Brain Types And How To Overcome Mental Challenges??? Transcript

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Introduction to Dr. Amen and His Work

Now we have Doctor Daniel, Eamonn and Doctor Eamonn is a fabulous human being and one of my recently discovered close friends now and he is a physician who's hosted 16 national public television shows about the brain, which I have over 130,000 times across North America.

He, is the most popular psychiatrist in America, according to the Washington Post. And he's a veteran, and he served in the infantry medic. And he did his psychiatry residency at Walter Reed Army Medical Center in Washington, DC.

He's a 12 time a New York Times bestselling author. And some of his books. My favorite one is The End of Mental Illness is a fabulous book. If you haven't read it.

Healing and memory rescue chain. Change your brain, change your life. And your brain is always listening, and, and he's going to come out with another one in March of 2022 called the Seven Neuroscience Secrets of Feeling Good based on Your Brain type.

And so Doctor Amy is also the founder of aiming clinics with, multiple locations across the United States. And he has the world's largest database, brain scans, called the Spac, CTS.

Over 200,000 scans, related to, behavioral and brain disorders. And him and his team has, published more than 85 scientific articles. And the the lead researcher on the world's largest brain imaging and rehab study on professional football players, NFL and whatnot.

So it's really awesome to have Doctor Eyman on today, and I can't wait for you to hear what Doctor Eamon has to say about our physicians brains, our brains and burnout, too.

Welcome to the show. I appreciate you for coming on. Well, thank you for having me. Yeah. So, you know, one of the most important things that I really wanted to talk to our audience about is really the topic of burning out.

And I think that burnout is just so common. And, there are studies showing that about half the US, physicians are burnt out. And maybe the other half is just in denial.

I'm not so sure. You know, but I was burned pre-pandemic in 2017. The Mayo Clinic study. So I really want to ask you, why do you think physicians are so burnt out, especially right now?

Well, I mean, pandemic has something to do with it, but also the business model, working for other people. It's, you know, when we became physicians, we weren't thinking about insurance companies paperwork, getting our decisions sick and gassed over and over and over again and having people who were less trained in us, judging us and that sort of constant judgment.

And there's really a decreased relationship with the patient because in order to pay back your loved ones, you have to make a lot of money. And that is not a prescription for happiness.

That's a prescription for sadness. And stress. And, you know, I've not struggled with burnout much because I don't take insurance. I think that really helps.

But, you know, we really focus on whole people and getting people, well, biologically, psychologically, socially, spiritually.

Why Physicians Burn Out

But our primary value, we have written values that aim in clinics. And the number one value is authenticity. We live the message because if you don't live the message of health, brain health, mental health, physical health, if you don't live it, you can't give it because people understand, right?

They want leaders that are healthy themselves. So, you know, we talked about this before. But let's that is let's talk is like, is there distinguishing really between mental health and brain health?

What do you think? Well, I'm actually not a big fan of the term mental health. I hate the term mental illness. I think it shames people. It's stigmatizing and it's wrong.

These are brain health issues. Somehow psychiatry, got divorced from neurology, and it was a bad divorce because psychiatry got the mind, neurology got the brain, and psychiatry got screwed in that process because your brain creates your mind.

And if your brain is not healthy, it's inflamed or it's toxic or it's been hurt, then your mind's not going to be healthy. And, you know, I often think of it like hardware and software.

You got to get the physical functioning of the brain working right. When you think of burnout, you know, our first principle is you got to get your brain right, right.

Which means you need to sleep. You need to eat right. You need to know, you know, supplementation, I think, is really important. I mean, you have to, like, is this good for my brain or bad for it?

Right? And overworking and not sleeping and eating bad food, alcohol, marijuana. Now nobody wants to hear about it. But marijuana, they're not good for the brain.

And so if you want to decrease burnout first step number one, you have to optimize the physical functioning of the physician's brain. So you talked earlier about authenticity.

Were you speaking about like authenticity to ourselves to other people. Like what do you mean by authenticity? Well, I have a sad story. In 2010, the pastor at Saddleback Church called me and wanted to lose weight.

And, I created the downhill plan for Saddleback Church, which became an international bestseller. Thousands of churches around the world did our program, but the pastor did it for a little bit, and then he didn't.

And it just infuriated me because if he would have been authentic, live the message, we would have helped 100 times the number of people that we helped.

And and I love him, but it just became crystal clear to me if you don't live the message, you can't give the message, which means physicians should go back and get 7 or 8 hours of sleep at night.

They should turn off their gadgets at night. They should really not let pharmaceutical reps bring donuts to the office or cookies or, you know, why do you walk in my clinic with that stop.

You walk right out. It's like, no, no, no. Because, you know, I mean, if you I want my employees to be healthy and some people think that's heavy handed and I'm like, it's just science.

You eat bad, you're going to think bad. So that so that level authenticity is basically kind of living the message. Right. If I as a physician want my patients to do well, I should really live along that path and be the proof that it actually works is always saying, absolutely.

Plus, you're less likely to get burned out. Plus, you're likely to make better clinical decisions because your frontal lobes work better. And you know what I mean? Clinics.

We look at the brain. I know you're a fan of evaluating the organ that we treat and if you know, once you start

imaging the brain, you realize there's a whole bunch of things that people probably shouldn't do, like hit soccer balls with their head or play tackle football or, drink.

You know, the the biggest blog I wrote last year is called I Told You So and I start the blog with when I dated my wife 16 years ago, she told me, I'll never tell you.

I told you so. And Tana completely lied to me. It's like her favorite thing to say. And for 30 years since I've been scanning the brain, I'm like, alcohol's not a health, right?

We went through this whole phase in the United States. Alcohol out for. No it's not. When you look at the brain, it prematurely ages the brain. And then last year, the American Cancer Society came out and said, you shouldn't drink any alcohol, increases your risk of seven different types of cancer.

And obviously cancer is bad for your brain, right? The stress, the chemotherapy and so on. And so, I wrote a book called Feel Better Fast and Make It Last.

It's about, am I making decisions that help me feel better now and later versus now, but not later? And so we think of a lot of our patients, you know, whether it's marijuana or alcohol, bad food.

Brain Health vs Mental Health

But we have to ask ourselves, you know, are my habits good for my brain or are they bad for. So even I think even beyond habits. And, I'm giving this out of your book.

That's right behind your left shoulder, right there. Your brain is also always listening. Is that, we as physicians, especially physician leaders and physician business owners, we sort of start our day in one word, many hats.

And, a lot of these hats have to do with the clinical side, a lot of that with the administrative side. So there's a lot of input over and over and over again.

And it's almost like we don't breathe. Right. And so but you said earlier that we sort of deal with insurance companies, we deal with patients do all these things.

And sometimes there's a like a, like a low level of resentment that's within the back of a brain. And that low level resentment spikes once in a while.

And then there's an act out, from that level of resentment. And I see this a lot in my, in my, in my colleagues as well. And so one of the things that, you know, we just talked about is, you know, not, not putting, the soccer ball with your head and stuff like that, but I think that I want to talk about, like, micro mental traumas, if you will.

These micro traumas are really coming from different things that happen throughout the day that absolutely physiologically shapes the memories pathways.

So you kind of talk about how psychological stressors affect the actual brain as an organ over time. So I know exactly what you're talking about. You know, having run and and clinics for 32 years.

And part of the stress physicians have is, is most of us had no business training and we're running businesses and sometimes big businesses, and we often second guess ourselves.

I find the more business education I have and the more I say no. See, when Tony Blair was the prime Minister of the United Kingdom and he said the number one hallmark of a leader is being able to say no.

And Steve Jobs said the same thing. He said, we say no to a lot of very good things, so we can do great things and so I think, I love this book, Scaling Up by Bernard Harnish.

That's how we manage good Aim clinics. It decrease my stress so much. Like we have a one page strategic plan. We have quarterly, rocks and priorities.

And, and I think what's decreased my stress the most is having a system to make decisions against. And so, you know, with our values we're authentic, we're science based, we're patient outcomes centered.

And so when we make decisions, we really make it with our values in mind. And we always ask ask yourself this question. Does it fit. Does is what we're going to do now fit the goals we have for the organization.

And another thing to help with the micro traumas is you don't have to believe every stupid thing you think. So I talk about killing the ants, the automatic negative thoughts, the thoughts that come into your mind automatically and ruin your day.

They should have taught you this in second grade, but I couldn't believe I was 28 and I was in my psychiatric residency at the Walter Reed Army Medical Center.

And I'm sitting in a lecture and the doctor said, you don't have to believe every stupid thing you think. And it was this huge epiphany for me. And then a couple of years later, I coined the term ants.

So you have to develop an internal ant eater, to patrol your mind. And the exercise is super simple. Whenever you feel sad or mad or nervous or out of control, write down what you're thinking and then just ask yourself if it's true.

In your brain is always listening. I have these five questions. You know, take a deep dive into these negative thoughts. And it's just I think of as basic training.

All of my patients like session one or session two, I'm like, I want you to write down 100 of your worst thoughts, and I want you to answer these five questions with each of those thoughts.

And when you learn to manage the noise, it helps you so much. Another fun technique I think you'll like is give your mind a name. It's based on a concept called psychological distancing.

If you can distance yourself from the noise in your head, you're just so much happier. And when I interviewed Stephen Hayes, he's the founder of act a certain form of Psychotherapy.

I'm like, well, what name would I give my mind? And, this is a raccoon. I named my mind after my pet raccoon had a cat raccoon when I was 16. Her name was hermit, and she was just a troublemaker.

I mean, I like my mind. I loved her, but she took my mom's bathroom. She ate the fish out of my sister's aquarium. She'd leave raccoon poo in my shoes.

I can choose when you name your mind. One of my patients. Her name is Sandy the psycho. Another is ducking. You know, it's like, pick whatever sort of fits for you.

Authenticity, Habits, and Living the Message

And then you can choose to listen to it, or you can choose, you know, for me, I'll just put her me in the cage of Hermes, you know, acting up too much, or I'll put her on her back and tickle her.

You just. Then don't take yourself too seriously. And also, my mother said, you want to have the no asshole rule at work? There's a great book by a Stanford professor called the No Asshole Rule.

So when I hire somebody, I think, are they kind? Do I want to work with them? Right. Because, you know, you spend a lot of time at work. Are they competent and are they passionate about your mission and I have the best executive team.

I am so honored to work with them because we have no assholes. And over the last 32 years, I hired plenty of them. I'm just not doing it anymore. Right?

Do you elevate the team or do you stress the team now? The no asshole rule starts with me that I can't be an asshole. I can throw stuff, I can yell at people and you know, and stands for minor deity.

And as a specialty, we're a little on the rigid side. And, you know, that's because you're trying to do something. No. Right. You know, we think a lot of like which the, you know, the haters come out and the haters are often the rigid people they can't like, think of new ways of doing things.

Yeah. And that's such a great way to put it. So, so, your brain is Harmon. That's the raccoon's name. Harmon. God. So I feel like, you're taking something that doesn't seem to be tangible, like your thoughts and actually putting it into something tangible and then manipulate it in the in the physical world.

Is that basically what it is? I think? Well, you know, thoughts are powerful and we know this from our patients, right? I mean, it's why placebos work because patients think they're going to thoughts are powerful and most people have undisciplined minds.

And if you want to be mentally healthy, you have to work out. Just like being physically healthy, you have to, you know, we I've talked about eating the right foods.

You have to think the right thoughts. And you can develop mental discipline over time with just like building the right habits. I start every day with, today is going to be a great day.

I know we, you and I were going to chop, I end every day with what went well today, and as I go through my day, is this good for my brain or bad for it?

And you know, 19 times out of 20 I make good decisions because I love myself. Right. And you got to get your mind set, right? Right. Because some people go, but I love Rocky road ice cream, but it doesn't love you back.

And I don't know if you've ever been in a bad relationship. I've been in bad relationships and I'm not doing it anymore. I just turned 67. I'm married to my best friend.

We're kind and purposeful to each other. I'm not going to love food or drink that abuses me. And the research is pretty clear about sugar and bad, bad.

It's like, no, I only want to love things that love me back. Love things that love me back. I think that's a that's a great lesson. You talked earlier like, you know, don't have the the, the reps, pharmaceutical reps come in with donuts and all this stuff like that.

And I think that's a great start for, for a lot of people. Well, now we know my practice is named Texas Center for Lifestyle Medicine. So, not many people are going to bring donuts.

It's not. So that's the bonus there. But but I think it's like, it's sort of like the one millimeter shifts that we really have to do within our lives because, you know, I imagine, like, I mean, you have such a great mentality.

I imagine that it took you a while. Now you are right now right. So my daughter just went off to TCU, which I'm excited for her, but sort of broke my heart.

But when we had the Last Supper, the three teenagers that live with me, they just they gave me the best compliment. And they said, you're the most consistently predictable, happy person we know.

And I love that because they wouldn't have said that 30 years ago. That, you know, one of the reasons I love being a psychiatrist is I'm always learning about how to be happier.

You know, as I teach, I learn, and, you know, you put these things in your life because, you know, I've had plenty of stress over the years, but, you know, learning how to grow through it, rather than being buried by it has helped me.

Absolutely. No, I think that, Well, I think beyond you, you're beyond a psychiatrist. Michael Irvin, neuropsychologist. Because, you know, I actually work with kids through clinic in Dallas, on on several pieces, because of the spect CTE that you do.

And one of the things that I noticed that, you can tell on the lot, by that scan about a person, in every different demeanor is important to think of.

So it's been. Absolutely. They have, technology on hand at the clinic. Do you think that our daily behaviors, and not necessarily just that we or, what we drink, but our daily ants do our daily ants, autonomic negative thoughts and, behaviors correlate with some actual, brain damage or abnormalities that you see on the clinics.

Yes. I actually did a study on negative thinking and negative thinking thoughts, brain function, and your frontal lobes. So the more negative you are, the worse your decisions are going to make.

Now mind you, some anxiety. Some people have low levels of anxiety.

Managing Negative Thoughts and Stress

Go to jail because they make bad decisions. So you need a little bit too much is obviously a problem. But when I had, when we did this study, we just saw the drop in the frontal lobes and the cerebellum, meaning people are less likely to be coordinated.

I just got to see Michael Porter junior. Yesterday. He stepped forward for the Denver Nuggets. And we talked about when you think you're going to miss the shot, you're going to miss the shot because you're going to be a little bit less coordinated.

So developing that mindset, that mental toughness is so important. I have a mnemonic I think people will like called Bright Minds. It's really how to do integrative medicine for psychiatry.

And for example B is for blood flow. So let me just quickly go through it and then I'll go, well what's the have to do. So low blood flow is the number one brain imaging predictor of Alzheimer's disease.

And anything that lowers blood flow damages your brain caffeine, nicotine, being overweight marijuana, alcohol, hypertension, any form of heart disease, being sedentary.

The one thing you can do is walk like your white wherever you go. Just walk. Light your light. That will be helpful. And if there beats on the menu item, because beets increase blood flow, retirement and aging as they are for bright minds.

Learn something new. Don't you know it's physicians? We've been learning for a long time, but pick up something else. Whether it's a language or an instrument or a game.

I particularly think table tennis is the best brain game is inflammation. Floss your teeth. Gum disease is a major cause of inflammation. And then take omega three fatty acid every day.

G is genetics. But what I tell my patients genes on are dozens. There they go. Oh, I'm overweight because it's in my family. It's like, now you're overweight because you have bad habits.

I have, obesity, you know, running in my genes in my family, but I'm not. I have to work harder than most people. But genes tell you what you need to prevent.

For the most part, H is head trauma. A major cause of psychiatric problems and nobody knows about. Because

nobody looks, protect your head. Tears, toxins.

Take soreness whenever you can. There's actually a study in Jama psychiatry showing one infrared sauna at antidepressant effects. Is mental health kill the ants.

The second eye is immunity and infections. You should know and optimize your vitamin D level. And is neuro hormone disorders. I don't know if you've seen I've seen this rash of low testosterone in teenagers and young men, and I think it's all the toxins they put on their body.

So I. We have an app. All right? It's not mine. Think dirty. I love that app where you can scan all of your personal products. And I'll tell you, on a scale of 1 to 10, how quickly they're killing you.

And then there's di obesity. I published three studies. Is your rate goes up the size function of your brain goes down, work to get to a healthy BMI. And then assess sleep and, seven, eight hours.

And the scans will actually tell you if you have sleep apnea, because it looks like early Alzheimer's disease. Yeah. Sleep is just so integral. Peace, you know.

Well, all those that all those are very important. So, you know, I think that I think like a big a disconnect and I think between the, physicians, and just brain health in general and self-soothing, you know, it's sort of this sort of mentality, I think that that doctors tend to have the heroes mentality, which is that they're always supposed to say yes, right.

And you said earlier that no can potentially set you free. And I think this mentality is pretty rampant amongst people who really are just we want to please people.

We want to be able to help people. But how do you how do you start saying no to things that aren't essential to yourself? How do you start doing that?

I have my patients practice in front of the mirror saying, I have to think about it. So I treat a lot of BDD patients and there many of them are people pleaser and they say yes without processing the cost.

And it's so essential. Now if you know you're not going to do it, say no. But if somebody is pushing you to do something and you're anxious about it or doesn't go, I have to think about it and then ask yourself, what does it, what does it fit with the goals you have for your life?

And I talked about the one page strategic plan from scaling. Well, one of the things I've been doing with my patients, and if you ask me. So what? Why do you think you've been successful?

Since 1986, I've done every year. Well, an exercise I called one page miracle on one piece of paper. I write down what I want my relationships, my wife, my children, my family, my friends.

What do I want? My work. What do I want? I'm pretty clear. I want to disrupt psychiatry and create something brand new. My money, my physical, emotional and spiritual health, you know, so, for example, with my wife, I want a kind, caring, loving, supportive, passionate relationship.

Always want that. Don't always feel like that harmony will show up with rude comments. And I'm like, you need to go away. Does it fit? And so when someone asks me to do something, I think of what I want and I'm like, well, does it fit?

And the answer is no a lot. And I'm like, you know, I'm so sorry. I'm overscheduled. I just can't do that. Now. When you asked me to do this, I'm like, well, does it fit?

Well, we have a friendship and you're talking to other physicians. And I'm like, yeah, that'll fit. But but a lot of things, you know, I probably say no 19 times out of 20 because there's only so much energy.

And if I'm not happy, I'm not as effective as I can be. Yeah. So that that's such a powerful statement right there. First of all, thank you for saying yes to this.

I really appreciate it.

Brain Types and the Bright Minds Framework

And so to our listeners as well, you know, I think, another topic to kind of want to hit on is the stigma between, mental health issues, brain health issues, let's call it that, and physicians and that most people will not want to seek help or seeking help from retaliation and because of employment or because of licensing.

What do you think we can do about that and continue what we have to change the paradigm. As I said earlier, I hate the term mental illness. It shames people.

It's stigmatizing and it's wrong. In 1979, when I decided to be a psychiatrist, I told my dad and he asked me why I didn't want to be a real doctor, why I wanted to be a not doctor and hang out with nuts all day long.

And you know, my dad would never have gotten father of the year award. But, that's what a lot of people in society think, that if you get help your week and I tell people, no, no, no, it's the smart person that asks for help, it's not the weak person, you know, the person who raised their hand in class was not the dumb person.

The dumb person was lost. This is the person who wants to do well, who wants to be their best. And, but we need to end the term mental illness. Call these things what they really are brain health issues.

And when you're going for help, you're not going to help because something's wrong. It's because you want to be better. And I want a better brain. And who who doesn't want that?

I've been blessed to see some really wonderful people like Miley Cyrus and Justin Bieber. And like many celebrities, Justin would do what I asked him to do sometimes, most of the time not.

And then one day he got it. He walked into my office and he said, my brain is an organ, like my heart is an organ. If you told me I had our problems, I'd do everything you said.

So I'm going to do everything you say. And then over months, he got dramatically better. So let's not go to get depression treated. Let's go to get my brain optimized.

And in the process, my depression will be better. That's the paradigm shift there. Let's go to get my brain treated. My brain looked at and take a wave.

That exact paradigm. And I think that's so important. You know, physician suicides. I'm know that depression is on the rise. So this is something that we.

Honestly are really looking to change some things up. It isn't it is all the Physician Automation Summit for a reason. Because something wants to be, they feel like something that needs automated to allow them to have the margin for themselves and for the healing process and for for relationships.

And I think that, we're in this world, the really crazy world where now there's like, social media censoring of physicians talking about different topics.

There's the cancel culture that's going on, and there's a lot of fear that really drives into that, physician design, especially after speaking with my colleagues.

And I think that triggers aren't so trigger thoughts. To occurred our away and that really takes away the energy and takes away and depletes what we are trying to do as individuals takes individuality.

And so I think that that this is such an important time to talk about brain health. So let me ask you, are there things that doctors can do right now, like immediately within the next 24 hours, other than than a couple of techniques that you mentioned, to help with the right, for implements or specific foods other than beets, that can be useful, right?

You know, I say brain health is three things. Brain envy. You got to care about it. Freud was wrong. Penis envy is not the cause of anybody's problem.

I haven't seen it in 40 years. You start. You need to care about the 3 pounds of fat between your ears. And I say it's the only organ size matters. And then avoid things that hurt their brain and do things that help their brain.

So you just have to know the last and the tiny. Have I worked with BJ Fogg, Stanford professor, for six months on how people change. And he's like, they have to develop these, you know, tiny habits or micro habits.

And the one we ended up coming up with is just ask yourself this question, is this good for my brain or bad for it? And if you can answer it with information and luck, you're going to start doing the right thing.

And yes, there are certain supplements. I think everybody should take multiple vitamins because we don't have balanced diets. For the most part. Everyone should take on omega three fatty acid, know your vitamin D level and optimize it.

We're in a frickin pandemic, so I like to keep my patients somewhere between 50 and 90. And I'm a huge fan of saffron. They're 24 randomized controlled trials showing that 30mg of saffron is as effective as Prozac, Lexapro, Zoloft, the imipramine, but without side effects.

In fact, you know, the problem with antidepressants or the sexual side effects? That's pro sexual and pro memory. So, we make something I love called happy saffron.

Because I followed the research and I'm like, mood, sex and memory. Okay, I'm taking, Happy saffron, I love that. So, you know, I think that, whenever we talk about, taking supplements and doing things for ourselves, there is, another category that I want to that really want to talk about is what do you think the role of movement, activity and exercise is, to, to improve?

Well, I had to head against. So, exercise was found to be equally effective at 12 weeks. At ten months, it was more effective. Plus at ten months. What do you want?

You want to be dependent on a medication. Where do you want to be cuter? You know, causal ups not making you cuter, but walking 45 minutes four times a week.

Walk like your life has antidepressant effects and you've lost weight. So, I think movement is essential. And one of the things the imaging work has taught me is coordination.

Exercises are more essential because the cerebellum and the back bottom part of the brain has half the brain's neurons. And we know the cerebellum is involved in coordination, but it's also involved in focus, in organization, in planning, in thought coordination.

It's low in people have A. D. D., it's low. And people with autism. And so coordination exercise can be so helpful. So that's why I guess you were saying you like, you know, ping pong or table tennis earlier, right?

A lot of people who play racket sports live longer than everybody else. So far less long football, less long. But table tennis, squash, had, not handball but racquetball.

Badminton. Live longer than everybody else. And I think it's the coordination piece to it. That's that was completely unexpected. You know, I was thinking more like a Olympic runner or sprinter or something like that.

No, not at all. I mean, and swimmers were second, but racket racket players were number one. So so we're

thinking there has to do a coordination developing the cerebellum.

Right. And then and then keeping that active as well. All right. So I so I learned something great. I got to pick up my tennis racket again. So you know let's let's talk about discipline for a second.

You kind of touched on earlier. I, I've into it. I mean, I think discipline is something that we need in every profession, especially as physicians, especially as business leaders and physicians.

And so what do you think are the main, the main inhibitions of someone to become a more disciplined person? Well, I think it's developing these tiny habits.

Is is good for my brain or bad for it? It's, you know, one of the business things I do that I learned from scaling up that it's so helpful is we have a huddle every morning with I have two of them, because I also run the marketing team for them in clinics or supervise it is I have an executive team huddle and I have marketing huddle.

So I spent and while I'm doing those two huddles, it's about 40 minutes. I'm walking because I always love to multitask in a good way. Plus, if you walk, you get, you boost serotonin in your brain and you're more flexible.

And I want to be flexible on the huddles. And it's basically what did I do yesterday based on our goals? What am I doing today? Where am I stuck? And I think you can just have a five minute huddle with yourself every morning.

Start with today is going to be a great day. Get your mindset right and then go, okay, when I do yesterday, what am I going to do today? All day in my one page miracle?

Yeah, I'm totally going to do work in huddles now. Oh, I do a lot of them. But we're we're usually sitting. Yeah. I mean, you know what your team looks like.

I mean, zoom is causing obesity, because, you know, you're just sitting so long, it's like, no, no, no, you guys know, it look like it's like, let's go.

And when I have a hard conversation with one of my people that report to me, I often will take them for a walk, because after ten minutes, they're going to be more receptive, especially if they're the persistent brain type.

And a lot of physicians are the persistent brain type. Based on our imaging work, I came up with 16 different brain types, and to many physicians, the first word out of their mouth is now, you know, they tend to be argumentative a little bit oppositional.

Things don't go their way. They get upset, they can hold grudges. And so a little bit of exercise just helps them be more flexible.

Exercise, Discipline, and Daily Huddles

So you're saying there's this in different categories. Is that based on based on what like behavioral patterns. It's on the imaging or something on the specialty.

It's basically five. And it's not Spect it's just Spect. Spect CT is different. It's where you actually get a CT scan as well. But that's for radiation.

But so we have the balance type where their brain is healthy. This spontaneous type where they have sleepy frontal lobe. So that's our ad group. The persistent type.

Their frontal lobes work too hard, worry rigid, inflexible, the sensitive type, their limbic system is active. And the cautious type where the fear centers are working too hard.

And then from 6 to 16, they're combinations of two, three, four and five. Wow. So so it's like it's like predictive. You

can kind of suspect and and categorize people in one of the categories.

And you kind of walk in and knowing exactly what to expect. So yeah, when I met my wife, I really liked her. And two and a half weeks later I'm like, hey, you haven't seen the clinic, don't you want to come see the clinic?

And I scanned her because I'm like, you need to know what you're getting into. So. That's brilliant. So, it's fascinating that this is a physical scan of the brain, and then you have the categories, of, personality types or, or how we call them, and know, you know, as you're talking about different types.

I think I have subconscious encouraging. I have similar categories within our patients as well. And just because we spend so much time with them, we do a lot of brain health stuff as well.

And so, the fact that you can actually see this really validates someone's personality drive, their, their, their genetic makeup. And so, so do you own your patients that, hey, this is your type of brain.

This is what it looks like. Or do you just kind of keep to yourself? No, but we never say it in a shaming way. We always go, you know, you tend to be this based on what we see.

And if it serves you. Yeah, if it serves you like our spontaneous people, they're good salespeople and they're often very creative. And, you know, many actors are that way.

They just talk to the IRS too much because they don't do their taxes and they tend to be late for appointments. And that's why they don't have shaming names.

I used to call it impulsive, compulsive, sad and anxious. And I'm like, no, the their strengths for each of these types. And so, you know, you probably want your neurosurgeon to be persistent.

You want him to count the sponges that went into your skull. And do they come out of your skull? Right, right. And so, so it's like, okay, well, here's here's your type.

We can do something about it, but here's your strengths as well. So let's celebrate what you got right. Right. And people we have a questionnaire that have been taken by 3 million people called our Brain Health Assessment.

And based on how you answer the questions, it will give you your type and also a brain health score. So brain health assessment.com. And you can give it to all of your patients.

It's free. And you know, we'll tell you based on your type, these are the supplements that can help. But here are the behavioral exercises that can help as well.

Oh, wow. So that's that's brilliant. Do you think that, you're able to look at someone's brain and see why the haves have fights or conflicts or miscommunications with another brain type?

Maybe like a husband and wife or something like that is as unpredictable. Well, it's, you know, we did this study called The Couples from a health study.

It's couples who failed marital therapy and still wanted to be together. And we scanned 500 of them and it was so helpful. And I got the idea for this study from this one couple I saw.

So right after I started doing imaging, I did a lot of marital therapy and really loved it. But this couple I was completely failing at, and this woman had a Ph. D.

in grudge holding. I mean, she just beat things to death. And one day I didn't say it, but I thought, and I'm like, she's going to beat this into the afterlife.

I mean, on and on, over and over. And she's married to a guy called the sniper because he was always late to his

appointments, and he would say the most hurtful things, like he had no judgment.

And, you know, one day I woke up and I was taking a shower. And I'm like, these people are on my schedule. And my stomach started to hurt because I hate being ineffective.

So one thing I've learned about me, I hate it, I want to help. And, I'm like, I'm going to tell them to get divorced today. But growing up Roman Catholic, that's like a really bad thing.

And the Catholic voice visited me that day and started screaming at me, because you're not a good enough therapist, you're going to damn their eternal souls to hell.

And I just started looking at the water faucet like, how much therapy is this going to take to get over? And so I got out of the shower, called my friend who on the imaging center at the time, and I'm like, Will you give me two scans for the price of one?

Because I was always negotiating for my patients. And he's like, why? I'm like, Jack, I have this couple and I have no idea what to do for them, and I'm failing miserably.

And it's breaking my heart. And he's like, that's so interesting. He said, I've been married twice. I can't figure it out. Maybe we could do a business and call it Bring Match.com.

And so she had the hottest single at gyrus. It's a gear shifter in the frontal lobe, and he had sleepy frontal lobes. And I'm like, he has Abby. She has OCD personality disorder.

Put her on Prozac. Him on Ritalin. Told him I didn't want to see him for a month. And when they came back, they were holding each other's hand. She stopped looping and he started paying attention.

And I had, you know, unless you look right, I mean, it's easy to come up with a theory, but, you know, most of the psychological theories have no neuroscience to them.

At least we're trying to add a little bit of neuroscience. Yeah. Once again, something physically tangible from behavior. So that we have seen that we can can mold and now understand why you term mental illness because you can physically see something things.

The word mental means that I may not be able to do anything about it, but at least I know you do about it. And that's that's the most powerful statement I think we can we as physicians can can really think about our own brain health, our, autonomic, automatic, negative thoughts or ants, our instincts.

And then we had to develop our own anteaters, like you said.

Relationships, Boundaries, and Saying No

And so I, you know, the the most curious I'm most curious to know is how how long does it take? Right? I think as physicians and as me, myself, all of of the things that happen pretty quick.

How long does it take to get to where I want to be? How long does it take you and your patients to get to where they truly want to be? Depends on how serious they are.

So for example, I saw we're doing a series on Instagram called Scan My Brain and we've done like some really special people like Jennie Garth. Pretty actress from 9021.

Oh, and Annalynne McCord. We just did Michael Porter junior Jay Shetty, who's this young internet phenom? And my friend Carrie Ann Inaba from dancing With the stars.

And she was a mess two months ago, and. But she just did everything I asked her to do, and I loved that. I'm like,

you're going to get better. And she did.

I mean, I we test people. We do something called total Brain. It's a computerized neuro psych assessment. We had her in May and we just did her again.

It's just dramatically better because she doesn't believe every stupid thing. And it's not you have these symptoms. Take this drug that is a flawed model.

Well, you know that, right? Texas Center for Lifestyle Medicine. It's like, you know, medicines, you know, can be super helpful, but it's not the first and only thing we think about.

You know, she doesn't believe every you know. And then I'm like, you need to write down a hundred of these bad thoughts. And she had bad drugs. And we need to do the work, you know, and too often people expect to feel better tomorrow.

And that's like, say, you're 50 pounds overweight on Monday, you have a salad and you expect to be trim on Friday. That's insane. That's like stupid that, you know, if you're struggling because you've had a lifetime of bad mental habits, it's going to take a little time.

But if you put it in the work, you can feel better fast. Yeah, it's all about putting in the work. You know, we see what our patients to, you know, we have a mind body medicine practitioner in our facility, Jenny.

And, and the people who go through that process with her, that coaching transform significantly faster because there is a seriousness, to what they truly want to accomplish.

And the minute you get serious thinking like, oh, that wasn't so bad. I only took it only took a couple months, but I feel a lot better than where I am.

And that was something that's that's the most rewarding thing in clinical practice that that I can see. And I'm sure you see the same thing. Yeah. And if they're not getting better and they're putting in the work, something else is going on.

They have Lyme disease or they had Covid, covet impacts the brain in a negative way. It's not a good thing for the brain. Or they have heavy metal toxicity, or they're living in a mold filled home.

It's like, you know, we have to look at all of those bright minds, risk factors and go, what am I missing? You know, but but first they have to I mean, you know, obviously with physicians and, you know, one of the reasons for burnout is the decreased time with patients because of reimbursement patterns.

And you're just not happy seeing 40 or 50 people a day. It there's no happiness because there's no bonding. And guess what gets people well, bonding between physicians and their patients.

Your patients need to know you care, but you can't do that if you're starting your script. Three minutes into their appointment. And I've been so disappointed seeing doctors because, you know, as soon as they walk in, they're thinking about walking out, which means they don't see me.

And if they don't see me, why am I going to do what they said? Well, you know, it's interesting because we're trained this way. That's what residencies kind of taught us.

You know, I went through residency in 2009. Oh. And a lot of people in my generation, I'm 30, know a lot of people like, you know, have that that demeanor of getting to the next patient, finishing your day.

Here's my deal with 35 patients. Here's my inpatient list. Here's my outpatient list. I went to internal medicine training. And then you're you're taught that if you finish early, you're good resident.

And I just think that's very wrong because you have so many fantastic and beautiful people. There's no joy and type of practice medicine, you know? Well, I think that's why doctors who do concierge medicine have less burnout because they take more time.

And what are relationships require? Two things time, actual physical time and listening. And so many physicians are terrible at that. I teach all of my parents active listening.

Do you want to have a better relationship with your child? Spend 20 minutes a day with them. Do something that they want to do and keep your mouth shut.

Be really good at listening. That is like money in the emotional bank for your children. If you have rebellious teenagers, it's often because you're not bonded to them.

Bonding is just critical, and if you have rebellious patients, it's because they're not bonded to you. It's hard to bond with 35 or 40 people a day. I mean, that's hard.

I mean, as a physician business leader, you know, if you can't do it because, you know, we see 80, 500 patient hours a month, I can't do it. But but I have a staff that does it right.

Going back to my case now, being kind, competent, passionate, hire the right people and then don't make them see their patients a day. And that's exactly right.

If you can't see, people for very long have staff that do it. You know, that's why it's so important. 2021 you have new insurance reimbursement guidelines for health coaches, for example. Right. Health coach?

I can't imagine doing a clinical practice without health coaches like I it doesn't. It baffles my mind. I would just be very angry person. Because I help coaches really drive so much connection.

They get so much information. Last week, my health coach pointed out something and alerted me, that this patient probably should be in the hospital. We actually call it an intervention right before rupture.

So that was that was criteria for that. Health coaches. I don't know what would have happened to our patient like. So there's so much more to the engineering medicine, especially going from 2021 forward, that that we can automate using technology, using and hiring different people that, like you said, are not assholes right into the board.

And there's a whole half taxonomy of professionals now, like health coaches that are actually trained, not sponsored, which is which is a very, very good thing that, we want to, we want to, incorporate into clinical practice.

So, you know, I think that relationship is the key. And providing patients with certainty with significance, with, connection and then with with a purpose.

Those are the four things that I need to practice very addictive. And with the average time of a primary care pace, primary care doctors, number of patients, 7.5 minutes in the United States without any additional support staff nurturing that relationship.

It's just not possible.

Stigma, Treatment, and Brain Optimization

And I think that's what's wrong. Medicine. That's what. That's what that's why, you know, we fire from the hip with the script. And that's how we were trained.

And, and that paradigm needs to shift a lot. And say it's and that's what happened in the early 90s, that when managed care took over medicine, when doctors start, stopped owning their practices, and doctors became

beholden to insurance companies where insurance companies are not about health, they're about quarterly profits.

I mean, you just have to, like, own it. They're they're not about health. It's about quarterly profit. And that's not what's good for patients. And, you know, in 1992, I had, champions I guess now Tricare denied a state like a whole state for a patient that was suicidal.

And I couldn't let her out of the hospital. So I was worried she would shoot herself. And when they denied it, I'm like, I'm done with you people. This is not why I became a doctor.

And it was the best decision I made. But, you know, if you don't take insurance, you have to be so good. People want to come to you. But I know you take insurance, and you figured it out, and God bless you for it.

But that's when medicine changed and burnout skyrocketed, because all of a sudden, they're not working in the best interest of their patients. And that makes you sad. It is.

And and the residencies were trained and usually university programs. You know, I trained in New York Presbyterian in Queens. So, the doctors there aren't necessarily worried about insurance reimbursement.

They just get a salary and they kind of go home. But but all of us are trained in that environment. And there's no training for business and revenue cycle and all this stuff within the insurance side.

And, that's, that's slowly changing as the University of Texas was asked in court, on, on the business of medicine. Now, actually, one of the, the lectures actually part of the summit as well.

So I think we're starting to shift paradigms little bit more with what we need to be. So but we're I think we're getting there on the, on the insurance side.

Well, you know, you're on like 38. I was sitting here thinking, you know, I'm just so excited for you. You're doing so many things right that the next 20 or 30 years, you're going to be involved and changing medicine in a healthy way.

And I'm just happy to be helpful. I'm honored for you to say that. So thank you so much. So, in the interest of time, we've been talking for a good hour now.

But we're going to close it off, really quickly. And I ask all my guests this. And, what have you learned recently that you wish you knew 20 years ago?

Recently, students. You know, I was on a podcast a couple of weeks ago, and I said, what's the one piece of advice? It's the best piece you've ever got.

And I've loved it so much. It's argue with reality. Welcome to hell. And you know, we're just coming out of a well, I don't know that we're coming out of the pandemic, but we're in a pandemic.

It's humans have survived because of our ability to adapt. And I think too many people are like they're focused on what they hate, whether it's masks or vaccinations or government intervention or the political environment, and they're not focused on what they can do.

And that'll just help decrease burnout so much. And I prayed the Serenity Prayer thousands of times since the pandemic started. God grant me the serenity to accept the things I cannot change.

We're in the middle of a pandemic. The courage to change the things I can. Okay, how are we going to do telehealth better? How are we going to reach out to the people who need us and the wisdom to know the difference?

So it's can I intervene here or do I need to let that go? I'm going to, do something a little bit on what I call mad mask anxiety disorder. And, it's like, you know, if it's mandated, there's nothing you're going to do to change.

So obviously, I mean, you can lobby and do what you can do, but then you need to just let it go, right? Right. And so on the physician side. And I'm so glad you brought that up.

And that's a great point. Here's here's what I hear. So, you know, I'm part of a very large hospital system here where I get access to the critical care doctors and nurses and, you know, case vaccinated non-vaccinated who how many Covid beds that we have, how many ventilators and we have daily list that come.

So I know where to send our patients. We see about 15 to 20 Covid patients per day, by the way. So it's quite a bit. And so, and so I here in that room, there's me that I kind of like to hear viewpoint on is that all these critically a lot of these are doctors and there's, they're like, you know, I'm so tired of treating this patient because this patient chose not to get a vaccine.

And to me, that was like, you know, we as physician, we care for patients. But, you know, to create resentment in, within a patient, even subconsciously.

This seems wrong to me. Right. And I didn't really it didn't really sit well with me. What do you what do you do about that? So that's probably the persistent brain type in my new book.

Your brain is always listening. It's the judgmental dragon. You know, the world is black or white, and if they're not my way, then, I think it's not helpful.

You know, we have a choice in this country. Be vaccinated or don't. And if you don't get vaccinated, you're at higher risk. But you have that choice. I think our job is not to judge our patients.

Our job is to serve them and judge. Judge mental dragons increase burnout because you're angry a lot and I, I love forgiveness, the you know, I mean, did that provider can't change that person's mindset.

You know, that takes a while, right? And that takes bonding. It takes trust. And when I talk to my patients, I'm like, I think it's a good idea for you to get vaccinated because the vaccine takes Covid from a dirty bomb that can infect every system in your body to a cold, basically.

That's my viewpoint. But if my patients don't get vaccinated, I don't shame them. You know? It's not my decision, right? Remember informed consent. We learned this first year of medical school.

It's not my job to tell you what to do. That's not my job. My job is to do a good assessment and then to give you options. It's your job to decide. And then I supported as best I can.

Absolutely. What a what a great way to end this I love that. Thank you. From work. Thank you very much for coming on, taking the time out of your really busy schedule in your walk huddles and totally incorporate that now, so, we, we have links to all your books you've written.

Your brain is always listening is, the most recent one that I've read. And it is just a fabulous book. And then I believe you have one coming out, right?

In 2022. I do, it's called You Happier the seven Neuroscience Secrets of Feeling Good based on your brain type. Great. I can't wait for that one. So wonderful.

Thanks for, thanks for being on. Really appreciate it. Have a good one. All right. Take care.