Functional Forum Live from San Francisco Transcript

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Season 2 Welcome and Event Relaunch

Hello and welcome back to Season 2 of the Functional Forum. For the last 12 years we have brought practitioners together all around the world to talk about innovation, clinical excellence and building the practices of future.

Season two is no different in terms of content but we've upgraded our venue and this is the coolest functional medicine event that has ever been put on.

So glad you're with us. Enjoy. Hello, everyone. Welcome to the relaunch of the Functional Forum. I'm so glad your here. So in February 2014, we had an idea.

I lived in New York. And I realized that the functional medicine community, I would go out and meet all of them. But I realize they didn't know each other.

So we decided to put together an event to connect people, to try and make it aspirational and cool to practice functional medicines. That turned from a stage show in York to 400 communities around the world, practitioners getting together and learning about functional medicine together, and ultimately you see what's happened over the last 12 years.

We have a really exciting moment where I think understanding that health-focused care is becoming like table stakes to talk about the future of medicine.

It's like the foundational baseline. And as all of you know, it hasn't been the baseline, I'm sure you go to other meetings where it's not the base line, but I think anyone who's thinking properly about what the feature of health looks like knows that we were right and you're gonna have to adapt to it, right?

How the Functional Forum Began

So that's the beginning of it. That's how it started. I live about two hours away. And I wanted to introduce you all, as the first person who's going to speak, to the person that created this vision.

So I was here, Matt and I have actually known each other for about 11 years. Matt is actually a serious health care entrepreneur. Many of you guys are aware of the movement towards value-based care, Medicare advances, and so forth.

Matt was at the forefront of that when I first met him in New York years ago. And also, Matt has, as you can see, taste. Right? And it's built this whole place.

If you want to see an interesting picture, if you go right to the front, you can see the picture of this place as it was burning down. So this used to be an art warehouse.

You can the see front of it there. But this is the first kind of reimagination of And I came to the JP Morgan pre-party that he hosted here, and I was like, this is the perfect place for a functional forum where people can connect with each other.

So I'll share a little bit more about the format that we're going to have. But first and foremost, he is a host of this event. He's also the principal at Super, which you're gonna be hearing a bit about.

Please welcome our host, Matt Wiggins. Thanks everybody for coming. I hope you can hear me. We're sitting next to the Waymos. You saw the way most upstairs.

They were not always my neighbor. It used to be a 1940s Redwood warehouse that was built before you had to have fire suppression systems. The neighbors caught on fire in the middle of the pandemic.

and they burned from over here. And they slowly burned down this beautiful space that we had built and had a great time in for 10 years in San Francisco.

The only thing that is left is that front facade. Actually tomorrow morning I have the building department coming in talking about what we're gonna build in that facade, so it's a full circle moment.

This is indeed a temporary space. All of this can be rolled out at any moment, These are trailers, which I bought in the middle of the pandemic with my insurance money.

And we decided we were going to make an art space that worked for the type of lifestyle that I enjoy when I come back to San Francisco, the tea room in the Japanese Wabi Bari trailer.

You can see I'm a bird guy, so we've got the hummingbird sauna trailer, we got a Japanese crane over here. If you go to the tiny home over there, which actually was burned when we first had it, there's a cardinal on the front of it.

That's the Cardinal Tiny Home. And then this right here was designed was designed in CAD and I was so interested in the Trump tariffs that I wanted to buy something that could design in China and have assembled here.

And so this is the bird cage. You can see the CNC birds at the top of it. I'm really appreciative of James and the functional forum. I've watched him evolve his group for a long time and it's been an incredible group.

When I was in college, I got sick with Meniere's disease and I pivoted my political science degree to go study medical anthropology. And I got over to Switzerland and I began to learn about European biological medicine.

And Thomas Rau, Dr. Thomas Rao, if anybody knows Raou, he's a legend. I really got deep into the idea that root cause analysis was an important piece of the whole healthcare system.

Matt Wiggins and the SUPAR Vision

And I spent 14 years building the first value-based care company on the back of the Center for Medicare and Medicaid Innovation, which was put in place by Obama with a big initiative in 2010. And what we were able to figure out is that if actually coordinating care across an episode of care, which is the minute you get to the hospital to 90 days after you leave the hospitals, is an important part of driving savings because you're coordinating all the different sites of car and making sure we're working as a team.

And one of the things that I've always liked about functional medicine, and actually when we had this building here, I had a friend of mine, Dr. Stephanie Daniels, who's a functional physician, she worked out of back.

And so I'm a big fan of functional medical, it's the closest thing I can find to European biological medicine. I found myself without this place in 2020, and I decided to just get out of America for a moment.

And I went over to Spain, I find myself in Ibiza. I've found my self with a Spanish girlfriend. That's why we're eating paella tonight. And, uh, Homo Nibirico, flown in from Spain.

And we're doing that because one of the things that I also found over there when I was sitting with a, a friend was, was I, I I talking to a friends who was opening a longevity clinic in Copenhagen.

And he said, would you ever be my backer in this Copenhagen clinic? I said absolutely. I've never been to Copenhage. And I want to go check it out. So we opened a longevity clinic.

This is 2021. What happened after that is some really amazing scientists walked in and said we like your guys' style. You know, just like everybody likes James style.

I've always liked James Style. Look at this. Thank you, James, for convening. By the way, the government definition of the company that we built was an awardee convener.

Because the only thing you really need to do is you need the convene. And all our job was to make sure that could convened the people in health care that were taking the dollars from Medicare and figuring out how to take better care of patients.

So here we are convening again and I'm over in Copenhagen and these amazing physicians and scientists come up to me and they're like, hey, we've been studying this biomarker for 25 years and we discovered it in 1999. And we'd like to talk to you guys about helping us figure out how we should take it to market.

And I said, well, what's the biomarker? They said well it's a protein and it is called soluble uricinase plasminogen activator receptor. And the reality is SUPAR has been studied for 25 years in Copenhagen.

They've got 1200 research reports on it. It is the biomarker for systemic chronic inflammation. And so with my Meniere's disease, my little alarm bells go off and it's like, okay, this is interesting because I have only known CRP and IL-6 and some of the other things that are for acute inflammation, what if there was a biomARKER for systematic chronic information?

And what could you do with that? And then going back to running this, we had $15 billion of Medicare spend under management, and we are looking at the risk pools and realizing that we were sitting on top of a great data set that showed that 70% of the costs in the US health care system are tied back heart disease, liver disease kidney disease cancer right and so if you look at that and you looked at the 65 to 70 percent that goes back to that what if, you could just test a level of inflammation before it leads to chronic inflammation which leads the chronic disease which lead to the cascading effect that go down and ends up as something that we need to worry about because we don't know why someone shows up at a site of care a skilled nursing facility, a hospital.

because we're not doing proactive looks. And so my dream and the reason I'm getting back into this is I think there's an opportunity to do a national biological risk stratification for people.

That comes from people who understand all the biomarkers that are absolutely necessary and can test them in their practices because it's already part of their functional medicine practice.

And so SUPAR is my attempt to bring something to the United States that's pretty cool from Denmark. And we're just starting next week. I'm not spending any money on Facebook ads. I'm just spending money that you're going to see on your phone.

You can go and you can have 12 to 20 of your friends and we'll send you the tests and get a mobile phlebotomist out there. We want people to have conversations about inflammation at the dinner table because if they're not, they are not thinking about it with the people that matter.

And so thank you for being pioneers in the space. Being a functional medicine doctor is a wild endeavor. You basically have to be an entrepreneur on your own, figuring out where the other crazy people are.

And I'm glad the Functional Medicine Forum is here. to be a convener of the types of people that are willing to go and take a risk and go outside of this system, recognize along your path that you might not want to get pigeonholed.

And you want stay at the front edge of research, you wanna stay the at front of where things are going. If you're interested in building the future of medicine, you couldn't have a better analogy than right here.

Behind me, we have this incredible female figure, this incredibly piece of art that represents the feminine. And just over there, where Waymos are coming together and being organized by AI and providing maximum convenience and automation.

If we can bring those two things together, we have a future of medicine that you will love, that's good for doctors, good patients, and good countries and for the planet.

And that is the future medicine we're all building here at the Functional Forum. Over the years, we've had different formats for the functional forum, if you guys watched in the last 10 years.

It was mainly a stage show. And this doesn't really set it, even though this is kind of a state show happening, doesnt really lend itself. So what we're going to do tonight is something a bit different.

We're gonna have five speakers who are gonna come in and share a little bit about a unique angle of what they're doing in functional medicine. Then you could go and choose to have dinner with them.

Dale Bredesen Tribute and Alzheimeru2019s Trial Update

You can line up, we've got a few different places where we're going to have dinner, there's one in here, Matt's office up here. There's space at the back here we'll kind of work out how many people want to do it.

So first of all I have the only piece of bad news that I'm going share and you've probably already worked it out. But Dale Bredesen's not in the building.

I'm really sad about that. He actually emailed me at 2 in morning last night. But I want to say something about Dale Breaderson. And you can watch it here on the video.

Dale, I am speaking to you. In front of a community of his peers, in front I wanted to thank him. Because 10 years ago I put on a functional forum at UCSF.

Was anyone else there? Stephanie was there, Chris Cressa, and Dale was here. that man has gone above and beyond to showcase what is possible with functional and precision medicine.

And ultimately the dedication that is taken, the effort that it's taken to prove it time and time again and what I was having him come and speak about is that recently was the first randomized controlled trial that I understand in the history of functional medicine and basically shows what all of us have been seeing in our practices that if you apply personalized medicine correctly most people get better, right?

And so I would actually like, for the cameras and for everyone here, can we have a warm round of applause for The Life's Work of Dr. Dale Braderson. But luckily, there's actually no bad news, because although Dale is amazing, in San Francisco lives the physician that led that trial.

She was one of the six trial sites. So you can have dinner tonight, if you want, with the leading investigator of that trail. Please welcome to the stage Dr.

Kat Toops. I just wanted to thank James, whose work tirelessly to bring us together for so, so many years as well. And it's so exciting for me to once again be back with everybody here.

I know so people here and then so new faces. So welcome to everyone for being such a great community here I am here to tell you about our recent clinical trial.

We just published the pre-print at the end of the year, and we're still working on getting the final submission ready for the Journal of Alzheimer's Disease, but I'll just cut to the chase of exciting news.

This study validates our first proof of concept trial. In this trial, it was a randomized trial. We had two cohorts of patients. Two-thirds of the patients received active, precision medicine, functional medicine treatment, and one-third, we called it standard of care neurology.

the traditional neurologist might do early in the course of mild cognitive impairment or dementia was okay, but really

most people are not doing much of anything.

So we compared these two groups. We looked at all kinds of different measurements, both to qualify and that we tracked in this study. The patients had to meet criteria based on their MOCA testing and their neurocognitive batteries on CNS vital signs.

They had a study partner who did the ratings all through the study that corroborated their deficiencies. Um, they did self-rating scales, so we did quite a bit of rating, and we validated things from all angles.

We incorporated all the new brain biomarkers in our study. I believe all but one of our patients had abnormal amyloid levels, so we had 73 patients in this study.

And some of the other markers we're still analyzing. But let me just cut to the chase. Basically, the magnitude of effect sizes that we saw were even better than in our proof of concept trial.

In our first trial, 84% of people got better. They got better. And I can tell you that in my own site, we had six sites around the country doing this study.

In my cohort, every one of my patients got a better, and all but one was testing completely normal by the end of the nine-month study, so it's… It's an intensive process and trying to teach people all the factors that are involved, but when we can identify all of the underlying contributors, we work fast and furious, and to see this kind of change in nine months is just unprecedented.

publication that's out, I would say, even if you just look at our graphs in there, they will tell you the story of every single measure separating, you know, between the two groups.

In our overall neurocognitive index of the neuropsych battery, our treatment group improved 14 points, and our standard of care group declined four points.

So, again, a huge separation there that I think the p-value was.001. It was less, it was, It was very highly significant. So anyway, I'm looking forward to a dinner conversation with whoever wants to talk about this.

There's a lot involved. James has made some copies of the preprint for the people that are coming to the dinner conversations, but it can be found online.

And then hopefully in the next couple of months, we'll get through the peer review process. But anyway thank you so much for having me and look forward chatting with some of you.

Ladies and gentlemen, cat tubes. So for season two of the Functional Forum and the Evolution of Medicine platform, we don't have sponsors. We only have mission partners.

And these are organizations that are dedicated and proven to help you build a successful practice.

Healthy Masculinity and Menu2019s Vital Signs

we've got Big Boost Marketing, one of leaders in helping you understand, bring new patients into your practice, Freedom Practice Coaching that has been around for 12 years, helping practitioners building the models of future.

Three, we have True Neura, which is helping practitioners launch a brain health program and reverse cognitive decline. And then Fullscript, Which is the infrastructure layer for delivering whole person health.

You can find out more about them in the mission partner segment and we'll have the link below. Brad tonight is going to be talking a little bit about the cross-section of health and healthy masculinity.

So Brad, let me give you the mic. Dr. Brad Jenkins, everyone. Thank you. Hey, everybody. What a great space. I

just want to thank Matt, wherever you are.

This is an amazing space, and yes, we would like to hold anti-inflammatory dinners here. We have a phlebotomy service, so we can dial the whole thing in.

So my name is Brad Jacobs. I'm a physician and been doing functional medicine since, I don't know, when I was born roughly or something like that. Born and raised as a martial artist and spent my life doing that, frankly, which is really what brought me to precision medicine because the ancient wisdom has always been precision oriented at the individual level.

But I am most interested right now in looking at men and masculinity. I'm really interested in reimagining what it means to be a man in this day and age.

We have a lot of different art forms of that right now that are showing up politically in particular as well as sort of celebrities and particularly in the longevity space, particularly as it relates to Epstein files and what we've seen there.

And you may have seen Sarah-Ann or me speaking up and out about that. I feel pretty strongly about it. There's been an absence of men speaking out, which I think doesn't serve us well.

Longevity, Community, and the Biology of Love

So I'm focused on measuring masculinity, actually. It can be measurable, it should become a vital sign for men. to see where they're at. I think you can physiologically look at it as well as psycho-emotionally.

So I've started some men's groups around this, and I'm actually collecting data, looking at this longitudinally. And I am really excited to bring together people that are interested in exploring that space.

Thanks for listening, I'll take back the mic and give more time to the group. I hope you're enjoying the Functional Forum and if you like this content you will love the Evolution of Medicine podcast.

Every week I'm doing interviews, news segments and bringing out information that is critical to the work of the modern practitioner. If you go to goevomed.com slash podcast you can see all the episodes we've done.

We bring out an episode every week. I'd love for you to join us. All right, so next up, Molly, why didn't you come up here? So everyone knows Dr. Molly Maloof is a longevity leader.

And the last year at A4M, many of you know I wrote a book on group visits, group medical visits and community as medicine. and Molly gave a keynote at a forum, which was called the Love and Longevity.

And it was such a great topic because I feel it's just such sort of a missing conversation in what root cause dynamics really mean. So if you've ever dreamt about having dinner with Molly Manouf, tonight could be the night that you can.

And Molly, why don't you tell us what you're going to talk about? Sure. Nice to meet all of you. I really feel honored to be here, especially Matt. Actually, fun fact, guys, I used to live here before it burned down.

I lived up there in this room and it was I actually had a place down the street but I subleased it because I really didn't have enough friends and I was isolated and i was like I need to have people so I moved into safe house so i could have community and fast forward many many years later I'm back here And life has changed a lot, right?

This was 2019 when I left, and now it's 2026. And we all went through a pandemic together. I don't know about you guys, but when i got really isolated during the pandemic, I experienced real damage to my health.

But I felt like my physiology was shifting. What I didn't really know at the time was even though I was studying

mitochondrial health and studying metabolic health, what we eat and how we exercise and take supplements and feed our gut and all of that we do, I missed something really important and that is that mitochondria are social organelles and we are a social creature.

This is a basic property of life itself, our ability to socialize, to connect. When we disconnect, especially when we all together disconnected during the pandemic, it creates huge damage on a cellular level.

It puts us It helps alongside all the other things that were going on, but it pushes us into the cell danger response. It literally changes our metabolic function and it changes the way that we perceive others.

it actually creates maladaptive social cognition and can actually set us up for illness and disconnection with our relationships. And as we know, one in two people are lonely in our country and its worse for our health than smoking 15 cigarettes a day.

So we've got a really big problem on our hands. And so I spent the last few years accidentally becoming an organismal biologist, studying with Sue Carter, one of the most cited women on the science of oxytocin neurobiology, and Helen Fisher, of one the more cited woman on science love.

I started really understanding just how fundamental human love is to our existence, and why we evolved it, why it's a huge longevity advantage. But on the flip side, I learned a lot about the downsides of love.

Psychedelics, Trauma, and Safety Learning

There are certain forms of toxic and unhealthy love that can actually create a person who is emotionally or physically abusive, for example. So basically what I've learned is that relationships can heal us or harm us.

They can be medicine or they can poison. And I have this really long presentation that I'm probably gonna try to give a few slides tonight if you wanna sit at my table, but mostly I'll just be sitting and telling you guys about what learned.

It's very much an honor to be here. Before you go, Molly, I know you've recently had an insight as to your fish recommendations. Oh, gosh. You are a local here, and everyone lives here.

So I'd love for you to share that. Sure. OK, so Quicksilver's here and fun fact, and just discovered that I had been eating way too much farmers market fish, thinking, oh, I'm just going to try to move away from fish oil and move towards eating fish.

I have 95th percentile mercury levels, and I was eating a lot of dark chocolate, which we're all like, dark chocolates so good for you. 95th percentile cadmium levels.

And so now I am using a lot of Quicksilver products to detox. But if it can happen to me, it could happen you. So guys, if you're eating farmers market fish, honestly, stay away from tuna.

I didn't eat almost any tuna, but I ate enough to give myself mercury poisoning. Ate a lotta salmon. Don't know if our salmon is poisonous or not. Really wanna get it tested.

Yeah, I'm now basically switching all my fish to sea topia because they test all their fish. It's really a challenge eating properly in the world we live today.

If you are interested in building community and bringing together practitioners in your town, please get in touch with me at goevomed.com. We are interesting in bringing back practitioner communities all across the country and we'd love to hear from you.

You might be able to tell that this space has a lot of like what we say, psychedelic energy. And I want to bring up Dr. David Rabin, who's here. So Dr Raben is a psychiatrist.

He's one of the co-founders of Apollo Neuro. If you guys have ever, you know, used that, played with it. But David is going to be hosting a dinner tonight on the cross-section of psychedelics and mental health.

All right. Yeah, safe house. This place is awesome. Matt and James, you guys have done such an incredible job. We're in touch around the time that the great tragedy happened here.

And nobody could have transformed this place better into the convening grounds that we are all in together today. So thank you so much for having us. I am a psychiatrist and a neuroscientist, as James was describing.

I'm actually a translational neuroscietist. So raise your hand if you've ever heard of that. We got three, awesome. My specialty in neuroscience is literally translating things that we've learned in the lab, in discoveries, and in clinic that haven't successfully made it into practical use or into practice of clinical medicine.

So one of those very elegant and simple discoveries was Eric Kandel's discovery that won him the Nobel Prize in 2000. He's a very famous Holocaust survivor, neuropsychiatrist.

And he discovered that practice makes perfect, just like our parents told us. Guess how amazing is that, right? Like, we knew it all along, but science just discovered it as of 2000, so now it's real.

And practice makes perfect around fear and safety learning, which is really, really interesting because that's how ancient sea snails learned from 300 million years ago, Which is what really won Kendall and his colleagues a Nobel Prize, because it is not just us, it has conserved all the way back to these ancient mammals.

Brain Health Programs and Practice Building

And so I study trauma, and I studied addictions, And I'm one of the few psychiatrists nationwide who's also trained in ketamine and MDMA and cannabis and psilocybin therapy, because when you look at the way these treatments work, they seem to work very similarly to the indigenous people have described using ayahuasca, which is that they help people feel safe enough to remake meaning around past traumatic events.

And so when you look at the data, how many people have heard of the transgenerational inheritance of trauma? There's lots of people now, so this is like a really common understanding, which is really good, but that also is hopeless if we don't know that we can do something about it.

So, in 2022, we published a paper in combination with MAPS and Rachel Ahuda at Mount Sinai, Ben Kalmendi at Yale, and led by Candice Lewis at Arizona State University to show that trauma is in fact reversible on the epigenetic layer of code.

So we never knew that trauma was reversible in terms of the memory that's stored. Trauma is fear-learning. PTSD is a disorder that comes from fear learning, depression, anxiety, ADHD, also other disorders that come from learning.

We can extinguish fear, as B. F. Skinner said back in the early 20th century, we extinguished fear by relearning safety. Psychedelic medicines work by helping us to extinguish fear learning on the epigenetic code by radical safe experiences.

Safety being the key word. And so that's what I study, and I develop wearable technology that gives us some of the benefits of that safety to heal on-the-go in real life, wherever we are, even if we don't have access to the wonderful miracle that are psychedelic medicine.

and it's called Apollo Neuro, and so we have new studies coming out comparing lots of different psychedelic medicines, how they work, they activate the safety response system, we make meaning from traumatic experiences and how technology and AI are here to help us cure mental illness in the next 10 years.

We are super excited to add Supar to our mission partners. And that means you can use it in your practice, you

could set up Suparsuppers. To find out more go to goevomed.com slash supar and we'll send you where you need to find more about it and to how you lead your community to learn more systemic chronic inflammation.

Check out Supa. I recognize that we have a brain crisis. And ultimately, this got real for me. I was the one guy in functional medicine whose story wasn't, oh, I got chronically ill and had to make my way back.

But I just knew that this was it as soon as I heard about it. Because I'd been in the space for 10 years and realized that in an integrated medicine world, People don't speak the same language, and we need a common language to bring this community together.

And I saw that functional medicine could be that language. I believe that it is that, language and that's still why it's the functional forum. It's not the longevity forum, it not integrated forum because the common languages everything.

So what we In my judgment, the incredible work that Kat and Dr. Bredesen and many others have been doing, you know, it showcases what's possible. But also, like, if we expect there to be another 100,000 Kat Toopsies, I don't think it's going to happen because, Kat, The dedication that you have to your art and your craft and learning for all of these years, You know I just don' think that the doctors that already think like that are already here.

They're already in this place. So we need to make it easy. And so I wanted to bring Dr. Ryan Arnold up because he and I have become really close friends in the last few years.

He's here from Thousand Oaks, California. Uh, Ryan has definitely the sexiest functional medicine website. So if you want to have some website envy, go to clavahealth.com.

But Ryan is basically, is a, he's a physician, a functional physician who has built a brain health program into his practice. He has two locations and is growing quickly.

And this is what I think is necessary for the next stage of functional medicine because ultimately we need to build capacity to reverse these brain diseases, whether it's mental health, where it is menopause brain, or there is cognitive decline.

Closing Remarks and Future Events

This is a priority and Ryan is doing it. Ryan, welcome. Thank you, all. Thank You, James. And just want to thank you all for being here. I think it's such an honor to speak amongst some of my people I admire, like Dr.

Toops and Dr Bredesen, who brought us to be here I. Think that we stand on the shoulders of giants. We get to apply these concepts to our patients. i started in a longevity-based practice when I realized that what modern medicine was providing was not moving the health conversation forward.

And what I then realized is that the ultimate longevity play is our brain and the brain health. So when you see the work and this study that they've published is just the the penultimate effort of many studies that have come before that are shown this just not enough that that system would adopt it.

I consider myself a survivor of academic medicine 20 years ago. I've been in it for 20. Academic medicine is where you go to test good ideas and never practice them.

We can live in a world now where we can practice and put these into play and not wait for the enemy of perfect to be something that can actually save a life tomorrow.

It's exciting for us to be in this space. In our practice, we have brought a team around this, kind of mimicking what Dr. Toops and Dr Bredesen have advocated for, which is there's no one perfect provider that knows this.

It is going to a be team of therapists, of nutritionists, coaches that are going be a part of that. And so that's how we

find success. You implement that, you develop the relationships and leveraging the work that James and the teams through True Neura and those platforms that have helped us speak the language of the business of medicine, which they don't teach us as well in medical school, is important to help providers step out there and make that success.

So we'll share our story and kind of what we've been doing in our practice. And I'm also looking forward to having those soup our dinners as Well, I mean, down for that.

Thanks so much for being here with us for the Functional Forum. I will tell you, it's not nearly as fun watching it on YouTube as it is to be here in person.

We're gonna be doing a series of events over the year in San Francisco and also going to other places all around the country. If you're interested in joining us, make sure you are on the email list.

And I look forward to seeing you at the next event. Thanks for much being her. See you next time.