Chiro Neuroimmunology: Deepen Your Impact Transcript

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Introduction and Speaker Credentials

Welcome to the practice upgrade summit. I'm Doctor Dennis, permanent. Our next speaker graduated magna cum laude from Western States Chiropractic College in 1978, and his practice for 34 years in The Diplomat in Chiropractic Orthopedics in 1986.

For the last 38 years, he served as professor at Life Chiropractic College, West, and sits on the Postgraduate faculties of several of the chiropractic colleges.

His academic scope is vast. He teaches management of spinal disorders, whiplash and spinal trauma, neuro immunology, which we're going to get into today.

Pediatrics. Phospholipid neurobiology, the neurophysiology of therapeutic lasers and nutrition, and coordinates the ICA certification program. And chiropractic, spinal trauma.

He's taught more than 1400 postgraduate continue education seminars, including classes in the US, Canada, Australia, France, England, Portugal, Ireland, Italy, Greece, New Zealand, Spain, Panama, South Korea and Peru.

He's a contributing author to several books on motor vehicle collision injuries and on pediatric chiropractic. He's written a quarterly column in the American Journal of Clinical Chiropractic for over 30 years.

He was named ICA Postgraduate Educator of the year in 1987, 1991, and 1995. And we see the issue of California's call as Cleveland Junior Educator of the Year Award in 1997.

In 2001, he was the top vote receiver for the Virtual Chiropractic Association poll by Dynamic Chiropractic in 2003. He was icon of California's Chiropractic with the Year Chiropractic Pediatric University's Pediatric Chiropractor of the year.

And Chiropractic Biophysics is Chiropractor of the year, a highly prestigious award. Because CDP has more chiropractic research studies published in the scientific literature than any other chiropractic group from 2003 to 2009.

He served as vice president for the International Chiropractic Association, and was honored as Ike's Chiropractor of the year for 2009 2010, a constant source of chiropractic intellect, imagination, and inspiration.

He reviews articles on alternative health issues, which can be accessed through his website at. Of course dot Dan Murphy dc.com. So please help me. Welcome to the Practice Upgrade Summit Doctor Dan Murphy.

Dan, thanks for being with us. Hi Dennis and hi everyone. I know the last thing you wanted was me to spew a litany of your accomplishments because you'd rather just get into the work at hand, and we're going to do that right now.

Dan, you've chosen for your topic to discuss neuro immunology. What is chiropractic immunology? Well, I would just start by saying there's a lot of things that I can do pretty well, but we're in the middle of a global infection, and there is a lot of controversy out there.

Whether or not what chiropractors do can influence immuno allergy. And there's it's pretty much into to two camps. One, can we improve host health so that if they are infected, their own system is better to deal better able to deal with infection?

Or the second category is if you are infected and you haven't been taking care of yourself. Can chiropractic make a difference?

What Chiropractic Neuroimmunology Means

And so my, my, my life and all of this starts with my mom who had cancer and she did a lot of alternative interventions. She lived 26 years after they told her she would die.

They were just very bizarre. Not that she could live 26 years. With the cancer that she had. And she eventually died of cancer. But her alternative path led her to strategies to improve host health, including the, chiropractic.

The result is I have been involved with her. And then, of course, I became a chiropractor really young at 22. And I've always had an interest in chiropractic and immunology, and it's a neurological thing.

So it's chiropractic neuro immunology. So my intro and if we did the math, you correctly said I graduated 1978. I've actually therefore been a chiropractor now for 42 years, and my interest has always been in neuro immunology, even though I do whiplash.

Well, I did paid at the way of last week. I do things really well. Neuro immunology, I think, is a fascinating topic, and I find that it is not often discussed in detail in chiropractic college undergrad level.

So I discuss it with my 12 quarters senior class, and I also put together a post-graduate, presentation. And it's pretty long. It's like 15 hours and it's just absolute fabulous stuff.

I mean, just the things I that I find, in fact, I'll show you something that I found that I gave it to every PhD on campus at like, chiropractic college where you could just see their their jaws drop.

They go, oh, can I have a copy of that? Here's your I just yeah, I make copies for everyone on campus. It is this. It's, It's called autonomic cellular.

And the second author. Or it might be well known to a lot of you. It's, sir Roger Bannister, the first man to run a mile in under my legs. This is a 2013 copyright.

And on page 242, he's got a picture that justifies buying this $900. But did $900 book. So, I mean, I was like, whoa, whoa, who needs a book like this?

Well, I need this picture. This picture is just so amazing because it explains chiropractic, neuro immunology. Of course, you've got to dovetail with other things.

I mean, you've got to dovetail with this, but, how you know, how the immune system works by Lawrence on page right out of the universe. Colorado. This big ugly thing on the cover, that's a macrophage.

Well, the macrophage is going after a pathogen here in the front. This is a pathogen right here. But what this book goes over flawlessly is that that macrophage is innervated by host ganglion sympathetic effects.

And so we've got all of these little pieces. And we just kind of put them together. And when we put it together it's not difficult. It's been done for decades to wire the chiropractic adjustment to the function of the sympathetics.

Then once you do that then you take references like these guys and you say, we don't have the randomized clinical trial, we don't have perfect research, but we definitely have biological plausibility.

And then you get into clinical practice and you have just not only our own experiences, like my mine are 42 years long now, my very first year of clinical practice, this nice lady named Paul says, Dan, since I've been coming in here, I have not had pneumonia.

Prior to seeing you, I suffered pneumonia every single year because something is different. We see so many different immunological things and then you just go back in history.

You look at the 1918 flu pandemic, you read the osteopathic literature of that era, you look at the chiropractic literature of that era. You start putting all of these things together and you take out, my gosh, there is a ton of anecdotes showing that what we do mechanically and influences the system, and it's simpler than you think.

I think it's simpler. And that is, if you look at what I think has always been the missing leg, and that's the JM study from Spine January of 1987. There's tons of anecdotes up until that point, but at that point they showed that the Meccano receptor communicates with the sympathetics in the seventh layer of the spinal cord, and that you cannot do something mechanical like we are known for doing without influencing the sympathetics.

And then you show the sympathetics controls the macrophage and the macrophage controls immunity. That's why it always reads like chiropractic. When you grab this and you just take a look at that.

Two starts on page 13 and it just says write up the innate system rules, the innate immune system. I mean, the page before it says the innate system rules, it controls it.

This is the innate system. And this guide is wired to a sympathetic if you look at Bradford's text like this. When Roger Bannister ran that set for a mile, he was in medical school.

He became one of the world's leading experts on the autonomic nervous system. And there's so much more because we look at the work of, cor, you know, the Princeton physiologist, we look at the Windsor study from 1921, you then you look at the brand new hour, you look at, Kevin Tracy, he's a neuro immunologist out of New York.

Just look at that article that he did in nature Reviews of Immunology in June of 2009, and he shows how the quarterback for immunology is a brainstem spot called the nucleus tracker solitaires.

And then you look at the studies by Ian Edwards and colleagues out of UK, where you can get Dyson optically into the nucleus. Track two solitaires by doing Upper Circle Chiropractic.

They actually mentioned that in their article. And these are from the top journals. This from the Journal of Neuroscience, the Journal of Chemical Neuroanatomy, the Journal of Brain Structure and Function.

You look at this stuff and they're plotting chiropractic. And what is weird is they're not looking chiropractic for musculoskeletal pain, which I'm really good at. That's kind of how I make a living.

But from an academic perspective, this explains how chiropractors get visceral visual outcomes, including if nucleus tract a solitary is isn't fact quarterback for neuro immunology.

If you can get in there you can say and this is could be an explanation for chiropractors do some really remarkable things. In the immunologic world, I if I was a billionaire or a billionaire, I would throw my research dollars into figuring out what exactly are chiropractors doing.

I think right now all we have is really interesting. Biological plausibility studies. But a lot of other types of science put like this if we could patent chiropractic like a drug that had been like, I'm gone, but because we can't and most of our research is self-funded, you look at Dede Harrison hitting people up for money, you look at Heidi Corbett hitting people up for money. This is how they fund their stuff.

They need they need chiropractors are self are funding this research. We don't have government funds. We don't have big pharmaceutical money. And the result is this stuff kind of gets pushed on the back burner.

Explaining the Science to Patients

We keep seeing how good chiropractic is for musculoskeletal. We are, we are good. But it is good because probably we closed the pain gate with the Meccano.

But when you start realizing that see, Meccano communicates with the sympathetic controls if they can. Whoa, said

the sympathetic controls. Look at the Ellicott City from from December 2000.

That study is really good. It's like a book. It's 43 pages with 446 references. If you look at that study, they flat out go over how the Sympathetics controls immunity.

And yet they've proven proven in 1997 proved that the Sympathetics communicate with the McKenna receptors using genetic research. And I'm thinking this is some really good stuff and it keeps getting better and better.

If you look at the Agoura Studies, a did it in 2017 and 2018 and it's most remarkable research they're doing. They're injecting human beings with radioactive glucose and watching following its conversion into adenosine triphosphate using using Pet scans, positron emission tomography.

While measured levels of saliva emulates to assess sympathetic code. You look at their conclusions. I mean, these guys are all of these these except for one chiropractor, and there happens to be a likewise graduate.

But if you look at what they're saying, they say flat out that chiropractic is inhibiting sympathetic tone. Look at the code study from the New England Journal of Medicine back in 1990.

What that study is killer. It takes 394 human volunteers of viruses into their noses associated with the common cold. Everyone got exact exposure. Did everyone come down with a cold? No.

Who came out of the cold? Only those who had increased levels of catecholamines. Norepinephrine from the sympathetic nervous system. If you can dial that back, if you can inhibit it, which is what both studies say, it would boost immunology.

And by the way, all of that stuff I think about of all of the code. But take a look at this one if you haven't read the book, by Nancy Appleton The Curse of Louis Pasteur.

If you read this book, it's all about why host health is important. And so that's kind of our message for our patients. We talk about, okay, what are we going to do to keep a healthy house.

What can we do. And we we do the intervention. We talk about diet and supplements and exercise and sleep and of course, chiropractic, cause we're chiropractors and we're we're hardcore chiropractors.

As you mentioned, I'm a former vice president of HCA and former chairman of the Year of Eisai. And so because I really want to understand kind of what we're doing, and isn't that an amazing response to a simple question?

It's extraordinary, Dan, and know you answered my first five questions, and the first time since I've no idea what I'm about. The questions. Oh, no, no, no.

It's beautiful. I have never drank off a fire hose and had so much delight and wonder doing so now. You are also a, a very experienced clinical practitioner.

Now, what you've just said is doctors speak, and it's really important that our doctors understand the interrelationship of the sympathetic nervous system and the immune system.

But patients don't speak that language. How do you translate what you do into a language that patients can comprehend, so that our doctors can use it practically in their offices?

What will you you know, you you know, Michelle, I call her my Michelle. Michelle's my partner. I've been a chiropractor for 42 years. She's a Logan grad, and she's been up for 35 years and, what she has made me do is, is cut videos to to shoot it, to target the, layperson and interesting the staff person.

So, like, they could take one ten minute, you know, thing and insert at a staff meeting just to kind of get everybody on board and, and kind of talk about it.

You can definitely, dial that down quite a bit and if you, look at our office, it's all based on education. If you look in the office where I am right now, to my left is a huge, whiteboard.

This is kind of the report findings from there. These whiteboards are in every room, and we draw things really simply. And the other thing is, and this this actually hit me, some decades ago, I, I've, I've had not only a lot of experience myself, but I've had honestly 70 associate doctors over my career.

And I would keep four at any one time. And the doctors would all meet on Monday morning, and we would talk about what we did and whatever. I remember at ten of my, my first ten character seminar and, I told my doctors like, oh man, I learned it was the best class I ever read.

Do I tell them? And they go, really? They go, where'd you learn? And honestly, I couldn't even think of one thing, even though I couldn't really understand what he was saying.

So over my head, I walked away thinking this guy knows what he's doing. I would give patient education class. So I'm a die hard do patient education class.

It's required for all patients. We do it Tuesday night, 730. And it's over the decades we've had a 90 plus percent compliance. It's just everything is geared to get them in.

So an hour and a half presentation and we just kind of, you know, tell him the story. And I do it pretty academically. And it's what is so strange to me is the number of people who come back, like on Wednesday morning and say that good class, nice class, I know.

Thank you. They got a no idea what you were talking about, you know. Yeah, but can you check my kids out on Friday? Yeah, exactly. Yeah. So a lot of times I realize people don't really need to get it.

I remember years ago, I did a the parking thing. They had all the old timers come up with. Some are old timers. They could barely get up on the stage, and they all spoke so eloquently and I took notes.

I showed my class and as far as I can tell, their message was this the number one rule and success is the enthusiasm of the doctor. If you're enthusiastic, and I think that we're really enthusiastic about the job, and I think people feel that and they, they, they can tell that it's not just a belief system.

It's really our lifestyle. We live this lifestyle. And the result is we have always been extremely busy, busy. And I think it's a we are prepared, we are competent in our message aspect.

We're very enthusiastic about it and we love to talk it up and we'll talk it up everywhere and anywhere. I mean, Soroptimist, Rotary, our own patients, any group that wants to hear us, we'll do it to a veterans group will do it, to an addiction group.

We'll do just about anywhere and just kind of custom it up. And I'm good enough now that I can just make it up on the spot and just go in there and say, well, because it's really we we live it.

So I always try to bring as many books as I can just, you know, whatever is it this was as this as and people, other people feel our passion. And if you look at all of them, all my drawings, like, I'm not an artist, it's just stick figures.

I mean, you look at all of our boards, they're just stick figures all over the place showing people how things work. And in people, people do get it. I find that that, like, people definitely do get it, even though I might.

I use some pretty big doctor words. You can definitely just dumb that down and draw some stick figures. And it works really good. Which is my that your son, my my 12 quarter senior class.

It's a stick figure class. I mean, I had class with them yesterday. We do two picture stick figures that are so amazing and they have determined his homework.

I collected their homework. I'm doing it today. Seventh as homework should be in frames, it is so awesome. And they write me notes like a man who are really good at so doing.

Stick figure. Because what what's learning? Learning is repetition and cerebellar engagement. I read the January 2020 Scientific American and Human Evolution based upon exercise in a gravity environment to through through the cerebellar loops.

How the Brain and Immune System Connect

I figured out how to engage the cerebellar loops with drawing. So we draw things and that engage the cerebellum. So we're using the three big systems.

Their eyeball, their ear and their cerebellum and making them do drawings. The result is that understanding is really beyond anything. And so we continue it.

You know, we draw everything. I draw for my patients. I'm on eight and a half by 11. Copy received papers I'm drawing. Well, I give them to him. I go here, you know, to people and sometimes you just people that don't even have that proper look.

And they're going because we work in open a gas. Something got or can I have a copy of that to the people at that. So you sure wish to get a copy machine because he wants to always go to the page.

I do a pencil. Whatever. Well, you're too modest saying you're not an artist. I mean, it's the story of Picasso drawing a, on, the back of a napkin and being sold for $30,000.

You know, those those priceless insights. They, they may be stick figures, but they're certainly, magnificent in their own right. Then I want you to elaborate on the kind of communication that doctors can have amongst themselves about building more of an understanding of how chiropractic directly influences immunity.

We've talked about the, the seventh layer of the spinal cord and the interrelationship with the sympathetic nervous system. That makes a lot of sense.

Yeah, but I know our doctors are hungry. You are a master of this. Dig more deeply into exactly how the brain talks of the immune system. What? Well, what we know, that's for sure.

The body has immune organs and there's like five. There's there's, gut mucosal, linings. There's that there's lung mucosal linings. There's, the the tonsils, there's the spleens, there's the lymph nodes.

And the big dog is the bone marrow. All of your immune system cells, 100% of them are bone born in the bone marrow. They go these other spots for maturation and function.

But what techs look at and I mean all text, I mean just whatever, just looking at this one here, psycho immunology. If you read the Allen Cox study that I mentioned earlier, every immune organ is innervated by this guy.

The Sympathetics 100%. There are no exceptions. And these are not standalones. For example, example brain behavior and immunology is a top medical journal.

There is an article that came out in August of two year or seven. So 13 years ago this month, August 2nd zero seven. An article on neuro immunology. And it says what controls immunity is the sympathetic nervous system.

The sympathetic nervous system comes at its seventh layer. The mechanics go in and they've proven that they're not just like separate. They communicate. There's a synapse there.

And so they know that this is what controls the immunological cascade, and it does it through the macrophage. And again, the macrophage is the cover of this particular book.

This this player is wired through a specific relay is called non synaptic communication. So it's somewhere between a hormone and a synapse. The synapse is like this.

But what happens with the sympathetics it dumps. It's chemicals are called catecholamines norepinephrine. It dumps it into a compartment like like star Trek metaphor.

You flood the whole compartment. Every cell in that compartment has a receptor for that. Catecholamines and the receptor gene, activates a cascade that goes through the cytoplasm and turns on and off genes in the genome.

These genes make molecules that are collectively called cytokines. Cytokines can be good or bad. And now when we hear about Covid, we always hear about the cytokine storm.

What are some of the things that are happening in the cytokine storm? How can that be influence? I would encourage everyone to read the book on immunology from lecture by Matt Rectal.

It's called and it's called and an elegant immune response. It's a 2019. Right. You look at that. Oh my gosh this is killer. Good information. Because you realize that the immune system needs certain degrees of practice in order to function effectively.

And often medical interventions early in life interfere with immunological practice. And one of the consequences is the cytokine storm. Matt. Rectal, rectal IL 2019.

Really good book. 2019 copyright. I learned a lot about it, but the point of it is what is chiropractic do with pain? So just pretend this is not the sympathetics this upset the pain here?

Well, chiropractic does mechanics. It inhibited it does it across the back that they call it the gait. They're a pain. Well the other diseases that's what chiropractic adjustments due to the sympathetic tone.

If you inhibit sympathetic tone increase sustained sympathetic tone is when you get sick, when you get sick, when you're cruising or stress and when you're stressing.

That's the common study from the New England Journal of Medicine. So if you can dial down the sympathetic tone, you get an immunological boost. The Agoura studies with the retroactive glucose and saliva amylase flat out show that chiropractic adjustments inhibit that pull back the sympathetic tone.

The result is a lot of good things. And if you listen to my, my, my academics, take a look at the Telomere Nobel Prize by Elizabeth Blackburn. She says the number one thing that shortens the telomere is chronic exposure to catecholamines.

Adapt effort to the stress response. So I keep thinking, well, if chiropractic is really done that back for immunological, is it value back for telomere length?

I think. And that's where I think chiropractic should be throwing their eggs into those baskets. I think we should look at telomere length. I think that we should look at, catecholamines.

I think we should, look at things other this as an expense. And I think we should look at, epigenetic methylation pathways because the same norepinephrine, the catecholamines, they also alter epigenetic methylation.

All of these things means that chiropractic has an incredible, awesome future. That's because, I've already seen one preliminary said in chiropractic adjustments, chiropractic care on telomere length.

And it was like 8% longer. Study was underpowered, but it's the beginning. The other say study underpowered. But we start with the the session underpowered and we justify a larger study and try to get it funded, etc.

that I think that chiropractic can look at a lot of things as related to, the catecholamines, particularly, a

norepinephrine. But then you have to put this into the context of our current world, our current world, this you must read, the book hacking of the American Mind by pediatric endocrinologist Robert Lustig from from UC San Francisco.

You dovetail that with brainwashed by David Perlmutter and his son out of Naples, Florida, neurologist with a degree in nutrition. And then you run that back around by reading the book, the Molecule of More by Daniel Lieberman from from, 2017.

And then you jump back and read Fred Kravitz book on dopamine and human evolution. What you realize is that our society is geared for dopamine, for everything.

But what is weird is dopamine is in the same category as catecholamines and effort from the sympathetic. A result is when you're constantly working up the dopamine pathway, which society does, you get more epinephrine and you don't get the same outcomes that chiropractors were used to getting.

This is why the most critical chiropractors to talk if you get opportunity, is the chiropractors that are doing third world missions. You are dealing with people that don't have nonstop chocolate, nonstop beer, nonstop iPhone, nonstop internet, nonstop everything that we have and take for granted.

When you don't have all these things, your overall dopamine levels are lower, which means you're you're kind of cleaned up, an effort is slower and it's easier to do the job chiropractic does.

The other thing is you have the people are so poor, don't have very much. You ask them if they're happy. They all say you have plenty, have it. Well, you look at America, you get people that have all this stuff and you have, you know, I'm not happy and I need anti-depressants, all that.

And that's because if you look at the balance between dopamine and serotonin. And so we talk a lot, even this morning when I crack the email, I had characters ask me about melatonin because melatonin is critically important because it's on the serotonin pathway.

If you can get more melatonin, you can get more serotonin. And it and serotonin is a really for both not only depression but also for pain. So I did pain at the way.

And so that's why I kind of got into it. People were listening to me on all of that. We also just see, the general medicine of drugs just came out with an incredible, awesome study on how melatonin can inhibit the cytokine storm of Covid 19.

And I'm thinking, oh my gosh. And there's a chiropractic connection to all of this stuff. And so we talk it up and we show them the physiology and things.

What I had a lot of people sign up, you know, for that for the way and, you know, the kickback I'm getting is half of them says, man, I'm glad I'm out of school.

Stress, Telomeres, and Longevity

The other half says, man, I wish I was still in school. I was just like, it's so over the over the top, putting all these ideas together and yet others just thinking, man, I wish I knew some of this stuff because there's so many applications and for every facet of life.

And of course, we always dovetail it into because I, we do not believe that chiropractic is only about assault luxation. We believe chiropractic. I need intelligence that what are the factors in the intelligence that are being violated in today's modern world that make it harder to be the chiropractors that we want to be?

So we talk about innate intelligence about while doing things like drinking, diet sodas with aspartame are against innate intelligence. Why? Because Mother Nature does make that know.

Because aspartame has problems. You have an exciter toxins with, which is aspartame mixed with alanine, which which which further competes with the the happiness pathway.

As you run into the blood brain barrier and it's mixed with an egregious, toxin, a methanol group that is just one enzyme away from formaldehyde. And if you have for Malahide in your nail polish now, they'll bust you and, you know, find you and they revoke your license.

And yet they can put the precursor into your diet soda. How many know that in 2017, the journal stroke, the official journal of the American Heart Association, one diet soda per day, one per day, increases one's risk of Alzheimer's by 300%.

How can that be consistent with intelligence? It's not. You're drinking excitatory neurotransmitters that are also carcinogenic, and they destroy the microbiome.

You destroy the microbiome. You you are systemically inflammatory, systemically planned, nothing works quite right. And it is more difficult for chiropractors to accomplish their goals.

So we kind of take all of these innate concepts and rather into our clinical practices as so our chit chat is this stuff. Our practices where we are chiropractors, I mean, we look at the way people live, exist and function in gravity, and we try to figure out what we can do to improve them, particularly since all of this stuff is awesome, but it's even more awesome if you read Energy Medicine by James Osmond, 2000 chapter chapter 11 To Die for Good.

If you read that article on mCAT of Biology by Donal Edinburgh, the pediatrician out of Harvard and the Annals of Medicine in 2 or 3, if you read the fashion book by sleeping 24 in the Best Chiropractic one on steroids, read the book Move Your DNA by Katie Boehm in 2017.

What all of those references that I just wrap up say is that we put so many eggs into a basket of neurology, particularly mechanical neurology, because we are mechanical providers of care.

But you realize that there is a parallel whole body communication network separate from the nervous system called the tensegrity matrix. And together you get mCAT of neurology and mechanic transduction to the matrix.

And you have what is called today mechanical biology. Chiropractors are working on multiple fronts, even though most chiropractors don't know that. But we have always worked on multiple fronts.

Other than just the nervous system, just because that's the way the body is put together and history, if you go back in history, there has always been someone who has done something to someone.

What we do, we do mechanically. If you don't have good mechanics, things change. Read again. Scientific American, January 2020. The one on On Human Evolution.

Actually, it's the cover story. You look at that and say, oh my gosh, I'm really good chiropractic in this. I mean, I don't know, I feel like I read it, but they're explaining why are we why we are valuable.

And that's, what I'm hoping all chiropractors kind of, you know, appreciate that. I think that I think the greatest reason to be a chiropractor myself is that you can never actually figure it out.

It's too that every day it's there's more to learn. There's more to do. There's more techniques. There's more cool things every single day. So that the ability to become bored is is zero.

I know it is my 42nd year and I get so excited about it and I am. I know I haven't peaked yet, I mean, a lot. I've seen a lot of my classmates. I've already turned it into hell, whatever.

But, our passion is just, so over the top. In fact, I, we believe that it it's a responsibility to work as long as you can. You mean you have a gift and you're supposed to be helping people and to throw the towel early?

I think it isn't having enough money. It has to do with service to humanity. You're supposed to work as long as you are effective. Plus, if you see those studies and when you retire, you increase your risk of Alzheimer's 3.1% per year of retirement to never retire, you go until you're no longer effective.

If you're not effective, you to turn it out. But, I'm still effective in retirement and even on my retirement, me about the same as yours. I mean, it's like a good, What?

Yeah. You look 20 years younger than you are, so that's a good start. But, let's talk about that. Thank you. Know, it's true. Your vitality is. Is that, that I have.

I have two questions. First, my hand is cramped. I can't even take notes. I mean, I'm so excited. This is so information rich. And you name names and given incredible references I got about a year or reading now, so thank you, because I didn't have enough reach.

But, I have two questions that actually may seem like they're in different directions, but, I think they're going to arrive at about the same place. When you talk about the telomere studies, what are the things that we started to pay attention to was serum file.

And, I wouldn't be surprised if you have some distinctions on that. But our listeners who've been a little bit exposed to it would probably be curious about what the other the other side of that, that's the longevity piece.

The other side of it is people are now in sympathetic stress, doing sympathetic overload almost all the time. And they were anyway. And then, you know, had the, the viral infection and people are over the top.

What are some of the ways that you put your best knowledge together to explain how both people can cope immediately with the sympathetic stress overload, and then ultimately by getting your serum file, levels to the to the right.

But, well, the first thing I would tell you is that you actually said that very eloquently. You said that very, very well. And a lot of people don't get that is that we are at a point, sympathetic tone that is unprecedented.

And all of world history and that is directly linked to the telomere length, which is which is read the book on the telomeres by Elizabeth Blackburn, also read the book by Michael Fossil.

His book on on the telomeres is is such good stuff. If you're stressing, you are in trouble because you have increased, coming up an effort which is immunosuppressive.

It also shrinks your brain. It also damages your arteries. It damages everything. Every everything is in trouble. And so how do you deal with that? Well, again, our lives are no different than anyone else.

I mean, we have kids and parents and siblings and and and and and overheads and everything else. So what do we do? Well, the the committed, read strategies that reduce stress, are exercise and meditation.

We do both. So we are hard core exercisers. We are we are interval trainers. I learned interval training, from John McCullough. So we do his thing, which because we don't have, you know, two hours to exercise every day, we have to get her done.

And so we are committed, interval trainers and Michelle, who, who, you know, and I know a lot of the audience, do not know her, but, I've never seen her go through a day in life without exercise.

Just literally every single day. I take a day off every night, and she she never dies. The other thing is, we meditate. So we are committed meditators.

We meditate on our goals. We use the reference, the first book by Daniel Almond, the brain imagery out of UC Irvine, is a neurologist, actually, and it's, tangible change your life is 136 137 he goes over a protocol.

So we do that, I give it to my seniors. The other thing that Michelle said, and since she's been up here in our practice, because she was 30 years in Arizona, she's been up here now for six years.

She has made us all do a gratitude list. So we create a gratitude list. And that's part of our meditation as well. So because it is so easy to concentrate with things that are wrong and it just it that stresses you out, I mean we just concentrate.

Everything is wrong with the world. I mean, you we all complain about this or that. Rather than doing that, we concentrate on everything that is great in our lives.

And so we create a gratitude list and they change, you know, and they just like we I mean, things are this simple, mean I've been blessed with the best parents, the best siblings, the best children.

I've never actually been hungry or too hot or too cold without being able to remedy it. I mean, I've been blessed in so many different ways. I've had the greatest education.

I mean, everyone in my life, like, including you and Bob, I mean, just everyone. How blessed am I that you guys are my my colleagues and my peers and we get to talk, etc.

to just kind of go over that. I changed as I said it in the middle of night when we wake up, rather than being haunted by something that is that is wrong in the world, we train our brains to go to everything that is good in our lives, and we fall right back out to sleep within loops, back in to the to the, the, the melatonin pathway, which is critically important when you get into fights and things like that.

I'm telling you, there's an article that all should read. Everyone should read the article by Bruce Ames from the proceedings of the National Academy of Sciences in 2018.

This guy makes that argument that includes your thoughts. This guy gives an argument on the competition between survivability proteins versus longevity proteins, and that you make proteins with vitamins and minerals.

Those are the those are things have to catalyze it. And if you don't have an optimum amount, the body always favors survivability, robbing you of longevity.

The result therefore, he says, there are things that are not labeled as vitamins and minerals, but actually should be labeled as vitamins minerals because they function as the vitamins and minerals that are required for longevity.

Protein Genesis. When Bruce Ames did that article, that was his 400th article. We equate genius with Einstein. Go, Einstein! So if someone is a we say you're an Einstein or whatever.

Einstein had 300 articles published in his career. That article by Bruce Ames was his 400th, and it's from Twitter, and he's from, Children's Hospital and just just north of like, West.

He said he's in Oakland, California, but he he goes over that and some of the strategies on how to, how to keep it optimum. And so we kind of tied that all up.

I give it to the students. Sadly, your son had already been before I became aware that you're you're Dan was was was already graduated. But these are some of the ones that I've already been, giving to my current senior class.

And I've been doing them on On the Road too, because I think that once you understand the difference, he calls it the triage theory, the competition between survivability and longevity.

And then I would tell all of you, there's a brand new book came out last year, by David Sinclair, and it's called lifespan. He's a young man. He's 50.

And he, he basically he says that if you're targeting living 100 years of age and being healthy, you know, mentally

and physically, he says there's a probably not a probability that you're targeting too low.

He says it should be higher, which is probably at least maybe 113 and maybe 120. And he says, because as a geneticist at Harvard, he says, we have, genes that are linked to, longevity.

And he says, we I'm a genius. I'm a geneticist. We are. We've identified the genes. Now, what we're doing is figuring out what do you do to turn on the gene?

And he says, as this is becoming more and more known. And so you look at his strategy, you know, like I look at how many we're already doing. He looks at things like, intermittent fasting, which we've been doing since last December.

After Rafael, the Cosmos article came out about John Hopkins and the New England Journal of Medicine, December 26th of last year, the intermittent fasting thing he he he talks about how exercise should be viewed as the equivalent of brushing teeth.

Future of Chiropractic and Closing Thoughts

It's something you should do every day. If you brush your teeth once a week, it's pointless, he says pretty much the same about exercise and that you really don't want to miss too many days of brushing your teeth.

Similarly, you do not want to miss too many days of not exercising. He talks about certain compounds like resveratrol, turning on the sirtuin genes, which are some of the longevity genes he talks about.

Cryotherapy to switch your white fat, which is problematic, into brown fat, which is not only not problematic, it is beneficial because brown fat is fat that is infused with mitochondria.

So all of a sudden you have something that actually burns calories and is called for for for thermogenesis. It creates, you know, and how you can switch it from white fat to brown fat.

I mean, stuff that's in his book, this book has some really fascinating stuff that would go along with those styles. And along with, Bruce Bruce aims his book and that is book, his article, by the way, his article came out of prestigious proceedings of the National Academy of Sciences.

But if you dial back all the way back to 204 Elizabeth, Blackburn, I think the primary study that they based her Nobel Prize on and to the right was her study from the same journal, the proceedings of the National Academy of Sciences of Nurses America.

Nothing is more prestigious. And it's about catecholamines from the sympathetic nervous system. If Agoura and colleagues are right, if you can make meaningful reductions to that with chiropractic.

So we do our meditation, we do our exercise, we watch our diets and we see our chiropractor. All of us see our chiropractors every week. We are committed weekly chiropractic and our message it was good for us every week.

Why can't be good for for our for for everyone who our patients every week and kind of thing. And so just because it may I think it makes a difference.

In fact every time I adjust I was anyway. Oh I mean, you come to a point we came to where we figured out a long time ago that, as you said so eloquently, people are so stressed out that very often the only meaningful non stressful moments in their life are the moments they're actually in our office and they're in there and they're telling you the story and you're listening to them and you're checking them out and you're talking back and you're giving advice and you're working on them.

You're touching them and you're doing things, all of this things. And for, you know, people, it's the it's the least stressful thing. It's the best thing going on.

It's I mean, we figured out that when the construction crew was changing, one of the corners in our in our office, that was a kind of a bottleneck that after their day's work, they would go get pizza and beer and come back and consume it in our office. Oh, God.

What's with you do? It's like, go home and drink pizza. Beer. And they go, I know we just like the energy or something. Yeah. It's like a non stressful environment.

And you see people coming early. You know Michelle it was really cracked because you working over adjusting. She she didn't tell people what. And people will come early just to sit in the area and just listen to the stuff.

And then she'd have me come down there. I pop up my laptop, people talk to me, and I'd say, well, this study, this study will be sure to. I said, would you like that? They go, sure.

If you set it off. Just so you know, you and I want to share. So we just set it off. That's my article review thing. You plug it. Indeed. I have scans of them and I have all kinds of new reading now, so I appreciate that.

Thank you. You don't care how hard I work I appreciate that. Then, if there was one thing you wanted every chiropractor to know and one thing you wanted every chiropractic patient to know, what would those two things be?

Well, I the first thing I with was chiropractors, because I that's pretty much my life. I mean, I'm at the college and I do my post-grad stuff. It is that I, I am concerned that chiropractic is so good at musculoskeletal that I am concerned that other components of chiropractic that are not musculoskeletal are not only, kind of being ignored, they're almost being shamed.

Like, if you think that chiropractic is okay for things that are maybe visual related, that there's there's a there's a negative attitude on that. And I am I am really against that.

I mean, my attitude is, is that if you only want to do certain actions or backs, that you do it, but don't tell me that's all I can do, because I have a practice that is that a lot of stuff?

And if I had a message to chiropractors, I would say pay attention because one of the things that that maybe, that broke my heart, I will say is the Sampath article from Medical Hypothesis, December 2015.

It's an article about how manipulation controls neuro endocrinology. That is awesome, but it's authored by physical therapists. You take things that have been traditional in chiropractic just when I just when I started 42 years ago that are now kind of shunned.

In fact, you get the top, academic rankings in our profession saying, don't do that. Don't even talk about that. You're not a team player. If you do that, you'll be part of the system which which which I reject.

I, I truly believe that chiropractic is more than just aches and pains. I think it influences systemic health. I honestly tell pretty much the exact same message to our patients is that, you know, on the web guy because I know what to do and I'm good at it, and we get a web based patient.

But our goal is, can we convince that person of the value of what we do outside of the injuries that they sustained, that originally brought them in? And so that's kind of our our message is just kind of, educating people in that think we're extremely low pressure.

We are the most low pressure. We have zero internet presence. Our office doesn't have a sign on it. We're just constantly busy. In fact, there's a big tree in front of the address.

You can't even see the address. But we are so busy. And it's just it's just it's just because of the services that we provide our community. We're in a small town, you know, our company is small, but, you know, the the energy field that the construction workers couldn't do without is exactly.

So. Yeah. Isn't that weird? I mean, it's just wonderful. It's one to me. I think it tells more of a story than anything you could say in words. Yeah, you, Dan boy, I could do this for hours.

You are so amazing. I have one last question for you. And it's about the future of the profession. There's so much conflict now. There's so much fear about saying the wrong thing.

And yet there's also so much inspiration and passion. Where do you think the profession is headed? What do you see in our future? What? Well, I what what I, I see what I think kind of, distresses me is that, chiropractic moving into a musculoskeletal niche is what I see happening.

I see that my, life long, perspective is that chiropractic is better than it is. Musculoskeletal is increasingly becoming less and less popular. Even though I think that the studies in the literature are more and more supportive of that perspective.

So, I, I, I, I'm pretty sure that all of us will be able to make a fine living and help a lot of people in musculoskeletal. And my hope is for the future that there is a continuation of evaluation, chiropractic for non musculoskeletal syndromes.

And again I would I look at the San Pat half article. I look at all the work of course over the decades. I look at those studies by Ian Edwards and colleagues out of Leeds University go to chiropractors. I look at Agoura.

I mean, Agoura studies are so awesome on visual chiropractic. And yet eight of the nine authors are MD PhDs and they're looking at chiropractic adjustments pre and post and what it does pre and post adjustment.

After you inject people with retroactive glucose. To say that those types of studies have no value distresses me. I'm thinking I'm thinking I'm thinking that chiropractic needs, you know, mouthy warriors.

And again, when people only want to do much for skeletal, I say bless again, bless you do that. You will help a lot of people, but try not to say that that's all all chiropractors should do, because other chiropractors specialize in other facets of the, the nervous system.

And, whether it be neuro immunology or endocrinology, which I think are probably blended, I think that all of that stuff is some of the great excitement.

I mean, I don't know how, the chiropractors, so many of them that that will see this, that, you know, through and through your efforts. But in about ten years, after starting work, I got to the point that I saw one more guy with low back pain.

I was going to scream. And then, you know, because I've seen it, I've done it. I know what to do. I know what it is. I know pretty much of the outcomes are going to be.

And it seemed to be increasingly not boring, but completely not really. Taking use of my skills and my knowledge, I think that doing some of these other things, have have helped me to really, stand on top of stuff.

And I would tell everyone, like, I, I say goodbye to my seniors, I tell them, never give up and never give up and always continue to learn. Don't cool off to the point of ignorance.

Always continue to learn. Go to classes, read books, be engaged and and and I say pay attention to every single hour. Try it. You know, try to memorize from it.

You can try it on your patients. See, see what happens. Look at the outcomes. And, it's it's a ton of fun. I, like I said, the best thing about me, for me, chiropractic.

I'll never be bored. Can't be bored, can't figure it out. I mean, every day there's more stuff. I think, oh my gosh. You know, look look at, look at this.

Look at where this fits in. And that's why if you ever want to see a fun moment, it's the first hour of life. Chiropractic College was for my seniors.

The first hour. It's whatever I learned in that week. I go, look what I learned this week and I just throw it all them and it's like, but right away I can tell a bunch of thinking, man, there is a lot out there.

Murphy can come up with an average with this stuff every week. That is applicable. To what? To what we do to to our jobs. So we can be better chiropractors and help, help, help more people.

And that is about as inspiring a message as I could imagine extracting from you. Doctor Dan, thank you so much. One of our great chiropractic treasures.

One of the great minds in all of chiropractic. And somebody who obviously is going to go for another 50 or 60 years. And I look forward to, I look forward to studying with you then and now.

Doctor Dan Murphy, thank you so much for being at the practice upgrade summit. I'm doctor Dennis Palmer. Thank you very much for watching. Thanks, Dennis, and thanks, everyone. Bye.