Introduction to the podcast and guest

A number of things I'm curious about. I guess that probably defines me as much as any trait, maybe other than patients. But I am curious what tools are synergistic with psychedelic medicine to bring about healing.

And I think we can talk about nutrition and making the body a less inflamed place and bringing diet into balance. Those things give us more depth and traction with psychiatric medicine.

but I'm also curious about things like… Does TMS create an enhanced neuroplasticity option? What kind of spiritual practices as a prelude to psychedelic medicine?

Either it's chanting or singing, I've been really profoundly intrigued with vibroacoustic beds and other sort of modalities that may just help us drop in in a more deep way.

Welcome to the To Curious in the podcast. I'm Dr. Ali Ahmed. With the wisdom from holistic, alternative and these conventional medicines, we are here to challenge the status quo.

We're curious about the connectivity and complexity between diverse fields of knowledge as a relief to consciousness, chronic illness, mental health, resilience and beyond.

Learning more about art and science of healing, or listening to stories of extraordinary healing. You're in the right place. Let's dive in. Welcome to the Two Curious M-Day podcast where medicine is more than science.

It's story, art, connection, and integration. And this is a space for the curious. Today's guest is Dr. Scott Shannon, a pioneer and integrative psychiatrist and whole person mental health care advocate.

He is a psychiatrist and educator and author who has spent decades exploring how mental health can be treated through broader lens. One that includes not only medications, but nutrition, lifestyle, relationships, meaning, and most of all, spirituality.

His work challenges us to rethink the boundaries of psychiatry and consider how healing emerges when we address the mind, body, story of a person together.

I hope that in this conversation, we'll explore the evolution of integrative psychiatry, how lifestyle medicine is reshaping mental health, and why curiosity, our favorite word on this podcast, brings meaning, maybe some of the most powerful medicines we have.

So welcome, Scott. How are you? I am well today, thank you. As I was telling you, we had a snow last night, so I woke up to a winter wonderland, which has been nice on this dry winter, but happy to be with you both this morning.

Thank you Well, we have lots of questions, and I'm going to ask the first one, which is really about how does mental health, how do you feel has evolved from your journey?

And why isn't conventional models alone enough in your experience? I think it's interesting.

Rethinking psychiatry and the limits of conventional care

It's sort of a journey in the journey of conventional care. And it' like they're coming together I think I've always been a bit of a rebel and an iconoclast and have always felt a big outside the frame.

But I guess if you just persevere long enough, maybe the framework will come around to you. So it's been interesting is that, you know, I used to tell people that I only have two concerns about modern psychiatry.

The first is the diagnostic system and the second is, the treatment system. Other than that. I'm pretty good with it. But so just getting back to the diagnostic system, the DSM felt so narrow, so limiting, and so damning, not respectful of people's potential and not understanding why their context was creating such a challenge, a drag, distortion of who they are.

And just really not understand that we live connected, deeply connected to so many different systems and ecologies of body, mind and spirit. And it just never resonated with me at all.

Now I'm just reading this morning that the APA is reconstituting the DSM, renaming it, trying to make it more systems-based. I think it's a first step, but I everybody realizes that we're not going to get very far in our modern psychiatry with the way DSM is so superficial, phenomenologically based, based on symptom patterns.

I heard some people describe it as modern psychiatrist are gardeners and not botanists, is that, we just group things by red flowers and green flowers, and we don't understand.

the deeper underlying structure. And I think, you know, as part of that, we've been doing brain maps and QEEGs at our clinic for the 15 years that we'd been open.

We're now seeing that aligned with so many things that were used for treatment planning, diagnostic sort of sorting, if you will, trying to become a little more of a botanist.

Now, I, think pretty strong evidence, there's been a recent paper about TMS that's guided by QEG. is achieving response rates that are just unheard of.

So it's trying to move us in the direction of personalized medicine, precision medicine. And then the treatment system, you know, the other half of that, I just have never felt fully engaged or a part of the sort of psychiatric medication paradigm.

I participated somewhat unwillingly, ambivalently at the very least, And even in the height of the Prozac sort of launch hysteria in late 80s and early 90s, I had a sense that these were partial solutions, but they were often as much a distraction and even perhaps a drag on people's innate resilience.

And so, I, as of that point, I got trained in acupuncture and it's that. I sort of dove more deeply into nutritional medicine and herbal medicine, looked at homeopathy, just exploring different pathways, trying to find a fit.

You know, ultimately all of these things helped to some degree. And the last 10 years have been coming around to sort where I started, which was with psychedelics.

psychedelics were always a strong theme, sub-note, discussion, interest. We had probably 20 medical students who were in Andy's circle and, you know, just finding out about MDMA so that after I graduated from medical school In 82, I went and did an internship.

I just had to get out of and practice and started working with MDMA in my practice, and other tools such as acupuncture. And she was just a wonderful mentor and guide and inspiration.

And ultimately then went back to psychiatry when my tank was a little more full and I had a better sense of what I wanted to do. But it's interesting in terms of the treatment modalities that were finally coming around to psychedelics now.

You know, I think 40 some years after I graduated from medical school and it does feel fulfilling and I guess there's some value to being patient as well.

And that's not a strong suit that I have really at all. but at least it came around to me. I guess if you stay busy long enough, things happen. So yeah, a roundabout trip, but I feel like both the diagnostic system and the treatment system are coming around.

And I think we are getting closer to a true systems-based approach to mental health that honors body, mind, spirit. It's really my feeling that we started with holistic medicine, It became complementary and alternative medicine.

It become integrative medicine, and now we have systems medicine system psychiatry. Interestingly, Andy Weill and I just co-authored a paper on the need for a system's psychiatries.

and fingers crossed it should be published soon. And it just feels like it's coming around, you know. I'm hopeful that 30 years from now it is just good psychiatry and that we'll see a blending of the reductionistic and the holistic models, the left and right hemisphere, so that can have a full head and approach this not half-assed.

So that's my thinking. I'm going to ask you a question related to kind of hopefully everything that you just summarized here on your life story. And I am sure the depth of that is so much more richer.

The coming two of your belief and how that comes together.

Burnout, trauma, and the need for whole-person care

One is that, you don't accept the status quo and the reductionistic approach to how we see people. That people are more than just a label. and how the application of those conditions can be met with natural ways and alternative thinking and resourcing outside of the box of what's presented to us as physicians, as in our training.

And then I know you talk about spirituality in your work, but I feel like that is an ignored process in medicine, completely left aside. especially in America.

And the belief that I'm hearing from what you share is that the technology, the application, and the diagnostics of science can still play a big role in how we see a condition instead of it being a prescription.

It is uncovering, applying that into practice. And you also teach and you have trained and also write books. So I feel like the story of your sharing to what you know and what your uncovering as you go in your life comes up through what she just shared.

I really appreciate you providing that whole context of this process that I think physicians don't have the time to sit with that or even to sometimes consider that.

I mean, me and Polissimi both kind of came into this practice of medicine. And you hear this from other physicians because of the extreme burden and trauma that we're exposed to, but we are unable to process ourselves.

I will say this as a pediatrician and a hospitalist working in the deep trenches, not just in America, in a global arena of care where we were providing care in really tough situations across the world.

and how the basics are so much more, there's such value in just the basic of just listening, of being present with, and the kindness and trust of a physician is palpable even when I've come back to America, just having that opportunity to be.

present when, of course, you're taken away from that role in so many different ways in the Western healthcare practice. And I feel that's the struggle that we're all in, in medicine, patients included.

You hear this over and over again. Patients are being told this or that, they're given medications. I came back to America 10 years later and I seen children on four or five psychiatric meds.

and I'm seeing their guts like this dark change is so dramatic. And I was really taken aback by how challenging and

how the suicidal rates had increased and children were just overdosing and lost.

One of the reasons I went to do the medicine was to really try to understand how as a physician do we first process our own trauma in that experience.

but how can one really help our patients with some of the methodologies of just listening, of paying attention to the story of a condition. So I'm speaking, I know a lot, but I am really connected to what you share and the experience that you've really opened that pathway for a lots of people.

Thank you for that. Your experience is not so unique. I think most of us as healthcare professionals have felt beaten down, desiccated, I guess in some ways the best word, by the system that doesn't support our wholeness or the wholeness of the people that we treat and care for.

And as a result, we have burnout rates among hospital-based physicians that are 40, 50, 60 percent. We've been doing a program at our clinic, which is group ketamine for professional burnout.

And what we find is that it's just enormously helpful. People tell us that there's not been a systematic approach to help them process trauma and sort out meaning in their lives as professionals.

And we were particularly working with ICU folks, emergency department folks first responders, paramedics, even police and fire. And what we found is a real uniformity of experience is that in a reductionistic model that doesn't recognize our spirit and the spirit of those people that we care for, something grave is lost and we can provide the mechanics of care but everybody is suffering as a result.

And that's because the system has taken on an approach that doesn't value who we are and doesn''t value what we need as humans. That's humans providing care, humans getting care.

Humans suffering, we're all suffering. And what we realized doing this work with the group Ketamine is that when we can come together in community and open up a space that's vulnerable, that sharing, confiding, safe and respectful, people share deep, deep pain and they feel better after they do that.

And I think that just speaks about the relational foundation of who we are as human beings. and that we need to have this honored, respected, validated, and factored into the work we do.

If you're just providing widgets and care units and what's the hospital term? VCU or? RVUs. RVU, that's it. It has become so much about RVs and not SVUs, spiritual value units.

Right. Yeah, I resonate with you and it certainly was the case for me is that I became so depressed through medical school that i really thought about going into teaching and applied for teaching jobs coming out of medical schools and at the last minute when i was deciding between a teaching job and an internship I was talking to my dad and he gave me a word of wisdom.

He said, you know, You're very torn about this, but if you go and follow the teaching path, he won't be able to go back into medicine. If you're going to medicine, and you always build a jump back in to teaching.

And I really found an internship that I resonated with in a rural area and it held true. I got recharged, did a year, paid my dues, went out and practiced for four years following my heart.

with Gladys McGarry and just following healing modalities that seemed more resonant, body, mind, spirit connected. Then I could go back to a psychiatric residency after that and carry my truth with me.

And so that's been the challenge, I think, for all of us is to carry our truth, with us and not get so beaten down by the system that we give up and we gave it away.

I find the example that we're bringing forth with the story of your life where it started even as early as medical

school, this questing for there's something better.

And you mentioned impatience. I know that this conversation will land with a lot of young medical students and interns and residents who are really struggling in this system.

which, believe it or not, has actually gotten worse in the 40 years that we've been in practice. You know, private equity has taken over hospitals, the TV show The Pit is slowing down our shifts to show us the depths of what is happening in our healthcare system.

Psychedelics as spiritual medicine and mystical experience

And we are shocked. People are realizing for the first time what's been hidden behind. you know, some of these silos and barriers. And with that democratization comes this kind of understanding that no more, you now, and you've had 40 years now of, questing, finding your own path, really making that resiliency within yourself to make it through to what you knew was the right way to do things.

this knowledge, right? I really resonate with what you just said is find your truth and live your truths as a message to people who are afraid of entering.

You know, I mean, i can imagine right now being a medical student and, you know kind of looking at what the practice of medicine is and so many people are leaving medicine that the expertise is kind, of you, know the layer of expertise that's you talk about this whole system of reliable Data, information, leadership, medicine, I mean, that is all just kind of crumbling, right, with all the ways that our system is moving towards.

You know, we could have a measles epidemic here in Los Angeles and very few people would know about it. We're in this space where being a physician has kind-of ratcheted up to exactly what you're saying is if we can connect with our truth, if can build resilience in these communities of practice.

I love that paper you put out about PTSD in healthcare workers. If we could build that resilience and then we have a chance of changing this around, of turning this because the people in the middle will have the ability to do exactly which you did, which is remain curious.

open up to other ways of thinking and listen to our patients, kindness, respect, generosity, community, right? Like all these things that you've been holding for this long and just to kind of see it all come together and also that underlying piece of psychedelics, like I think we forget that the path here must have been really circuitous, but here now looking back, Does it all kind of make sense?

Like, does it just all connect? Oh, that's why I did that, oh, now it makes sense why followed that. These were subconscious or unconscious inklings that you might have had, but now in the hindsight are bringing it altogether.

Because I feel like psychedelics and physician burnout, if you'd asked me five years ago, are those two things parallel to each other, I'd be like, no.

But here you are doing this for 40 years and have lived that truth. So can you just share a little bit about what that means for that to be confirmed in such a way?

Well, I think in many ways, and simple as reframing, psychedelics are opening us to spiritual medicine. And 10 years ago, when I was a few years into my practice at Wholeness, I just felt like we did body pretty well.

We were beginning to understand functional medicine. And we had sense of gut and microbiome, some early things. and we were looking at inflammation. There were a lot of things that we're starting to, understand about the physical side of medicine and on the mental side, we head my body approaches.

we have meditation. psychotherapy, which I think has always been a piece that can speak to us very deeply. But I felt like there was nothing that I saw about spiritual medicine that was really validating or resonating so much in all

of integrative holistic medicine.

We gave it lip service, but it wasn't a tool that we could effectively use or did very often because most people had some level of discomfort with it.

and you know it had a bad rap because of dogma and there were a lot of things people had. A lot. Of religious trauma in their life that they were carrying this baggage and so I think it was just treated a little bit like the red haired stepchild of the body mind spirit triumvirate and that what I saw with psychedelics and I began to understand it and sort of was pulled back in because I had let it go for about 20 years.

I really just saw that it was validating the spiritual side. And it called to me personally, because I think I was going through my own spiritual crisis and deepening of a search for meaning and a such for what I needed to follow.

It was calling to mean, so I circled back to it and I just really see it as a blossoming and validation in ways that modern medicine and modern culture can accept.

And it's just very interesting how we're having a psychedelic moment in our culture over the last three to five years. And there's a hunger for it. We have religious churches.

I think there are 20 or 30 psychedelics churches in Austin, Texas. a dozen in Denver. It's something happening and then there's this underground movement and there is state regulatory.

There's stuff going on in 40 different states now around psychedelics. And then we have the whole medicalization, the MDMA, The Compass, Maps Lycos, etc., worlds where we're pursuing.

So there are all these different pathways that are moving in the same direction because of this spiritual hunger. and I think a profound reckoning where our culture is just reacting to the pendulum swing of 400 years since Galileo, where all that we have valued is that which can be measured.

And you can't measure purpose, meaning you cant measure love. You can measure compassion. you cannot measure relationship. And these are the sort of most intrinsic core parts of our being.

And we've developed a science, we developed the healthcare system, and we develop a materialistic, commercialized culture that is absent all of that. People are responding by finding something that can answer that call.

We know that Call within. And I think when we can get in touch with our heart, and our intuition, in our deepest sense, that it leads us in the right direction.

I thinks that's what's happening now across our culture. And that has just been the path that I've followed. There's no innate wisdom to it. It's just what I had to do.

I'm finding that with patients, when they come in critically ill with complex diagnoses and layered upon layered, and then the co-orbit factors of their condition, their body health condition.

The trigger points that show up on every day, the construct of how they're living their life in their conditions. And you take off those layers and those layer fall away with treatments and ketamine and just having therapy and connection.

What I find more and more of in my patients is that that sense of meaning, that purpose starts to show up. Sometimes it's like there's a direction towards an idea of purpose and sometimes they're lost in that hope of a purpose or they don't even know what that would look like.

which to me is the challenging place because of the way things are happening in the world as we speak. And you can treat somebody to the point, yes, they can sleep better, can get better.

They can start focusing on their health. But when it comes to purpose and they've lost their way or don't know a new way, what have you seen in your experience that helps move them through that space?

Well, you know, it's interesting. I read a lot of John O'Donoghue, I don't know if you now who John Odonohue is, but he wrote a book, Anum Karam, he's got some other beautiful works.

He talks a lots about suffering and how suffering is a call to touch the soul and to the touch deepest part of ourselves. And that often opens up an awareness about what is missing, what's real, and what important.

It's obviously nothing that we wish for, but it often comes to us and brings us these messages and bring us this opportunities and choice points where it forces us to slow down, it force us simplify and reckon with the basics.

It forces to contend with our own mortality and our limitations. So I think it does represent an opportunity just like I think end of life represents a glorious interface and opportunity with psychedelics because they are very useful for opening up this existential basket that we can explore and begin to embrace and understand to some degree, come to terms with.

You know, I think the more that we deal with chronic illness, the most we do with life-threatening illness. The more we go with the complexities of mental health.

Those all, i think, represent opportunities to deepen the discussion and the dialogue. And I think there's nothing as powerful an intervention as spiritual medicine that's well-placed.

Oh, beautiful. I'm feeling a real empathy for the human experience and the fact that most of us may go through life never having even questioned that this even exists.

There's this real dearth, as we've mentioned, this desiccation now. And you mentioned that these are not measurable, you know, like you said, how do you measure meaning and how you do measure purpose?

And I love the word spiritual medicine. I've heard of consciousness medicine, there's psychedelic medicine but this is spiritual medicines and this one of the places which we try to cross over into when we're talking to patients who have never talked about psychedelics, never dealt with it, but now are being brought to it because they have a mental health condition that may now be helped by psychedelcs.

So when you're first talking to somebody in that way and this empathy kind of opens up and there's curiosity, right, for their experience, and you are actually giving them the time to tell their story.

I mean, one of the reasons I think Alia, you and I went into narrative medicine is, Dr. Rita Sharon, who wrote one the books on narrative medicines said that physicians will interrupt their patients within 18 seconds.

of, you know, them talking. And so that's the system that we work in and we're really trying to move it towards where we see the human as worthy of connection, attention, and that is such an unfamiliar place that I feel like that as a lot of the work we have to do is to convince people sometimes that they are spiritual beings.

that sometimes the fear of going into the psychedelic space comes from that desiccation, right? And I think of a sponge that's so desicated there's no juice there.

So how do you believe you're more than if there is nothing there, so when a person comes to you and you know we're all practitioners and we've all dealt with this but from your experience how does that change happen and how you know, invite that change to happen without that labeling, without the, you must do this, because that's that place of gentleness that I'm feeling.

It would be so easy for the psychedelic world to just turn into more of the same. Here's the pill. here's the magic, go do it. If it doesn't work for you, sorry, it's not our fault." This idea that we're talking about non-responders, right?

Helping patients find meaning and purpose

Even in ketamine therapy, just again, more of that labeling language, instead of saying, well, what's going on here that's getting in your way? Are you getting it in you way, is something in life getting your in way.

And so, if you could just speak to that process of what it is like to bring that person back to themselves and how you approach it, Well, I think one of the biggest things, you mentioned just listening.

Sometimes it's just listen, but I thinks it being respectful, appreciative and supportive. It's no surprise that most of us grew up with less than ideal parents and I thing we're always looking for that positive re-parenting.

But I think, you know, in many ways, our spiritual self is like a child. It's like, I don't know if it's a toddler or a rebellious adolescent or whatever it is.

But, it think it a part of ourselves that because the culture does not respect it, because our healthcare system doesn't validate and honor it. that it is often an insecure, introverted piece of ourselves.

And because of that, I think it needs a lot of validation, support, encouragement to blossom and come out. and helping people to know that even though these areas are often uncomfortable, that with love and support, they can be very valuable.

I don't know if there's any real magic to it, but I think just being loving, supporting, accepting, listening, receptive, I think anytime we're trying to set the agenda and have a message to deliver, it creates a different atmosphere.

And sometimes you need to do that, but I we lose sight of what the other side of it is as well. Now a corollary to that question is we know from studies specifically the ones done by Roland Griffiths and all in at Johns Hopkins that showed that the mystical experience is protective in some way, is healing in I've written a lot about that.

I gave a talk at Psychedelic Sciences last year on the mystical experience. And basically, my sense is that the Mystical Experience allows us to touch our true nature and that when we touch your true-nature, we come out of it with love, compassion, forgiveness, understanding, and a deep sense of gratitude.

And that is our true nature, and that the mystical experience has been sort of universally experienced around the world in cultures, different religious traditions, with and without psychedelics, With shamanism, fasting, extreme exercise, meditation, nature and pilgrimage.

There are so many pathways to get there, but in the end, even near-death experiences the commonalities abound and the core element of the mystical experience is the sense of unity and a sense a deep connection.

I mean, I had a mystical experience in 1983 that still sits with me very strongly today. And I think the question about why do psychedelic sessions, psychedelics encounters, create durable change for people with a dose or two?

The question is, because we've been locked in this neuroreceptor suppressive model, for so long that we don't understand what an evocative model or transformation or true healing is, and that when people connect with themselves very deeply and have a connection, a sense, an experience of reality that is so penetrating, so real, They're transformed.

And once you've had an experience like that, it changes you. Your view of the world is different. A lot of studies now, Timmerman and others, are documenting that it shifts our metaphysical framework.

We move from a place of materialism to a piece of either panpsychism, idealism. But we move away from materialist to other models that are more accepting and expansive.

And that's because we've been trapped in this materialistic frame for 400 plus years. This experience, a mystical experience is the opposite of that. It's expansive, it's truth, its reality, validating, core, relational, healing, but in its

essence, love.

And that's the message that people come out of these experiences with. is that it's all love. I mean, Michael Pollan in his book, How to Change Your Mind, he said, it seems trite, but what I came out of these experiences with is it is all about.

It's just that simple. And, you know, this is the core element, the perennial philosophy. This is the core of all our great religions is its love and care for each other.

And I think that's the power of psychedelics is they give us the opportunity to touch and taste that. It's not imposed, it's an experience that comes from inside us.

that allows us to let go of the false self that we've created, that our culture's created that healthcare is created and it allows to embrace something that's more real.

One of fascinating things about psychedelic research and that this is where classic psychedelics are different than ketamine is people, when they have a psychedelic experience, they will validate on average that this felt realer than real.

You have experience with ketamine, you have experienced with other drugs, it doesn't seem real or then real, but classic psychedelics, and they had this power to help us get closer to the mystical experience.

they have this ability to let us touch a deeper reality. We penetrate the veil, we go to something deeper, We see our true self and we see reality as it actually is and not in the very constrained, limited, dysfunctional, desiccating model that has been created and that we participate in creating for ourselves.

I think that's the challenge we have to understand that were an active participant in this process but We do have agency and when we experience something that feels realer than real, we are changed.

Part of what I have witnessed is over the course of my five years here in practice, thousands of patients who have come through is that they may get better, they make feel better.

They may feel emotional, and they have that sense of empowerment or connection to that true self. And then they step out of the treatment into the world.

and their identity that they had created and the people around them, the constructs of how they were living doesn't fit anymore. And they struggle with that new ways of thinking.

Earth connectedness, indigenous wisdom, and teaching children

I tell patients, there's an architectural change that can happen with treatments. Your brain isn't going to change. How does that fit in your understanding of what might that feel like, say, when you work with your family or work your children or went to work.

Because it's like when lose weight, you're seen differently. You lost 50 pounds and people look at you and you may feel somewhat the same, but everything else around you has changed and your outlook may have changed as well.

And that becomes the challenge in their next phase of their growth. I want to say growth, but I can see that also be a relapse. Yeah, and I think one of the challenges of working with ketamine is that people will have a little bit of a taste of this, but it doesn't tend to be durable in the same way that it is with psilocybin.

And I that's because the ketamine shuts down so much of our cortex that we don't really have an immersive, full-body, reality-based experience the way we do with classic psychedelics.

There may be other reasons, that is just a hunch. And so I think, you know, the challenges for people, because I we all can have tastes of this experience, even without psychedelics.

I mean, we have a moment with a patient where we feel so deeply connected, so just linked at a deep level. It's interesting is that I found that when that was happening with patients with me, sort of inevitably tears would come to my eyes.

And it wasn't out of sadness, but it was just out the power of the experience. We have these moments, But it's so easy to leave them behind and get distracted.

And I think one of the things of work with ketamine, of working with psychotherapy, work in medicine anyway, is to take these kernels and try to build something around them, try and build some connections, some links, validation, and some understanding.

It's just that psychedelics often give us such a full and robust dose that it's a little bit easier to work, but that doesn't mean it is unique to psychedelic medicine.

And I think we can be doing spiritual medicine in any way in, any realm. I have a buddy, a dear friend, also a child psychiatrist, and he loved everything about holistic medicine, but he really didn't change his practice that much.

But his heart changed and the people that he connected with were so deeply moved by how he approached them and just who he was. and that he wasn't using fish oil or St.

John's word. He was still using Prozac and Depakote, but he connected with them on a deep spiritual level, just in the moment and just with who he was.

And so it just reminds me that the instrument that we are is more important than the tools we employ. Can I bring in a question about, you mentioned, and thank you so much for that explanation, because there are ways of approaching that mystical experience that are within our grasp every day, specifically through our breath.

Holotropic breathwork is one of those ways in which we're basically blowing off so that it's changing the pH in our blood and it is actually changing.

The sensitivity that we have to exactly what you just mentioned to the mystical experience, it opens us up and our whole body. So this whole conversation has led us to place to recognize that this is our wholesale.

This is us reclaiming this sense of greater humanity, kind of opening up the idea of who we are as humans. beyond those frames that the Descartes frames, that we've been living with for 400 years, now we're kind of entering into a Spinoza realm, right?

They both had two different ways of looking at things. And so we are now in this, you know, kind-of recognition of being greater than just this. So in your experience, You've traveled, talked to different people, your hearing things, Where are some of the loudest signals coming from on this planet to reclaim this, and who shall we listen to?

And with this I mean kind of like you know you've encountered different medicines, lots of different medicine come from indigenous peoples and practices, so the psychedelic movement is not just about the medicine and the science, it's also about this kind of practice that's been part of our ancestry and heritage for millennia and it's a reclamation in some ways.

Can you speak to a little bit about where we are right now in that kind going back to and how critical it is that we maintain some of those practices because they are being eradicated.

The Amazonian jungle is just being decimated and we may not have this pharmaceutical. You know, the planet's pharmacy is the Amazon. We may or may have that for much longer to discover.

And so, you know you've traveled in those ways and I've read these books and you every time I read about what's happening to our species, right now with just the window that seems to be closing around our ability to connect with that part of our humanism.

That part our greater humanity. And I feel like, you know, as we head in deeper into the 21st century, there's this real like importance of why that connection matters.

I'm kind of thinking of the greater reason why we're here right now. to really connect with the fact that the value of a human being doesn't depend on whether they live in a city or Western country or a war-torn nation.

Every human is capable of this. And I feel like when we talk about psychedelics, we only talk the kind of privilege of getting into those spaces. We don't really say that this is actually a a democratized experience that anybody can have given the right conditions and how that may be a human right in some ways is to touch that, to have the ability to that.

To have resources to engage in this. I mean, at this point sometimes I meet 70 year olds who have never had a psychedelic experience and they're dealing with mental health issues and come in and go away just so sad in some ways for never having been able to connect with this side of themselves, that it just speaks to me of like how urgent it is that we do this.

So if you can speak to some of that. Well, number one, this sense of earth connectedness, the sense I think deep connection we talked about earlier, like with the mystical experience, that when you have that, you appreciate the earth, biosphere, our whole human ecology.

in a much deeper way, and there's actually pretty good evidence now that psychedelics do enhance our sense of Earth connectedness and even our since of anti-totalitarianism.

It extends in the political ecosphere as well. And, you know, I think it's easy at this point, both politically, ecologically, looking at pediatric mental health, we can look at a lot of different indicators that are setting off sort of red alarms, fire alarms that're going off in all these different places.

But I, think, that's part of our call to action, part our our called to awareness. And I do think that the way that things work in the world is that often destructive trends accelerate before they implode and transform into something else.

And, I think, that is what's happening now politically, is things are accelerating in a destructive way. But I have the sense of the yin and the yang of it all that on the other side of is something perhaps even more beautiful than we can conceptualize.

but that we have to go through a destructive phase for that to happen. Maybe that's Pollyanna, maybe that blind optimism, which I have been accused of it many times in my life.

My question, why can't we teach this to children? you know, this way of being and this of accessing their spiritual self, which they're not too far disconnected from just yet.

Most children, at least, you now, when they are born and as they grow are consciously aware and very in tune with their surroundings and what their exposures are.

If it's done correctly, can be our future and teaching them the access of maintaining that spiritual sense of what healing is and that's spiritual and emotional state and, teaching the methods of that.

I mean, I'm not talking about dogma or religion, really just talking divine connection and trust. It's like in Star Trek terms, I think that's our prime directive as parents, right?

And when we step outside that, whether it's in the school setting or in a clinic setting, or whether its books or podcasts or whatever sort of educational venue we're doing, Every step of the way that we get to broader and

broader audiences, it gets harder and harder.

And certainly in our sphere as our nuclear family, as are extended family. Those are the ways that can be of most use, but I think certainly role modeling the path that we want to do and embracing it and validating it in others.

I've always been a fan of social-emotional education, the model of working with at-risk kids and teaching them about emotional expression and emotional fluency and anger management and problem-solving skills and communication.

That makes just perfect sense for me, but in today's political climate, that's not really going to happen very much. You know, what I see and what have seen coming from New Mexico many years ago, when places are poor enough or distressed enough, they will embrace these tools.

Once you get into more resourced and privileged settings, there's enough disagreement that it becomes very difficult to have any sort of linear trajectory with this.

And maybe we get there at some point.

The future of psychedelic medicine and personalized tools

but I've realized that what we can do is we educate our children, we could educate families, and we teach as professionals what is in our heart and share.

We can teach the parents that we encounter and the adults. Sometimes it's adults needing to parent other adults because that's what were in such shortage of in many ways.

It's a challenge and I think we have to understand that We wish the opportunities were more expansive, but that's often not the way it is right now. Thank you so much for that.

And as we're kind of winding into the end of the hour, I really want to ask you our curious question. We always leave our guests with a curious questions.

What are you curious about? But because it's you, I want to actually ask you about the future of psychedelic medicine because I know you are at the forefront of creating these systems, envisioning them, recognizing what parts need to come together And I'm always very curious to hear where psychomedicine is going from that ground floor level, not the 30,000 foot level.

I think 30 thousand foot we've got lots of people projecting lots different things, but like in that relational, we're on the earth, were relating to each other, in these circles of relationship, of self, a family, community, nation, planet, and just encompassing that.

Where can psychedelic medicine take us and what are you curious about? What are some questions that come to your mind? A number of things I'm curious.

I guess that probably defines me as much as any trait, maybe other than patients. But I am curious what tools are synergistic with psychedelics medicine to bring about healing.

You know, and I think we can talk about, you know nutrition and making the body a less inflamed place and bringing diet into balance. I Think those things give us more depth and traction with psychedelic medicine but I'm also curious about things like Does TMS create an enhanced neuroplasticity option?

What kind of spiritual practices as a prelude to psychedelic medicine? Either it's chanting or singing. I've been really profoundly intrigued with vibroacoustic beds.

and other sort of modalities that may just help us drop in in a more deep way. We're using photobiomodulation at

our clinic, photobio-modulation helmets, and really seeing synergy with that with ketamine.

I think I'm intrigued by Spravato and having broader access to the population. We just brought it on at our clinic a few months ago as we stepped back into insurance.

And I'm curious about what TMS, Sprovato, Vibroacoustic beds, we're now looking at whether certain chemicals such as cycloserine, other chemicals, whether they have synergy with psychedelics, with Tms.

And so, what do we do to enhance people's ability to change and grow and open? And these are just tools. There's a finger pointing at the moon, and let's not mistake the finger for the Moon.

And, so our goal is wholeness, is spirit, his contentment, its peace, it's relationship, It's love. These things are all just tool. And 50 years from now, we'll be using other tools.

And these will have come and gone in some ways, I think. But I, think it's always striving for the moon and not the finger pointing at the Moon. So just to answer maybe some of your questions are curious, I have the same curious questions as you with TMS.

We are using QEG guided Tms at our center and we do the before and after. So we did a baseline EEG and then we track their response with tms and or ketamine.

with the QEGs and you can definitely see change and evolution of function over the course of their treatment, which is pretty amazing to see whether that is some part placebo effect, whether it is just patients feeling connected and heard and listened to and treated with kindness and respect.

as they come in every single day. It's such a beautiful experience and they enjoy coming to the point that I wonder, like, this would be very hard for me to come every day, five days a week for seven weeks.

But, you know, the neuroplasticity effect in the brain is possible. There's ways of seeing that and applying that, and I do- Beautiful. Are you using wave neuroscience?

Yeah. You know, we're using a brain master. Okay. The dry EEG caps. Well, I may need to talk to you offline about that a little. Yeah, oh, i'm happy to help you through that and guide our processes as well and share to the notes and what we've been doing.

So it's been a year almost now. And I'm very interested in publishing some of the data with that. We actually give our patients a certificate at the end of their before EEGs and their after EEGS and they look at them to go, what?

Well, you two are just too curious. That's just… We're just two curious, we don't stop. Part of it is there's so much to be curious about. Their mind continues to expand the world and knowledge.

Of course, what impacts us, What's impacting us in this place right now that we're in is that, We are treating trauma and yet there is still more trauma.

And that's the sad part of this network as well is that how do we get ahead of Just as a teacher, I wanted to be a Teacher. Growing up, my father wouldn't let me become a Teacher.

I still feel like I want to teach, but we have to Teach. We have be out there. Yeah. You're here. That's it. And I think we also need to Be so curious and look for solutions and Look for options.

But I Think we just need To also revel in the mystery of it all. Yeah. I just wrote my first prescription for cycloserine. And I was looking for a compound and then I said, I think I'll just write a prescription and see if I can get it filled.

Then lo and behold, it's there. Nice. Well, we'll see that. So here, here. Beautiful. I definitely want to bring in the element of personalized medicine that you guys are talking about.

So maybe we can extend the conversation a little bit. You guys have just mentioned a couple of different elements and we have seen this consciousness in this psychedelic field as to okay, there's the medicine and you do the medicines and then there is the preparation and integration.

And what we're talking as physicians is like, okay you've got that. But how can we layer on the nutritional, the biochemical, genetic, and the neurobiological layer to enhance the durability?

That's one word that comes to mind because ketamine is the only one that's legal in except in Colorado where you are doing ketamine, psilocybin, ketamin with your patients and just living in the future at this point.

Where in California and only practicing with ketamine and you mentioned cycloserine, what other tools are coming on the horizon? Because this is a, you know, we're in a biomedical explosion in some ways of tools and techniques.

What I see is that prescription psilocybin will probably be here within 12 to 18 months, and that will be nationwide. So that's through Compass and likely USONA at some point soon after that.

I do think MDMA is coming on, even though the FDA decision slowed it down. Nobody at the F. D. A. thinks that it will ultimately be denied. It's just been delayed.

And so MDMA is also coming. But we have these state processes, a lot of curiosity about ibogaine. Ibogane is challenging because of the medical cardiac risks.

And I know in our state, our law makes legal ibogaene, psilocybin, ayahuasca, DMT, and mescaline. The state has just decided they're going to begin exploring iboglein in a regulated model.

which I think is challenging because the Natural Medicine Health Act in Colorado is non-medicalized, so it's kind of an oxymoron conundrum a little bit.

But they're pursuing it, but it'll probably have some sort of medical overlay. So these things are coming. A 5-MEO is likely coming in the next few years.

We hope to be working with that in maybe a harm reduction model in very near future as the regulated model gets up and operational. So I think a lot of things coming and at the same time we're seeing all this stuff with Spravato and TMS and QEGs and a whole sort of brain precision side.

And then we have the functional medicine side, and what's nice is I see that integrative medicine and psychedelic medicine come from the same roots, the philosophy, same core beliefs.

I think this is a necessary marriage that is increasingly going to happen and lead psychiatry and mental health down a positive and productive road. I feel very hopeful.

Now, I love this word of transdiagnostic. You know, people have mentioned that psychedelics are trans-diagnostic and, you know that breaks down the DSM completely if we're saying that they're trans diagnostic.

Well, love is also trans diagnostics. There you go. You're writing an article on love, I believe. Yeah. I've got an articles out to Frontiers in Psychology on Love as a phenomenological indicator of relational coherence.

Wow. Beautiful. Thank you. Can't wait to get my hands on that. Yeah. I feel a lot of love here and gratitude for this wonderful conversation and for the time spent.

Thanks so much. So this is the era of curiosity. We want all our audience to stay curious and keep asking questions. we invite you to reflect about this journey and of your healing journey, and the meaning that you find in listening to this podcast and what questions you do have about lifestyle medicine, integrative psychiatry, ketamine, the role of spirituality and mental health.

Share your reflections or unasked questions in the comments. We'd love to hear from you. Your curiosity may inspire a future conversation onto CuriousMD, so thank you for being here.

Thank you! Thanks for joining us on the Two Curious MD podcast. We hope today's episode inspired you to ask new questions and explore fresh perspectives.

we challenge you, to us those unasked questions that you're curious about in your medical practice, condition, health and wellness. If you enjoyed the podcast, don't forget to subscribe, share it with somebody just as curious and leave us a review.

It helps us keep the curiosity alive. post or comment with a question or curious inquiry that you have and seek to explore or learn with us. Stay curious and we'll see you next time.