just to take it back a little bit. Yeah. So and of course nothing about this can be easy or simple. So so there are many layers. It turns out that amyloid is a misfolded protein that will accumulate outside of neurons in the brain.

Of many patients, with both Alzheimer's and other brain conditions. It's not unique to Alzheimer's. It turns out that amyloid is the way for the body to heal damage, whether it's vascular damage or from infections.

Amyloid, we now know, is an antibiotic. So I see in many of my patients with Lyme disease or other infections in the brain, the body will accumulate amyloid in order to basically heal it.

And there are medications. Now there are two prescription drugs that are anti amyloid medications that break down amyloid in the brain of Alzheimer's patients.

I don't recommend them because, yes, they work a little bit to reverse the Alzheimer's, but a third to a third of the patients get brain bleeding or brain swelling.

Because I think what's happening is you're it says if you were to cut yourself and before you develop a good scab, you rub it off. Yeah, you're going to keep bleeding.

I think that's basically the role of amyloid in the brain is part of a healing mechanism. I don't know if that answered your question. Okay. Okay. So amyloid basically becomes the healing mechanism.

So it's not necessarily the causative factor for Alzheimer's because it can be seen in other cognitive diseases. But right. And you can find patients who have high levels of amyloid in the brain, who don't have Alzheimer's, who don't have Alzheimer's.

And I think that is the key. Right. So that and I'm kind of going off script here because that leads to the question of how do we identify Alzheimer's symptoms.

Like what is somebody looking for? Because there might be a viewer here who's like, oh, I don't know if my parent is developing this. I don't know if I'm going to develop this.

So what it like, what does Alzheimer's look like? And I know there's stages you know, to to more advanced. But what does it look like if a person is going, okay is this brain fog or is this Alzheimer's.

Right. So of course Alzheimer's isn't just one thing. In many patients, what you're actually looking for is a change.

Symptoms, Reversibility, and Genetics

So if you've noticed that you or a loved one is having trouble finding their keys, or they're worried about driving because they may suddenly now get lost, or frankly, if they're depressed or anxious, or if they have trouble following storylines or they've lost interest in life.

I mean, that's not specific to Alzheimer's, but the key thing you're looking for is a change. You know? Guess what? If you've always had trouble keeping track of your keys, that's not all ciphers.

But if this is a new thing, definitely pay attention to it. And but I will say, and I'm glad we're talking about this now

is often it will take 20 to 30 years to develop Alzheimer's.

The damage that the brain normally has an amazing reserve. By the time you notice that your your memory or other things are not are not adding up, there's often been huge amounts of damage done in the brain.

I'm just making a note for one of the questions I'm going to ask you in a few minutes. But so I think everyone who's watching this wants a straight answer to.

Is Alzheimer's actually reversible or is that overstated. When we say that where does the real evidence stand and what's the difference between preventing decline and reversing it once we start?

Yeah. So I would say categorically there is hope. I've been reversing Alzheimer's and other brain disorders for ten years now, but I would say the more advanced people are, the more difficult it is.

It is certainly a lot easier to prevent than to reverse early mild cognitive impairment. And guess what? That is easier to fix than moderate Alzheimer's.

And by the time you you have no idea who you are or where you are, that is extremely challenging. I mean, I've had some luck with with patients. We literally had to bring in and have three people hold them down to get blood, etc.

but most, I would say most of my patients are focused on prevention or as early Alzheimer's, but I would never take away hope because now that we're understanding what the underlying causes are, we can fix it.

But I will say once you for a moderate case of Alzheimer's, not only do you have to fix and get rid of the toxins and other things that are causing it, but then you have to reeducate people.

You have to reeducate the brains just like you would, and educate a little baby. The key is personal contact, not putting people in front of a screen.

We're finding bad results when you take little kids and you raise them on television screen. The same thing with adults where you're trying to re establish their cognition.

They need human contact, not watching TV. Oh yes. Okay. So let's talk about genetics and what genetics actually determines. Someone who carries the E4 gene.

Does that mean there is sealed. And do genetics matter as much as people fear. So genetics are important, but it's not as simple as it's been presented.

Normally a neurologist or a doctor will only check one gene, specifically a E, and looking for a pill E4. And yes, if you have one copy of a E4, you're more likely to get all you have.

Two copies are even more likely if you're an Apple E4 four, but I've had patients with all times with copies of a belief for it. It's not the one, it's it's only one gene.

I literally look at hundreds of different genes. I look at program, I look at map T, I look at a whole list of genes that can lead to Alzheimer's. And the point is, I'm looking for these mutations in hundreds of different genes because once I identify them, I can actually fix those specific biochemical pathways.

I can personalize the treatment. Your question was a little bit different. It was like, is it just genetics? Is it it. The good news is there's so much you can do now.

And to my mind, it's not just medications or supplements. It's actually lifestyle. Lifestyle is powerful. What you eat, exercising, decreasing stress, having connection, making sure you're getting deep sleep.

Before we get to the solutions. Besides the genes, what are other risk factors for developing a cognitive decline? Alzheimer's? Sure. So there are many their head trauma abusing substances like alcohol or smoking cigarettes there.

Have they shown anything with the relationship with vaping and well, well it depends what you're vaping. But unfortunately many of the substances people are vaping have heavy metals.

And there definitely is a connection between heavy metals and and brain damage, hearing loss or and or visual loss also increase the risk. Untreated high blood pressure or other heart disease can definitely contribute to all I.

Unfortunately, a Western lifestyle is a huge risk factor because you see you see in other countries like China as or India as they're adopting a Western lifestyle, their rates of Alzheimer's are going through the roof.

Yeah, yeah. And I definitely think heavy metals is a problem. You and I are both in Florida, and I do see a lot of mercury in my patients from the amount of fish that they're eating here.

Risk Factors and Clinic Protocols

Because, you know, we have coasts around the whole state. And I've the number of times I've had the Department of Florida Department of Health call me to ask me, hey, your patient has way too high levels of mercury. Why?

Because they're trying to figure it out. And I'm like, well, this person eats a lot of shrimp and fish. And they, you know, they think that going to their local place because it's local, they're getting fresh.

But it's a little bit more complicated than that. So let's get into Beyond Diet and Lifestyle. You offer patients things most people have never heard of in the neurology visit.

From energy medicine to targeted protocols for toxin mold impact. What does that actually look like in your clinic? And I know you get personalized, but maybe you want to give us an example of a patient without breaking confidentiality.

Like what does that look like? Sure. So so in a specific patient I'm thinking of here. The first thing I did a ton of different toxins, including uranium and the Department of Health isn't calling me when they when I get high uranium levels on patients.

It's kind of bizarre. So and then the way the approaches I used to get rid of the toxins, specifically glutathione orally, intravenously, and I'm using blood purification, something called TPA therapeutic plasma exchange, where I put an IV in both arms in one arm.

I'm removing not just the toxins but also the auto antibodies, because most of my Alzheimer's patients, they have their own immune system, is attacking different parts of their brain, their cerebellum, their dopamine receptors, etc..

So by by purifying, by getting rid of the toxins in the auto antibodies. And then in the other arm, I'm putting back in albumin and at the end I'm giving low dose, very low dose IVIg interference immunoglobulin to reset their immune system.

So that's step number one is detoxification. They may need six of these TPS. And then I go on to regeneration and decreasing inflammation in the brain.

There's a new FDA approved drug for compassionate use that decreases inflammation in the brain through a collection system. And I'm seeing good results.

It's a it's a monthly IV. I normally give it for for six months. And I'm seeing improvement in every patient with zero serious side effects. No brain bleeds, no brain swelling.

So that's exciting. But on top of all these things, I'm making sure that they're doing the right lifestyle approaches. They're eating plenty of plants, their stresses down, they're getting enough sleep.

And I'm also doing adjuncts like hyperbaric oxygen and other therapies. What is the most. I would say the lifestyle factor that you see, according to the research that really moves the needle for these individuals, what is the literature say for this?

Yeah. So the exciting thing is not just my opinion. I've been doing this for ten years. We're seeing more and more studies showing that lifestyle plants can do this.

You've got Dean Ornish have shown in 20 weeks, randomized study in 20 weeks, improvement in Alzheimer's patients. And then you've got the finger study and the pointer study.

There are many studies now showing that you can actually reverse Alzheimer's if you're taking the correct approach okay. All right. Last question. And I want to be very concrete.

Somebody watching this is worried. Either about their own memory or about a parent. Which lifestyle choices should they put in place starting this week?

Let's be concrete about it. Yeah. So the very first step I would make based on the literature, the biggest risk factor is not getting enough deep sleep N3 sleep.

So the first thing I would work on is making sure you're getting deep sleep. And guess what? You know, you can ask someone, are you sleeping? They're not going to know what their sleep is like.

You can ask their spouse and or friend. They say, oh, they're snoring or they're not snoring. To my mind, the only way to know if you're getting the deep N3 sleep is to measure it with a formal sleep study.

So that is where I normally recommend people start, because invariably there are problems that we can fix with the sleep. Okay, sleep. So make an appointment to get a sleep study is what you're saying.

All right. So so that might take them a couple of weeks to get into. So what can they do on their own. Right.

Lifestyle Strategies and Hope

So on their own I would the easy thing are other lifestyle approaches. Make sure you're eating plenty of plants. The diet I normally recommend is plant forward low fat and avoiding as much as you can animal products.

The next thing I would do is exercise every single day because when you exercise, you release BD and F brain derived neurotrophic factor, which stimulates the growth of new nerves and new neural connections.

And I would also recommend or make sure that you've got good social connection. My biggest concern are loners who are basically all by themselves, and they're going down and there's no one in, no one around them to help say, hey, this isn't right.

Your memories. I could, let's fix this. Yeah, yeah. That's why it's so important to have community around you. Is there anything I have not asked you that you want to make sure we are covering in this topic?

Yeah. So I would just reinforces that there is hope. I've been doing this for ten years or fortunately there's slowly other people doing this. But because this is a plant based summit, I would just say, unfortunately, the news that's out there that you have to eat animal products for your brain or other parts of your health just is not true.

That's number one. But number two, I want to make sure my patients with Alzheimer's or brain fog are getting enough omega three fatty acids. My favorite source is actually from algae.

But yeah, no, I appreciate the fact that you have beyond here. And I you know, it's great to share and I appreciate it. Yeah. Great. All right. So doctor Josh, this has been genuinely hopeful in a space that doesn't get to feel hopeful very often.

The idea that Alzheimer's has findable causes not just an inevitable path. That's a message I want everyone to carry with them. It might seem complex, but there are experts like doctor Josh out there to help guide you through this process.

He can be found@doctor.com, and I encourage you to follow his podcast, Alzheimer's Breakthrough with doctor Josh Helman for more. And here is a key takeaway for you guys.

Alzheimer's isn't a mystery. You wait out. It's a puzzle you can start solving right now. So thank you so much and stay tuned for another episode thanks to entrepreneurship.